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Guest Editor for this issue:

Kristin Highland, MD, MSCR
Assistant Professor
Division of Pulmonary and Critical Care Medicine
Director, Pulmonary Hypertension Clinic
Medical University of South Carolina
Charleston, South Carolina

Publisher
Pulmonary Hypertension Association
Michael D. McGoon, MD, *Chair of the Board*
Rino Aldrighetti, *President*
Donica Merhazion, *Associate Director of Medical Services*

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

ISSN: 1933-088X (print); 1933-0898 (online)

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: sbelsonchapman@aol.com

Publishing Staff
Stu Chapman, *Executive Editor*
Susan Chapman, *Managing Editor*
Heidi Green, *Associate Editor*
Gloria Catalano, *Production Director*
Michael McClain, *Design Director*

Advances in Pulmonary Hypertension is circulated to cardiologists, pulmonologists, rheumatologists, and other selected physicians by the Pulmonary Hypertension Association. The contents are independently determined by the Editor and the Editorial Advisory Board. All past issues of the journal are available at: www.PHAssociation.org/Medical/Advances_in_PH/

Cover Image
This illustration symbolizes the malar ("butterfly") rash that is characteristic of patients with systemic lupus erythematosus. The artwork was provided by Martin J. Somsky.

Guest Editor's Memo

Targeting the Connection Between PAH and Connecive Tissue Disease

Pulmonary hypertension (PH) is associated with all of the connective tissue diseases (CTDs), but it is most commonly seen in systemic sclerosis (scleroderma), followed by systemic lupus erythematosus, and the antiphospholipid antibody syndrome. Although the prognosis for CTD-associated PH has improved with the availability of numerous pulmonary arterial hypertension therapies, it still carries a substantially poorer prognosis than idiopathic pulmonary arterial hypertension, and necessitates additional research into its treatment and prevention.

Further complicating treatment, CTD-associated PH is often multifactorial and can be caused by any of the World Health Organization categories of PH. In this issue of *Advances in Pulmonary Hypertension*, the contributors review what is known regarding the epidemiology, pathobiology, and treatment of PH, with a focus on pulmonary arterial hypertension in systemic sclerosis, systemic lupus erythematosus, and antiphospholipid syndrome.—**Kristin B. Highland, MD, MSCR**

Editor's Memo

Highlighting Current and Future Perspectives in the Journal

The recent increase in awareness and recognition of pulmonary hypertension is in part related to the efforts of Rheumatologists who are now screening many of their patients for this deadly disease. This issue, guest edited by Dr Kristin Highland, focuses on the spectrum of connective tissue diseases and their relation to pulmonary hypertension. While there is still much to learn about how and why patients with connective tissue diseases develop pulmonary hypertension, the benefits of treatment for many of these patients are apparent. This issue also spotlights rheumatologist, Dr Virginia Steen, whose efforts in the world of pulmonary hypertension, particularly on screening and early diagnosis, are close to my heart. For our new International Corner, Dr Nick Morrell provides commentary on combination therapy issues covered in the previous issue of *Advances,* with an international perspective.

I am pleased to preview important content to be published in *Advances in Pulmonary Hypertension* in the next 2 issues. The journal will be focusing on 2 meetings held earlier this year that provided relevant and timely updates on pulmonary hypertension. First, physicians who were unable to attend the World Health Organization 4th World Symposium on Pulmonary Hypertension will be pleased to see the next issue and its comprehensive discussion of key findings from this meeting. Among the topics to be covered are: current perspectives on pathophysiology, diagnosis and assessment of pulmonary arterial hypertension (PAH), interventional and surgical modalities, endpoints and clinical trial design in PAH, as well as inflammation, growth factors, and pulmonary vascular remodeling.

In the following issue, the journal will feature content from another important meeting, this year's 8th International Conference and Scientific Sessions of the Pulmonary Hypertension Association. The information from this meeting will be gleaned from physicians who led the sessions and who are among the leading investigators in the field. We look forward to providing articles on these important issues and welcome your feedback. Please send your comments and suggestions to our executive editor at Stulink@aol.com.

Ronald J. Oudiz, MD
Editor-in-Chief

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.