where he steered high impact research and helped to develop community programs across the UK'.

In addition to his work as the first Medical Director of the BHF, Prof. Julian served as adviser and consultant to the World Health Organization for coronary care and was the President of the British Cardiac Society . He was also the Chairman of the British Action on Smoking and Health and Chairman of the National Heart Forum, which focused on the prevention of heart and circulatory disease in the UK. In recognition of his influence worldwide, Prof. Julian was awarded the prestigious Gold Medal of the European Society of Cardiology in 1998 and in 2005 the American College of Cardiology's International Service Award 'acknowledging his outstanding contributions to enhancing cardiovascular care and education throughout the world'. Last but not least, there is another important reason for dedicating this award to Prof. Julian: he was the founding editor of the *EHJ*, serving in this role from 1980 to 1988. He gave the initial impulse and set the foundation for a Journal, which today ranks among the leading in the field of cardiovascular medicine.

References

- Julian DG. Treatment of cardiac arrest in acute myocardial ischaemia and infarction. Lancet 1961;2:840–844.
- Lawrie DM, Greenwood TW, Goddard M, Harvey AC, Donald KW, Julian DG, Oliver MF. A coronary-care unit in the routine management of acute myocardial infarction. *Lancet* 1967;**290**: 109–114.
- 3. Julian DG. The evolution of the coronary care unit. *Cardiovasc* Res 2001;**51**:621–624.
- Kouwenhoven WB, Langworthy OR. Cardiopulmonary resuscitation. An account of forty-five years of research. Johns Hopkins Med J 1973;132:186–193.



I had the honour of meeting Prof. Julian in 1978 when, immediately after my graduation, he started working in the prestigious Cardiac Care Unit directed by Prof. Attilio Maseri. I delighted in listening to these two giants of cardiovascular medicine discussing complex clinical cases and taking life-saving decisions before the advent of echocardiography, computed coronary angiography, and cardiac magnetic resonance. This was long before I dreamed of ever becoming Editor-in-Chief of the *EHJ* but was certainly one of the moments that instilled in me the true love for this profession of ours.—Filippo Crea.

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Global Spotlights

I visited Prof. Julian's department in Newcastle in 1980 and was deeply impressed not only by his brilliance and clinical acumen but also by the depth and breadth of his ability to link clinical cardiology to basic science, on the one hand, and to cardiovascular epidemiology, on the other hand.—Eugene Braunwald

The 2020 Olympic/Paralympic Games and Covid-19 in Japan

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After a delay of 1 year due to the Covid-19 pandemic, the 2020 Tokyo Summer Olympics have finally started on 23 July in Japan, but without spectators at most stadiums (*Figure 1*). The Paralympics will follow

shortly from 24 August. More than 200 countries participate in the Tokyo Olympic Games where ${\sim}11\,000$ athletes and 4000 athletic support staff gather for ${>}2$ weeks of competition. Another 5000 athletes

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Figure 1 The appearance (A) and inside view (B) of the National Stadium, the main stadium of the 2020 Tokyo Olympic/Paralympic games, Tokyo, Japan (The Japan Sport Council: https://www.jpnsport.go.jp/corp/english/tabid/382/Default.aspx).

will attend the Paralympics. In the 125 years of history of the Olympics since 1896 in Athens, which includes 32 summer games and 23 winter games, this year's Tokyo summer Olympics/Paralympics would be memorized as a quite unusual one due to the Covid-19 pandemic.

Eight years ago in 2013, Tokyo was awarded the 2020 Summer Games with enthusiasm all over the country under the slogan of the reconstruction from the Great East Japan Earthquake disaster in 2011. However, starting late in 2019, the Covid-19 pandemic has dramatically changed the situation in the world, forcing Japan to postpone the 2020 Summer Games for 1 year. However, contrary to the somewhat optimistic expectations, the world is still suffering from the Covid-19 pandemic in 2021 including Japan. The International Olympic Committee (IOC), led by the president Thomas Bach, has consistently encouraged Japan to hold the Tokyo Summer Games as re-scheduled last year. However, along with the progression of the pandemic in the world in general and in Japan in particular, the Japanese Olympic Organizing Committee was forced to give up foreign spectators this March and even domestic spectators in most stadiums this July, while the torch relays on public roads and public viewing activities were also cancelled in several prefectures with the high prevalence of Covid-19 including Tokyo.

To prevent the spread of Covid-19, there are two theoretically effective strategies: suppression of human flow and vaccination. However, in Japan, unlike other countries, the government has no legal power to order lockdown of a city. Consequently, the Japanese government has issued a state of emergency four times since last April. However, the more the government issues such a state of emergency, the less impact it achieves; in fact, in the current fourth state of emergency (from 12 July to 22 August), human flow has rather been increasing compared with before. In addition to athletes and athletic support staff, thousands of journalists gather in a single city, Tokyo, a potential logistical nightmare in the middle of a pandemic. Regarding vaccination, Japan has not succeeded in developing domestic vaccines yet and although the Japanese government seems to have succeeded in obtaining vaccines from foreign pharmaceutical companies, the current vaccination rate (twice) is \sim 23.1% (as of 23 July). Further effort needs to be put into the national vaccination programme. Consequently, ironically, at the same time of the Olympics, the fifth wave of Covid-19, which would be predicted as the worst wave, has been emerging day by day.

As a consequence, opinion polls in Japan show that more than half of Japanese people oppose holding Olympic games during this public health crisis. However, World Health Organization (WHO) Director General, Tedros Adhanom Ghebreyesus, who is in Tokyo for the Games, expressed his confidence in a speech to the IOC that Japan could safely host the event, although its plans would be 'put to the test'. He also said that 'There is no zero risk in life; there is only more risk, or less risk. And you have done your best'. In fact, inside and outside the Olympic village, positive cases with Covid-19 have already been reported among athletes and athletic support staff and a growing number of overseas athletes are withdrawing from the Tokyo Olympic Games due to Covid-19-related reasons. Of note, several directors of the opening ceremony were forced to resign or were dismissed just before the Games for various reasons.

Thus, in the ongoing confusion, the 2020 Olympic/Paralympic Games have finally started. In the opening ceremony of 23 July with reduced number of participants from 10 000 (initially planned) to 950, more than half of the CEOs of major sponsors, including TOYOTA and PANASONIC, did not attend. Now that things have come to this, it is sincerely expected that the 2020 Tokyo Olympics and Paralympics will end safely and successfully, where athletes from all over the world can do their best in this difficult situation.

Conflict of interest: none declared.