Editorial 383

## Featured in this issue

The current issue of the Anatolian Journal of Cardiology features publications from our pediatric cardiologist colleagues. In addition, the study titled "Impact of early (3 months) dual antiplatelet treatment interruption prior to renal transplantation in patients with second generation DES on perioperative stent thrombosis and MACE," by Ali Doğan et al., is of particular importance, since it sheds light on one of the most current topics in cardiology. There have been many studies carried out examining the recommended duration of dual antiplatelet treatment for patients with stents. Some of these studies have focused on short- term antiplatelet treatment of 3-6 months, while others have looked at long-term dual antiplatelet treatment for over 12 months to decide whether the treatment is effective. What have we learned from all these studies? Long-term dual antiplatelet treatment is effective in preventing ischemia. However, it comes with a cost. And that cost is bleeding. Bleeding is important because it is associated with mortality. Therefore, the ischemic and bleeding risks of the patient must be taken into consideration when determining the duration of post-stenting dual antiplatelet treatment. The logical decision is to prescribe long-term dual antiplatelet treatment for patients with a high ischemic risk and low bleeding risk, and short-term treatment for patients with a high bleeding risk and a low ischemic risk.

One of the biggest shortcomings of large randomized trials is related to patient selection. The inclusion and exclusion criteria of these studies lead to under-representation of patients seen in clinical practice. It can also be argued that researchers tend to be selective even among patients who fulfill the inclusion criteria. For this reasons, the representation of patients we see in clinical practice in randomized controlled trials is problematic. This situation makes it difficult to apply the findings of trials to the patients excluded from these trials. At the top of the list of patient groups excluded from randomized trials are patients requiring renal replacement therapy. This study carried out by Ali Doğan et al., entitled "Impact of early (3 months) dual antiplatelet treatment

interruption prior to renal transplantation in patients with second Generation DES on perioperative stent thrombosis and MACE," analyzing short-term dual antiplatelet treatment for patients requiring renal transplantation provides information about the use of antiplatelets in this specific clinical presentation.

Also featured in this issue are an article by the esteemed Professor Altan Onat, who passed away a few months ago, and a memorial written by the esteemed Professor Hüsniye Yüksel, who worked alongside him for many years. In his work titled "Turkey's top publications in cardiovascular medicine in the past 25 years: evaluation of its impact," Professor Altan undertook the great effort of reviewing the important cardiovascular-related publications released in our country in the last 25 years. Professor Altan used to examine the cardiovascular publications from our country and analyze both the qualitative and quantitative aspects on a regular basis. I believe he hoped to not only assess the current situation, but also to motivate fellow colleagues in the cardiovascular field.

Professor Altan Onat was an extraordinary individual. He made great contributions to the field of cardiology in Turkey. For many years, he held the position of general secretary and chairman of the Turkish Society of Cardiology. He played a big role in promoting the Turkish Society of Cardiology, undisputedly the most established medical society in our country, to its current position. I am a personal witness to the fact that he kept working on his scientific studies until his last breath. Despite his medical problems, he would come to the society's headquarters every week to work with his assistant. He would perform scientific research and write articles. The fact that at the time of his passing he had several articles pending publication in various journals is profound proof that he really did work until the end.

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