



Drug-Coated balloons-The “leave nothing behind” strategy

Dear Colleagues,

Interventional cardiology is evolving rapidly with an increased need for better results in treatment of coronary artery disease (CAD) which is the leading cause of death worldwide.

The introduction of drug eluting stents (DES) revolutionized treatment of coronary artery disease by reducing the rate of restenosis to 5%-10%. However, the use of DES in complex patients such as diabetic, small vessel disease, long lesions and coronary artery bypass grafting is still associated with higher risk of ISR.

In recent years, drug-coated balloons (DCB) have emerged as a potential alternative to combat restenosis and fulfill the goal of the DES without duplicating the limitations encountered with previously available devices. With currently available paclitaxel and sirolimus balloon coatings DCBs are showing non-inferiority vs DES in different patient settings. However, a major challenge in the management of coronary artery disease is the accurate identification of those patients who will benefit from either DCB or DES and which coating outperforms the other at long term.

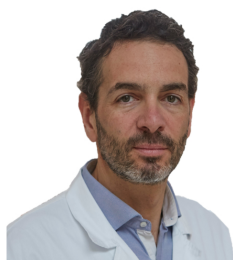
Importance

CAD has an increasing incidence, prevalence and mortality rate. In light of recent advances in various delivering and coating devices for management of CAD we introduce this series of concise reviews that will focus on the contemporary management of these patients and investigate different approaches of their care.

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Message from the Editor-in-Chief

Reviews in Cardiovascular Medicine was launched in 2000 by MedReviews, LLC, in New York, NY. This journal was conceived to fill a critical gap for clinicians who were struggling with a rapidly expanding knowledge base in cardiovascular medicine with the convergence of basic science, clinical epidemiology, and therapeutic clinical trials. The founding co-editors were David P. Faxon, MD, past president of the American Heart Association, and Norman E. Lepor, MD, who is considered a luminary in interventional cardiology. The contributing editorial board grew over time and Dr. Peter A. McCullough, MD, MPH ascended from contributing, to associate, to co-editor of the Journal. In 2018, the Journal took its next big step under the leadership of Dr. McCullough as editor-in-chief to become a truly international publication. Its offices moved to IMR Press in Hong Kong, and the editorial board was made more inclusive and representative of the world-wide contributors in academic cardiology. Additionally, the journal brought on expertise in translational medicine to help face the future of molecular medicine and its role in cardiovascular disease. Today Reviews in Cardiovascular Medicine is considered a top tier journal in cardiology with timely and comprehensive reviews covering all aspects of cardiovascular medicine including atherosclerosis, myocardial disease, arrhythmias, and valvular heart disease. The scope of papers ranges from population science, applied basic investigation, in-vitro diagnostics, and evidence-based strategy and therapeutic trials involving both pharmacologic intervention and interventional devices. The highly integrative style of the Journal anchored with evidence tables and instructive figures has garnered many citations over the years and many guidelines documents have relied upon works published in Reviews in Cardiovascular Medicine. Supplement and focus issues have been very popular among the readership and often are viewed as the most up-to-date compilations of new knowledge in cardiology and related specialties. The future is bright for academic cardiovascular medicine and Reviews in Cardiovascular Medicine is well positioned along side the clinician-investigator in the years to come as a trusted source of critical information and analysis.

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