

This issue of *Advances in Pulmonary Hypertension* focuses on Group 2 pulmonary hypertension, a common cause of pulmonary hypertension with many diagnostic and therapeutic challenges. We read with great interest these wonderful articles put together by a spectacular group of authors, which provide excellent insights to the multiple nuances of this condition. This is clearly not a “one size fits all” disease, despite how commonly it presents to our clinics. In reading through this issue, a common theme reflected is how useful these articles will be to both experienced providers and all learners alike.

Jonathan Kusner and Richard Krasuski first provide an updated review of the echocardiographic evaluation of the right heart in pulmonary hypertension. The right ventricle (RV) is a complex structure, and we now have multiple markers to assist in its assessment. These can be highly useful in distinguishing primary right from left heart disease. The 2022 European guidelines incorporated an updated approach to echocardiographic assessment of possible pulmonary hypertension and this is nicely illustrated in the article. Their review is a helpful, focused update for experienced providers as well as guide for further study for all learners.

No discussion of Group 2 PH is complete without a review of heart failure with preserved ejection fraction (HFpEF), and this issue has a spectacular review on this topic from Yogesh Reddy. He addresses critical points in invasive assessment, including the use of exercise hemodynamics to uncover Group 2 PH. HFpEF can frequently masquerade as precapillary PH via resting hemodynamics and a careful assessment of pretest probability for left heart disease can help identify when exercise is most likely to be diagnostic. This is an up-to-the-minute updated approach to diagnosis and management that is geared to learners at all levels.

While not as common a cause of PH in pediatric patients, Group 2 PH is increasing in prevalence, as wonderfully detailed by William Patten and Usha Krishnan. Critical points of diagnosis with echocardiography and invasive hemodynamics are reviewed, as are the most common causes of pediatric Group 2 PH and therapeutic approaches.

The PHPN Corner of this issue is an excellent article on nonpharmacologic management of heart failure by Traci Stewart. While an array of medications is now available to alter the natural history for heart failure patients, including those with Group 2 PH, simple prescriptions do not always ensure clinical

success. Detailed patient education on day-to-day assessments and early identification of when to seek medical attention is crucial to management. This review highlights the importance of a multidisciplinary, team-based approach to patient care throughout the patient's journey. Teaching our patients appropriately termed, “self-care,” can improve clinical outcomes and empower patients and providers alike.

We are so very grateful to our outstanding contributing authors. Thank-you for continuing to share your knowledge and experience to improve the care of our patients. To our readers, we hope you enjoy and learn as much from this issue as we did in putting it together.

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