## A New Surgical Section and More



Peter Matt Editor-in-Chief

Are you interested in a new section in Cardiovascular Medicine focusing on cardiac surgery?

Since 2023, Cardiovascular Medicine is the official journal of the Swiss Society of Cardiac Surgery. Therefore, we feel it is important to familiarize non-surgeons with invasive cardiac procedures in a simple way. For example, how is a minimally invasive aortic valve replacement or mitral valve repair performed, how an aortic root or an aortic arch replacement and is coronary artery bypass grafting still performed as it was 20 years ago? (Spoiler alert: no, it is not.)

The knowledge about heart surgery procedures is often outdated, for example, scars are described as being up to 50 cm long, the chest is cracked and much more. Cardiac surgery has evolved and is becoming less and less invasive. In addition, the outcomes are very good and the mid- to long-term results are often better than those of non-surgical therapies, with lower MACCE (major adverse cardiac and cardiovascular events) rates and improved survival.

So, we have created a new section in Cardiovascular Medicine called "How we do it". In this section, various experts will be invited (but submissions without invitation will also be accepted) to present and explain their surgical techniques step by step. Of course, non-surgical invasive techniques are also welcome. We will allow a maximum length of 10,000 characters and 3 to 5 illustrations; videos are welcome for online publication. We hope that this section will add value to the journal and interest its readers.

Besides that, the current issue of Cardiovascular Medicine contains a wide range of highly intriguing articles. An interesting review introduces the increasingly important topic of HFpEF (heart failure with preserved ejection fraction), discussing the difficulty of diagnosis and the best current treatment options. Another great article introduces and illustrates the novel technique of Pulsed Field Ablation in the treatment of atrial fibrillation. In addition, a meta-analysis discusses the issue of dental clearance before cardiac surgery. Is it really necessary, for example, before a heart valve operation, since it is often associated with stress for the patient, prolonged treatment, delays in cardiac surgery and is expensive. Other articles cover catecholaminergic polymorphic ventricular tachycardia – a rare but fatal inherited cardiac channelopathy and important differences in the interaction with environmental and genetic risk factors in severe post-statin myopathy. Two interesting case reports round off the edition.

I hope you enjoy this new and exciting issue of Cardiovascular Medicine.

Yours sincerely, Peter Matt