



# Editor's Welcome

Dear colleagues!

We present to your attention the forty-ninth issue of the International Heart and Vascular Disease Journal, which features leading, original, and review articles.

The "Leading Article" section includes a report summarizing key findings from 40 randomized clinical trials and one meta-analysis presented at the HOT LINE sessions of the 2025 Congress of the European Society of Cardiology. The studies covered a wide range of cardiology topics, including the management of arterial

hypertension, myocardial infarction, cardiac arrhythmias, heart failure, dyslipidemia, hypertrophic cardiomyopathy, optimization of antiplatelet and anticoagulant therapy, interventional and surgical procedures, and perioperative patient management.

The "Original Articles" section features four studies. The first study analyzes the clinical characteristics of 117 patients with atrial fibrillation and cardioembolic stroke, as well as their short- and long-term outcomes. This patient population demonstrated high in-hospital (35%) and 2-year (27.6%) mortality rates. The findings indicate that adherence to anticoagulant therapy significantly reduces the risk of death within 24 months after the index event. The second study is a retrospective analysis of 85 patients, identifying factors associated with poor prognosis in individuals with stable coronary heart disease. Based on these findings, the authors developed a statistically validated model for predicting the risk of mortality and nonfatal cardiovascular complications. The third study evaluates the impact of chronic heart failure (CHF) on ceruloplasmin (CP) levels in the plasma of HIV-infected patients. The study included 240 individuals with HIV infection, of whom 160 had signs of CHF. CP levels were found to be significantly decreased in patients with CHF and HIV infection. At the same time, despite generally low CP levels, an increasing trend was observed with worsening severity of CHF. A plasma CP level of 233.5 mg/L was associated with an increased likelihood of CHF with a left ventricular ejection fraction <40%. The fourth study investigates the effectiveness of radiofrequency ablation of the pulmonary artery trunk in reducing pulmonary hypertension. The evaluation was performed using immunohistochemical assessment of sympathetic denervation completeness through detection of the S-100 marker in an experimental setting. The results demonstrate that this method is effective for verifying irreversible thermal damage to autonomic nerve fibers following the intervention.

The "Review Articles" section presents a paper focused on the efficacy, safety, and precautions associated with amiodarone in clinical practice. The drug is highly effective in maintaining sinus rhythm in patients with paroxysmal and persistent atrial fibrillation, as well as in preventing life-threatening ventricular arrhythmias. However, amiodarone may cause a range of adverse effects, including thyroid dysfunction, pulmonary fibrosis, and liver injury. It also interacts with various medications, including anticoagulants, which necessitates careful monitoring to prevent complications.

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

**Mekhman N. Mamedov**

Editor-in-Chief

President of the "Cardioprogress" Foundation