

## Featured articles in this issue

In this issue of the Anatolian Journal of Cardiology, there are several articles that will draw readers' attention. In an experimental study, Topal et al. investigate the effect of rutin, an antioxidative agent, in preventing cisplatin-induced cardiac damage, and demonstrate probable intermediary mechanisms behind the protection provided by rutin. The concept of cardio-oncology has been a popular topic in the fields of both cardiology and oncology in the last decade. Some cardiotoxic agents may lead to irreversible myocardial damage, thereby increasing mortality and morbidity. Knowing of specific mechanisms and preventive measures for those mechanisms would be valuable.

In their provocative article, Li et al. assess the utility of high-sensitive C-reactive protein (hsCRP) in decision-making for patients with gray-zone (0.75-0.80) fractional flow reserve. Although there are some background differences between the study groups, this study suggests that hsCRP is an important factor in predicting outcome and may be valuable in decision-making.

Another study assesses the association between a relatively novel inflammatory marker, GlycA, and cardiac events using coronary computed tomographic angiography. Consistent with the inflammation hypothesis, GlycA levels were found to be associated with major adverse cardiac events and all-cause death. The predictive benefit of GlycA beyond that provided by classical inflammatory markers, such as hsCRP, requires further study.

Radiation exposure is an important issue in interventional cardiology, especially in electrophysiology laboratories, and technology that will reduce exposure is growing. In this issue, Koca et al. show that electroanatomical mapping-guided catheter ablation with limited or zero fluoroscopy was feasible in 76 pediatric patients.

Özyılmaz and Püşüroğlu report in their article that micro T-wave alternans (WTWA) was associated with a hypertrophic cardiomyopathy (HCM) sudden cardiac death risk score in 117 patients with HCM. MTWA was also found to be associated with major cardiac events (sudden death/ventricular tachycardia or fibrillation/appropriate shock). This study suggests that MWTA may provide an important clue in the risk assessment of HCM.

Tudoran et al. evaluate pulmonary artery pressure and some other hemodynamic parameters obtained from echocardiographic examinations of female patients with hyperthyroidism. I believe the findings in this article will be of interest to readers who are interested in pulmonary hypertension.

I hope readers will enjoy this issue of our journal.

**Mustafa Kılıçkap, MD, MSc**  
**Editor**  
**Ankara, Turkey**

**Address for Correspondence:** Prof. Dr. Mustafa Kılıçkap, Ankara Üniversitesi Tıp Fakültesi,  
Kardiyoloji Anabilim Dalı, Ankara-Türkiye  
E-mail: mkilickap@yahoo.com

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