

## Editorial



### From Editor-in-Chief: Gains of the year, acknowledging reviewers, welcome to a new Editor, current issue, key trials at AHA 2021, updates on pandemics and painful loss

Dear readers,

The year 2021 is approaching its end and when looking back, we can see that our journal has made a progress especially in quality of its content and international diversity of our authors, reviewers and Editors. For past year we evaluated and published manuscripts submitted from 25 countries (Afghanistan, Brazil, Czech Republic, China, Cyprus, Egypt, France, Greece, Hong Kong, India, Iraq, Italy, Kazakhstan, Kyrgyzstan, Mexico, Pakistan, Poland, Rwanda, Russia, Slovakia, Tunisia, Turkey, Ukraine, United Kingdom and Vietnam), we have reviewers from 19 countries (Fig.1) and we welcomed our new Editors on thoracic surgery from Italy, CV surgery and transplantation from Ukraine, CV imaging, CT, MRI from Italy, and now we welcome Dr Narendra Kumar as arrhythmia, EP, MRI Editor from UK and look forward for our mutual collaboration in evaluating and producing, making available to science community evidence-based knowledge.

Our reviewers for year 2021 are from 19 countries: Australia, Belgium, Brazil, Canada, Egypt, Germany, Greece, India, Italy, Kazakhstan, Kyrgyzstan, Mexico, Monaco, Romania, Russia, Slovakia, UK, Ukraine, and USA. We would like to thank them for their dedicated voluntary work and contribution to evidence-based medicine, and excellent review reports. We are grateful to our top reviewers who evaluated more than once manuscripts this year: Phillippe Tagjhi, Belgium; Philipp Sommer, Germany; Zhenisgul Tlegenova and Marat

Aripov, Kazakhstan; Abai Turdubaev, Kyrgyzstan; and Ferhat Piskin, Turkey.

The most read and downloaded articles for the year of 2021 and past years are presented in Table 1. We as Editors analyze constantly the most read and downloaded articles through different channels also accessed from Crossref - monthly top articles list and on social media as well. We have been observing interest in review articles and case reports, innovative technologies images and research articles and systematic reviews, hopefully high quality articles will receive the acknowledgment in form of citations they deserve. We as editors and our external reviewers put much effort in unbiased peer-review thorough evaluation, recommendations for improvement of content and presentation of manuscripts. We have gained readers from 199 countries and 7669 cities around the world, we have followers on Twitter now from 27 countries and on Facebook from 80 countries.

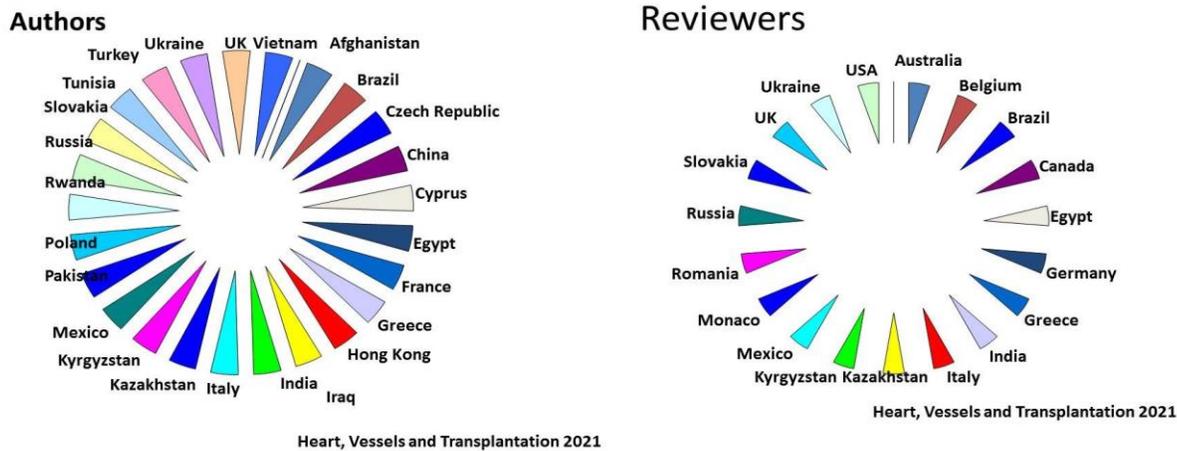
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**Figure 1. Distribution of authors and reviewers of the Heart, Vessels and Transplantation journal for the year 2021**

Table 1. Most downloaded articles in 2021					
Year	ISSUE	TITLE	DOI	DOWNLOADS	HITS
2021	Vol 5 2021; Issue 1	What is new with AF guidelines 2020?	10.24969/hvt.2021.243	1390	1823
2021	Vol 5 2021; Issue 1	Answer to the quiz on page 37: Electrocardiogram	10.24969/hvt.2020.240	1293	1148
2021	Vol 5 2021; Issue 1	The diagnostic and prognostic role of amino-terminal pro-brain type natriuretic peptides in pediatric cardiac diseases and pulmonary hypertension	10.24969/hvt.2021.244	1288	1517
2021	Vol 5 2021; Issue 1	Quiz: Electrocardiography	10.24969/hvt.2020.239	1283	1230
2021	Vol 5 2021; Issue 1	From Editor-in-Chief: On current issue, guidelines and updates, pandemics, academic advancement, ethics, and diversity	10.24969/hvt.2021.245	1268	1591

