THE ANATOLIAN JOURNAL OF CARDIOLOGY



Endocarditis, Leptin, Pulmonary Hypertension...

Venepally et al from USA reviewed non-bacterial thrombotic endocarditis (NBTE) as a systematic review of cases. New findings and predictors of in-hospital mortality among patients with NBTE.

Yiğittürk et al from Turkey investigated the dose-dependent effects of leptin on human umbilical vein endothelial cells (HUVECs) wound healing model and eNOS production. They suggest that leptin may be a potential proliferative agent via eNOS on wound healing. Promising findings.

Simple, inexpensive, accessible markers are required in the diagnosis of prosthetic valve and intracardiac device endocarditis, which are difficult to diagnose. Hamzayev et al from Turkey concluded that CRP value of \geq 105 mg/dL is a strong indicator for the diagnosis of infective endocarditis.

Liver-spleen (L/S) ratio, which is one of the strong indicators of hepatosteatosis, and epicardial adipose tissue (EAT) volume was found to be a strong predictor risk factor of cardiovascular disease. Poyraz et al from Turkey found it very useful.

Candan et al from Turkey investigated whether left atrial functions which evaluated speckle tracking echocardiography (STE), classic echocardiographic and clinic parameters predict appropriate ICD shock in patients undergone ICD implantation for hypertrophic cardiomyopathy. Clinically good results.

Efficacy and safety issues, and predictors of survival in patients with idiopathic and congenital heart disease-associated pulmonary arterial hypertension (IPAH and CHD-APAH) who were under macitentan therapies were evaluated by Kaymaz et al from Turkey. See the results if you are interested in this topic.

And again new cases, letters and original images.

I hope this issue will make our readers happy with its scientific content.

EDITORIAL

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DOI:10.5152/AnatolJCardiol.2022.10