

Atrium

In this issue, Fernando A. Navarro discusses the origin and use of the term *tako-tsubo* and illustrates the various ways to describe this entity.

The issue contains 3 editorials commenting on original articles. In the first, Moreno and Metha discuss a work by Galvão Braga et al. that evaluates, through propensity score matching, the prognosis of patients with a diagnosis of acute myocardial infarction who undergo primary percutaneous coronary intervention depending on whether they underwent culprit-only or complete revascularization (215 patients in each group). After a median follow-up of 2.35 years, the group that underwent complete revascularization had a lower risk of major adverse cardiovascular events. As noted by the authors of the editorial, because the article by Galvão Braga et al. is a retrospective observational study, the results should be interpreted with caution, especially considering that, after 8 clinical trials, it is not clear that complete revascularization reduces the risk of major adverse cardiovascular events. It is possible, however, that in the “real world” certain factors related to the health care process may be associated with better outcomes after complete revascularization.

In another editorial, Cabezas-Agrícola warns of the worldwide increase in the incidence and prevalence of diabetes mellitus, especially type 2 diabetes, since it is expected that this disease will affect more than 600 million persons by 2040. All this is reflected in the article by Orozco-Beltrán et al., which describes the trend in mortality due to diabetes mellitus in Spain from 1998 to 2013, through an ecological time-trend study based on data from the National Statistics Institute in Spain. The authors report a decrease in the standardized mortality rate during this period throughout the region, with the highest rates being found in the Canary Islands.

In the last editorial in this issue (which is open-access, together with the corresponding original article by Saltijeral et al.), Civeira and Plana describe the problems of the treatment of familial hypercholesterolemia in children and adolescents, given that there is no solid evidence that would justify early treatment; furthermore, it is difficult to start life-long treatment with potential adverse effects in this population. However, the authors present convincing arguments for such treatment, even in the absence of clinical trials. Given these considerations, the related article by Saltijeral et al. is of special interest. The study is based on the SAFEHEART registry and reports the follow-up data (median, 4.69 years) of 217 children and adolescents with this condition; only 68% of them were taking statins, wide variability was found in statin prescription, and only 41.5% had low-density lipoprotein cholesterol levels < 130 mg/dL. These data undoubtedly reflect the complexity of the treatment of these patients but, at the same time, the study serves as an example of the benefit of obtaining high-quality clinical information from registries.

The next original article, by Pericàs et al., describes a cohort of 154 patients with a definitive diagnosis of *Enterococcus faecalis* endocarditis. Colonoscopy was conducted in 31 of 109 patients with an unclear source of infection and in 6 of 45 patients with an identified source. In the first subgroup, a colorectal tumor was diagnosed in 31 patients, 4 of

which were invasive carcinoma, while in the second subgroup, there was only 1 case of colorectal adenoma. The prevalence of colorectal carcinoma was estimated to be 17 times higher than that in the Spanish population in the same age range and by sex. The study is retrospective and colonoscopy was not conducted systematically; therefore, these findings should be considered exploratory. However, because of their importance, a specifically designed project should be undertaken to confirm or refute the proposed hypothesis.

In another original article, Shin et al. investigate the pathophysiology underlying coronary spasm in 183 patients by using optical coherence tomography to compare coronary spasm segments with nonspasm segments after an ergonovine provocation test. The study found that thrombus and plaque erosion were more common in the former, but it is unclear whether this was a cause or a consequence of coronary spasm.

In the last original article, Aguirre-Camacho et al. present the validation of the Spanish version of a specific quality of life questionnaire for patients with pulmonary hypertension (the CAMPHOR questionnaire) and demonstrate its validity and reliability in this setting, which will undoubtedly be useful for research and clinical practice in this field.

The development of a large number of highly effective oncological therapies to control numerous cancer cell strains has markedly increased survival in these patients. This in turn has given rise to major challenges for cardiologists, such as the diagnosis and treatment of cardiotoxicity and the long-term increase in cardiovascular morbidity and mortality among survivors. Consequently, we decided to publish a series of articles on this topic, 2 in the present issue and 2 in the next. The first of the articles in this issue is the position paper on cardio-onco-hematology in clinical practice drawn up by the Spanish Society of Cardiology, the Spanish Society of Medical Oncology, the Spanish Society of Radiation Oncology and the Spanish Society of Hematology. This position paper aims to update knowledge of cardio-onco-hematology to promote the development of local multidisciplinary teams, with a view to improving the cardiovascular health of patients with cancer. The second article on the topic is a review by López-Fernández et al. that discusses currently available cardiac imaging techniques for the early detection of changes in myocardial function in patients undergoing anticancer treatment and in survivors. The article demonstrates that 3-dimensional echocardiography, myocardial strain, cardiac magnetic resonance, and computed tomography are enormously useful for minimizing the impact of cardiotoxicity.

As always, don't forget to take a look at the excellent images in this issue or read the Scientific letters and Letters to the Editor, which will undoubtedly stimulate an enriching debate, or to take part in our monthly ECG Contest.

Ignacio Ferreira-González
Editor-in-Chief