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Cover image:

Images and photo relating to pulmonary hypertension secondary to sickle cell disease, including: archived photo of James Herrick, MD, discoverer of sickle cell disease, as he lectures a class of students and physicians on his findings early in the 20th century; an artist's rendering of RBC morphology in sickle cell disease; and an echocardiogram in a patient with the disease and pulmonary hypertension. Catheter artifact is seen in the right atrium and ventricle. (Echocardiogram courtesy of Robert Machado, MD; sickle cell image reprinted with permission of estate of Roger Hayward). Art collage by Michael McClain.

Editor's Memo

A New Editor—Building on a Tradition of Excellence



It is with great pleasure that I assume the position of Editor-in-Chief of *Advances in Pulmonary Hypertension*. The journal is now in its 6th year of helping physicians by informing them of important trends in caring for patients with pulmonary hypertension. For the past 2 years, Vallerie V. McLaughlin, MD, as Editor-in-Chief in 2005 and 2006, has shown me how to orchestrate the journal into a state-of-the-art reference for pulmonary hypertension that has become a stunning success, with a circulation that has grown to more than 36,000. From her timely topic selections to her meticulous, watchful eye, Dr McLaughlin has set the stage for the journal's continued success and has provided us with healthy momentum to this end. An enormous credit goes to the journal's founding editor, Victor F. Tapson, MD. Dr Tapson's efforts in launching a journal with critical reviews of the newest areas of diagnosis and treatments for patients with pulmonary hypertension heralded a successful 3-year tenure, a tradition that continues today.

In this, the 21st issue of the journal, Roxana Sulica, MD, has taken the role of lead editor, overseeing three detailed reviews of the associations between hemoglobinopathies and pulmonary hypertension. The complex pathophysiology is evident in the review by Drs Gladwin and Kato. The clinical aspects of sickle-cell-associated pulmonary hypertension are critically examined by Drs Machado and Castro, and a look into the clinical facets of thalassemia-associated pulmonary hypertension is provided by Drs Morris, Vichinsky, and Singer. These reviews remind us of the broad scope of conditions that contribute to a seemingly increasing prevalence of pulmonary vascular diseases that is being recognized throughout the world. Finally, an expert roundtable discusses the similarities and differences between pulmonary hypertension associated with hemoglobinopathies and pulmonary arterial hypertension in its classic definition, clearly calling attention to the need for therapeutic clinical trials.

I hope that you will enjoy this timely issue of *Advances in Pulmonary Hypertension*, the only journal of its kind, and share in the rewards of future issues.

Ronald J. Oudiz, MD

Editor-in-Chief