



Editor's Welcome

Dear colleagues!

We present to your attention the next, forty-first issue of the International Heart and Vascular Disease Journal that includes the leading, original, review articles, and a clinical case as well.

The "Leading Article" section provides a systematic review of various aspects of the etiology, diagnosis, and treatment of myocarditis. The potential of cardiovascular imaging and endomyocardial biopsy in diagnostic decision making is reviewed.

Although priorities for the treatment of myocarditis have been identified in the form of treatment of heart failure and rhythm/conduction disturbances, researchers continue to investigate the efficacy of specific therapies.

Three papers are presented in the "Original Articles" section. The first article studied the incidence of hyporesponse to statin therapy in patients with carbohydrate metabolism disorders after acute coronary syndrome in short-term follow-up. In a study that analyzed data from 400 patients, the rate of hyporesponse to atorvastatin at a daily dose of 40 mg or greater was 26.75 %. Lower baseline low-density lipoprotein levels increase the likelihood of hyporesponse to statins. Characteristics of heart failure course in patients with chronic myocarditis and the background of left bundle branch block are discussed in the second article. According to the results obtained, the complete left bundle branch block in patients with chronic myocarditis leads to the earlier cardiac remodeling with pronounced impairment of systolic and diastolic myocardial functions. In the third article the experts compared the generally accepted and developed echocardiographic criteria of severity of the course and prognosis of pulmonary embolism, establishing the most important of them.

The "Review Articles" section contains an article where the modern conditions that may lead to dysregulation of diurnal BP fluctuations — shift work, obstructive sleep apnea, and restless legs syndrome were discussed. Patients need continuous BP monitoring, including at night, to detect nocturnal hypertension and prescribe appropriate therapy to prevent disease progression and increased cardiovascular risk.

This issue presents the clinical case of a patient with a history of atrial septal defect and heart failure. The patient developed symptomatic heart failure with left ventricular ejection fraction ≥ 50 % as well as the right atrial and right ventricular dilatation. A response to treatment was observed in terms of a reduction in symptoms and an improvement in quality of life. According to the authors, the patient developed heart failure due to untimely diagnosis of congenital heart disease.

Traditionally, our journal publishes the results of the annual of the European Society of Cardiology Congress 2023. The event was attended by approximately 31,000 specialists from 150 countries. Five new clinical guideline texts and the results of 29 large randomized trials were presented.

We invite everybody to collaborate with the journal. We are waiting for your original papers, review articles, discussions, and opinions about problems, treatment and prophylaxis recommendations.

Mehman N. Mamedov

Editor-in-Chief

President of the "Cardioprogress" Foundation