\*Data are retrieved on December 8, 2021

In this December 2021 issue of the journal you may find 2 invited Editorials underlining the new recommendations in recent ESC guidelines 2021 presented at ESC 2021 congress - on cardiovascular disease prevention and valvular heart disease; 2 research manuscripts on the role of cardiopulmonary exercise testing in perioperative evaluation or patients undergoing CABG and association of inflammation, assessed by simple blood markers and circadian patterns of prehypertension and hypertension; teaching illustrative review on evaluation and management of

aorta injury as a result of blunt chest trauma; case report on large patent ductus arteriosus closure in a toddler with low birth weight; innovative approach in management of right coronary artery chronic total occlusion, when the arterial access was impossible, occlusion site was retrogradely accessed through femoral vein and transeptal puncture; interesting quiz on multimodality imaging of a LV mass that spurred discussions - see letters to the Editors

Recently, the 3<sup>rd</sup> major cardiovascular meeting of the year - American Heart Association 2021 was held and important trials in the field of cardiothoracic surgery and cardiology presented at this meeting draw attention (1). AVATAR study demonstrated that surgical aortic valve replacement in asymptomatic severe aortic stenosis reduced by 54% risk of death, myocardial infarction and hospitalizations, suggesting benefit of early surgery for severe asymptomatic aortic stenosis (2). CTCR-MVS trial compared the strategy of concomitant tricuspid valve repair in patients undergoing mitral valve surgery (degenerative mitral regurgitation) and less than severe tricuspid regurgitation (TR) with tricuspid annular dilatation. Authors demonstrated the lower rate of progression to severe TR in tricuspid repair group (0.6% vs 5.6%,  $p < 0.05$ ), however there was an almost 5.5 fold excess in permanent pacemaker implantation in tricuspid repair group. More studies and longer follow-up are needed (3). PALACS trial revealed that posterior left pericardiotomy during open heart surgery reduced postoperative atrial fibrillation in patients undergoing coronary bypass surgery or aortic valve replacement or repair -18% vs 32%,  $p < 0.001$  (4).

Interesting results were presented for sodium glucose co-transporter -2 inhibitor (SGLT2) empagliflozin in patients with heart failure: EMPEROR preserved (5) and IMPULSE trials (1) and glucagon like peptide-receptor antagonist (GLP-RA) in diabetes patients with cardiovascular disease (6). Empagliflozin reduced hospitalizations by 29% and improved quality of life irrespective of concomitant diabetes in patients with HFpEF - EF > 40%; improved living with cardiomyopathy score and was associated with less kidney failure at 90-day follow up in acute decompensated heart failure. GLP-RA epeglenatide is shown to be safe and reduced nonfatal stroke, nonfatal myocardial infarction and cardiovascular death irrespective of concomitant SGLT2 therapy (6). So they can be used together with SGLT2 inhibitor in diabetes mellitus patients with cardiovascular disease.

Exciting results for subcutaneous ICD were reported in PRAETORIAN trial, that showed noninferiority of

subcutaneous ICD as compared to transvenous ICD in delivering appropriate shock therapy (7).

The 2<sup>nd</sup> year of pandemics is also coming to the end, and new virus mutations emerged (8, 9). More vaccines are available now, and 3<sup>rd</sup> booster doses have been shown to be effective in increasing immunity and also effective against mutations (10). Booster doses are authorized for use in adults and in children (11). The recent large registry study from France covering 3,200,000 older >75years old population found no excess of myocardial infarction, stroke or pulmonary embolism after vaccination (12).

New antiviral drugs molnupavir (Merck) and paxlovid (Pfizer) are promising COVID treatment options, they have been shown to reduce hospitalizations by 50% and 89% respectively in mild and moderate COVID patients and molnupavir is authorized for use in UK and FDA EUA is expected (13).

The updated living guidance for clinical management of COVID-19 is released by WHO (14). European Society of Cardiology also released guidance for diagnosis and management of cardiovascular disease during COVID-19 pandemics (15, 16). The link to both documents can be found on our COVID—19 page of website – [www.hvt-journal.com/COVID](http://www.hvt-journal.com/COVID).

WHO set the goals to vaccinate 40% of world population this year and 70% - next year (17), so the vaccines should be made available in all countries.

On November 12, 2021 we lost a prominent cardiologist, scientist, Nobel Peace prize winner and our teacher academician Evgeniy I.Chazov (18). We pay tribute and provide sincere condolences and deep sympathy to his family and colleagues.

Gulmira Kudaiberdieva  
Editor-in-Chief

Heart, Vessels and Transplantation

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