

## Selexipag for Pulmonary Hypertension, TAVI and more

Atrial septal defect closure can be performed surgically or via transcatheter intervention, yet comparative outcomes remain inconsistent between children and adults. Kannady et al from Indonesia in their meta-analysis synthesized observational evidence to evaluate procedural success, complications, and peri-procedural characteristics across both populations.

Transcatheter aortic valve replacement (TAVR) is the standard therapy for severe aortic stenosis, particularly in elderly patients with comorbidities. Simple biomarkers to predict mid-term mortality are still needed. Aslan et al from Türkiye evaluated the prognostic value of the preprocedural neutrophil percentage-to-albumin ratio for 2-year all-cause mortality after TAVR.

Serum miR-107 may have significant potential in diagnosing cardiac hypertrophy in maintenance hemodialysis (MHD) patients and is a potential biological indicator for cardiac hypertrophy in MHD patients. Li et al from China found this result in their study.

Patients with atrial fibrillation (AF) undergoing transcatheter aortic valve implantation (TAVI) often require long-term oral anticoagulation, which may not be appropriate for those at high bleeding risk. Performing left atrial appendage closure (LAAC) during TAVI can reduce the risk of thromboembolism while avoiding the need for prolonged anticoagulation. Kıvrak et al from Türkiye did same-session TAVI and LAAC in AF patients with high bleeding risk and found that it was technically feasible and showed an acceptable short-term safety profile.

Tokgöz et al from Türkiye assessed the efficacy and tolerability of the oral IP receptor agonist selexipag as part of sequential triple combination therapy in patients with pulmonary arterial hypertension. This is such an important study that two well known expert in this topic Roberto Badagliacca and Khodr Tello wrote an editorial on this study. Thanks all the contributors.

Najafov and Alekberov from Azerbaijan aimed to assess the prognostic significance of clinical, biochemical, and duplex ultrasound parameters in predicting ASCVD, and to determine the prevalence and predictors of preclinical atherosclerosis in dyslipidemic patients without clinically evident CAD.

And a case report, letters, e-page originals...

I hope this new issue of our journal will be interest of our readers.

### EDITORIAL

**Çetin Erol**

*Editor-in-Chief, Ankara, Türkiye*

DOI: 10.14744/AnatolJCardiol.2026.4



Copyright@Author(s) - Available online at anatoljcardiol.com.  
Content of this journal is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License.