This edition of European Journal of Arrhythmia & Electrophysiology features several illuminating case reports. Right ventricular (RV) perforation due to pacemaker insertion is a rare though potentially fatal complication. It has been thought that this complication is more common with active fixation leads than with passive fixation leads. However, in the study reported by Ayati et al. no statistically significant difference in RV perforation between active versus passive fixation leads was found (0.5% versus 0.3%; p=0.3). This is to be considered a valuable contribution on this topic. Furthermore, Ayati et al. also present a rare case of bilateral pneumothorax.

Guglielmi describes the diagnosis of atypical left dominant arrhythmogenic cardiomyopathy causing sustained ventricular tachycardia in a 56-year old man. This case report points out an important concept, already well indicated by pathologists, that arrhythmogenic cardiomyopathy can also invade the left ventricle.

A series of thought-provoking editorials are also included in this edition on topics such as the recent PARADIGM-HF study, arrhythmia in congenital heart disease, and new clinical evidence on the subcutaneous implantable cardioverter-defibrillator (S-ICD). Important questions are discussed by Bontempi and colleagues about the patterns of use, clinical outcomes and cost-effectiveness of cardiac resynchronization therapy for elderly patients.

The European Journal of Arrhythmia & Electrophysiology staff would like to thank all the contributors to this edition, from organisations to individuals and, especially, the Editorial Board for their invaluable support and guidance. We hope you find the selection of articles in this edition stimulating and, as ever, we welcome feedback on any of the papers.