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Guest Editors for this issue:

Srinivas Murali, MD, FACC

Director, Division of
Cardiovascular Medicine
Medical Director,
Gerald McGinnis CVI
Allegheny General Hospital
Pittsburgh, Pennsylvania

Ioana Preston, MD

Assistant Professor of Medicine
Tufts-New England Medical Center
Boston, Massachusetts

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Guest Editor's Note: This issue of *Advances in Pulmonary Hypertension* deals with a potpourri of important clinical surgical considerations in patients with pulmonary arterial hypertension (PAH). Both surgical treatment options for PAH and medical management of PAH patients undergoing general surgery are reviewed, with a focus on providing physicians with practical clinical guidelines for patient care. Drs Dana McGlothlin and Teresa De Marco have summarized the preoperative risk assessment and postoperative management of PAH patients undergoing general surgical procedures, examining the predictors of good and poor clinical outcome and providing clinical pointers that every physician should know. Dr Reda Girgis and his colleagues have clearly defined the selection criteria and timing of referral of PAH patients for lung transplantation, while updating everyone on the new UNOS lung allocation scoring system. Finally, Drs Michael Madani and Stuart Jamieson share their institutions' phenomenal, robust experience with pulmonary thromboendarterectomy for patients affected by chronic thromboembolic pulmonary hypertension (CTEPH), emphasizing that surgery remains the only option for these patients. A panel discussion with both medical and surgical experts highlights their viewpoint on how physicians should confront the challenges they face when their PAH patients are being considered for general surgical procedures. Discussion of this subject matter is undoubtedly timely as PAH patients are surviving longer and physicians are increasingly challenged by these clinical issues related to their care.

Srinivas Murali, MD

Editor's Memo

Professionals in Pulmonary Hypertension



The Pulmonary Hypertension Resource Network (PHRN) is "the nurses, respiratory therapists, technicians, pharmacists and other healthcare professionals who serve as the medical support network for people dealing with this devastating disease." They are all part of Pulmonary Hypertension Association (PHA) and do everything from enhancing communication among PH medical professionals to facilitating and conducting professional development, research, and education. The 3rd PHRN Symposium will take place from October 11 to 13, 2007, just outside of Washington DC in Crystal City, Virginia. Produced by and for allied health professionals working in PH and involving many leading PH specialists, it's a rare educational opportunity for PH nurses and other allied health professionals. Now a biennial event, almost 500 attendees are expected at the symposium. Refer to page 88 of this issue for more details on this exciting event.

Elsewhere in this issue you will see an announcement encouraging physicians to refer patients to local support groups or, if there are none in the area, to have their centers work with PHA to start one. Support groups can put patients and caregivers in touch to share experiences and learn more about PH, and can even create the sparks needed to raise money for PHA, which uses the funds for research, travel scholarships to meetings for patients, and educational programs. If you are not connected to a support group, you and your patients are missing out!

I would like to thank Srinivas Murali, MD, the lead Guest Editor for this issue, who was charged with coordinating and overseeing the content, and Ioana Preston, MD, who assisted Dr Murali. They have done an outstanding job in getting together an impressive team of writers who together have produced an informative collection of manuscripts and a Roundtable covering the difficult challenges of surgery in patients with PH.

Ronald J. Oudiz, MD

Editor-in-Chief

Publisher

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PHA Office

Pulmonary Hypertension Association
801 Roeder Rd. Suite 400
Silver Spring, MD 20910-4496
301-565-3004, 301-565-3994 (fax)
www.phassociation.org

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Editorial Offices

Advances in Pulmonary Hypertension, DataMedica,
P.O. Box 1688, Westhampton Beach, NY 11978
Tel (631) 288-7733 Fax (631) 288-7744
E-mail: sbelsenchapman@aol.com

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Cover image:

Larger image depicts lung pulmonary embolism with lines of Zahn. Smaller photo reveals pulmonary artery during lung transplantation. (Custom Medical Stock Photo, 2007.)