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Cover Image
The key to effective therapy is to unlock the benefits of new options and combinations, as suggested by these images. (Copyright, Fotosearch, 2008)

Editor's Memo

Introducing CME Credit– and More Dynamic Content

This first-quarter 2008 issue marks the first time *Advances in Pulmonary Hypertension* will be offering continuing medical education (CME) credit. We are pleased to make this service available through the University of Michigan Medical School. Upon completing the questions related to each topic, readers will be able to claim up to 2.0 hours of CME credit while learning the latest about pulmonary hypertension. This issue also kicks off our new International Corner, with an initial commentary by Adam Torbicki, MD, PhD, of Warsaw, Poland. His thoughts on the fourth-quarter 2007 issue are provided in English and Polish.

It is hoped that these exciting additions will help further the study of pulmonary hypertension across the globe. Working toward this goal, I hope you will join me at PHA's Eighth International PH Conference and Scientific Sessions this June in Houston, Texas. With more than 60 scientific and clinical posters, four presentations by distinguished investigators, and sessions for patients and family members, this Conference is unique and not to be missed.

James Maloney, MD, the lead Guest Editor for this issue, with the assistance of Todd Bull, MD, superbly edited the leading-edge content covering medical management, clinical trials, and combination therapies. The first article by Jeremiah Depta, MD, and Richard Krasuski, MD, reviews the recently updated American College of Chest Physicians guidelines on medical management of pulmonary arterial hypertension. The article by Zeenat Safdar, MD, covers ongoing phase 2 and phase 3 clinical trials that are likely to be completed soon and will potentially provide evidence for new treatment options. Ioana R. Preston, MD, a member of the *Advances in Pulmonary Hypertension* Editorial Board, covers the ever-changing and often contested spectrum of combination drug therapy for pulmonary arterial hypertension. This paper is a comprehensive summary of available and emerging evidence, mostly in support of using at least two different PAH drugs for additive and perhaps synergistic effects on the pulmonary circulation.

Finally, a Roundtable Discussion led by Karen Fagan, MD, covers an increasingly important consideration, namely, the use of pulmonary arterial hypertension therapy in a broader group of patients than have been studied to date. This has important implications for the patients in question, and also for future patient groups to be targeted for treatment with PAH-specific drugs. Panel members included Kamal K. Mubarak, MD, Zeenat Safdar, MD, Aaron Waxman, MD, PhD, and Roham T. Zamanian, MD.

Ronald J. Oudiz, MD
Editor-in-Chief

Guest Editor's Commentary

This issue of the journal offers a simultaneous look at our past and future in the search for effective treatments for pulmonary arterial hypertension. Thanks to an ever-increasing number of randomized controlled trials, we now have the luxury of an evidence-based approach to therapy. Yet, although these treatment paradigms have improved patients' symptoms and outcomes, it is undeniably clear that we still have far to go. Combination therapy for pulmonary arterial hypertension provides a new and exciting approach with a growing body of evidence supporting its efficacy. At the same time a number of novel agents are working their way through early phase trials. It is truly an exciting time in the treatment of pulmonary arterial hypertension as we attempt to unlock the mysteries of this disease.–**James Maloney, MD**

Program Description
The mission of *Advances in Pulmonary Hypertension* is to serve as the premiere forum for state of the art information regarding diagnosis, pathophysiology, and treatment of pulmonary hypertension. The 2003 Venice revision of the World Health Organization Classification serves as a guide to categories of pulmonary hypertension addressed by the Journal. While focusing on WHO Group I PAH, the other categories (Group II, Left heart disease; Group III, Associated with lung disease and/or hypoxemia; Group IV, Thrombotic and/or Embolic Disease; Group V, Miscellaneous) are also addressed. This mission is achieved by a combination of invited review articles, Roundtable discussions with panels consisting of international experts in PH, and original contributions. In addition, a special section entitled "Profiles in Pulmonary Hypertension"recognizes major contributors to the field and serves as an inspiring reminder of the rich and collegial history of dedication to advancing the field.

Objectives
- Provide up-to-date information regarding diagnosis, pathophysiology, and treatment of pulmonary hypertension.
- Serve as a forum for presentation and discussion of important issues in the field, including new paradigms of disease understanding and investigational trial design.
- Recognize and preserve the rich history of individuals who have made major contributions to the field via dedication to patient care, innovative research, and furthering the mission of the PH community to cure pulmonary hypertension.