

“For one mistake made for not knowing, ten mistakes are made for not looking”

Dear Readers,

And yet again, summer solstice is just behind the corner. As the time passes so quickly, do we really have a chance to use it profitably? One way is to study hard and be up-to-date. Then we know new and complex syndromes or fancy and expensive drugs. But is this really what it is about? Spending less and less time with the patients or on patients' records, surely we miss a great bulk of knowledge. Knowledge, that is just in front of us and yet we close our eyes and quickly turn on computers and internet in the quest for the holy grail. Is this right thing to do? Well, patients may think of us as very smart when we constantly use incomprehensible medical jargon. But, occasionally we may jump into conclusions, that what was just described in other side of the globe, was ready to grasp in front of our noses. Thoughtful observation and thinking is as good as ground-breaking science. And for our patients may be even better.

Before we jump into the trains, planes or cars to travel for a long-awaited summer holidays, here is just the 15th issue of the Journal ready for inspection. Perhaps, not as good as the novel(s) we were planning for months to read in the shadow of the palm tree, but surely well-enough to be recommended. The 15th issue of the Journal starts with the Review article on biomarkers in aortic stenosis. The Original article on pulmonary hypertension during pregnancy is another important but fortunately rare topic. As usual, the central columns of the Journal is reserved for four exceptional clinical cases presented and commented by the managing teams. The Journal ends with the report from the 65th American College of Cardiology Congress that took place in April this year in Chicago, US.

The state-of-the-art Review on the role of biomarkers in the management of aortic stenosis has been written by doctor Jakub Podolec and colleagues from the Department Interventional Cardiology, located in our hospital. The authors postulate that various biomarkers may be complementary to echocardiography in the diagnosis and monitoring of aortic stenosis. The authors

argument that all imaging techniques, including echocardiography, are patient- (echocardiographic window), operator- (level of expertise), and equipment- (quality) dependent, making reliable assessment of the valve pathology difficult. Therefore, they review, in great details, 14 potential candidates to become an aid in the diagnostic process. As expected, the bulk of evidence is on natriuretic peptides and troponins but the authors explore also some less-known markers, such as copeptin, homocysteine or von Willebrand factor. Although not ready yet for routine clinical application, biomarker-orientated approach seems to be a step in the right direction.

Doctor Magdalena Kaźnica-Wiatr, who is an expert in the field, published an original study on a deadly coexistence of pulmonary hypertension (PH) and pregnancy. As expected the number of patients is low – only 5 due to rarity of this deadly mixture. Doctor Kaźnica-Wiatr presented in detail the patient's background that led of PH and applied management. This study is in line with previous reports that demonstrated poor outcome of those patients. A glimmer of hope is the observation that if PH-specific therapy was introduced, the outcome was a bit better, however, it is very far from satisfactory results. An interesting discussion, enriched with contemporary references, is another strong point of this article.

It has been numerously reiterated that clinical cases of rare cardiovascular diseases are the cornerstone of this journal. Therefore, we live up to the words and present three cases from our center and one from the long-term collaborators in Lublin. Perhaps, we shall start from the guests. Doctor Diana Stettner-Leonkiewicz and her colleagues report the case of left atrial myxoma that partially migrated into the left ventricular cavity during cardiac cycle. But this is not the end... Such cases has been extensively published in the literature. What is peculiar about this case is the fact that as myxoma has been countlessly protruding into the left ventricle, some of its parts “infected” mitral apparatus. The simi-

lar mass as in the left atrium was found in the mitral chordae intraoperatively. The histopathology confirmed the identical structure of both tumors, providing evidence on the local spread of the tumor. The next three cases come from our center and the team who routinely deals with diseases of the myocardium. This time, they present two rare cases of true “electric” disorders that lead to disastrous complications of sudden cardiac arrests. Doctor Katarzyna Holcman et al. reports the case of the young male, previously healthy and active, who while watching football match (beware of the incoming Euro 2016) underwent aborted cardiac death. The thorough diagnostic tests revealed that he suffered from atypical Brugada syndrome. Doctor Holcman underlined the value of Ajmaline challenge tests, that ultimately helped with the diagnosis. Very interesting and informative discussion is really worth-reading. Obviously, the patient had implantable cardioverter-defibrillator (ICD) fitted and was advised not to watch football matches any more... The second, much rarer form of channelopathy, was written by doctor Sylwia Wiśniowska-Śmiałek and colleagues. The background clinical situation really mirrors the previous one as again healthy young adult suddenly dropped dead while walking down the street. Out-of-hospital cardiac arrest traditionally equaled death but thanks to increasing awareness, this situation is changing rapidly. As was in this case, when the victim was expertly

resuscitated by the passersby's. Afterwards, the patient spend long time in the Intensive Care unit but eventually was discharged without any neurological damage. Now was the question what really happened. We pondered numerous possibilities but ultimately diagnosed him with very rare condition of Short QT-syndrome – a kind of reverse of well-known Long QT-syndrome. In the discussion section, the authors describes this rare syndrome and give diagnostic guidance. The last case report is written by doctor Karolina Dzierwa and is about a young adult who has been diagnosed with eosinophilic myocarditis. Again this is a rare condition and requires endomyocardial biopsy to confirm the diagnosis. Doctor Dzierwa presents in details the diagnostic pathway we used to establish the correct diagnosis. There is something more to it and please find it for yourself. Interesting pictures form the pathology are another advantage of this article.

The Journal is closed by the report, written by doctor Pawel Rubis, from the 65th American College of Cardiology Conference that took place in Chicago, US. Thanks to the modern technology, one can access scientific content of any congress almost simultaneously as it is displayed. However, in-person meetings still holds strong and it is always good to hear what they say across the Atlantic ocean.

Hope that also this time, the Journal satisfy your already high expectations. Have a good read!!

Piotr Podolec
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