Journal of Rare Cardiovascular Diseases: “One finger cannot lift a pebble” – cooperation as the only way to move forward

Dear Readers,

Gaining more experience and exchange of knowledge in one thing is the only way to advance the field of rare cardiovascular diseases (RCD). Taking care of RCD patients on a daily basis quickly leads to realization that working together in multi-disciplinary teams is the only way to deliver the best possible management to the patients.

The cases presented in this issue of the Journal are perfect examples that such cooperation is more than recommended – it is often mandatory in RCD patients. What possibly could we have achieved without eye specialists or rheumatologists in Marfan syndrome or without hematologists in amyloidosis or without vigilant obstetricians in poor female with peripartum cardiomyopathy? Our recitations are endless. Please stop for a second to reflect how often we simply forget to ask for a second opinion from a college who is only few meters away...

The 10th (another anniversary!) issue of the Journal starts with the educational Review on the contemporary therapies in pulmonary hypertension, putting the special strength on chronic thrombo-embolic pulmonary hypertension (CTEPH). Dr Barbara Widlińska under the leadership of dr Grzegorz Kopeć elaborate not only on pharmaco-therapy but also on novel invasive treatment of CTEPH which is balloon pulmonary angioplasty (BPA). Importantly, our Center is one of the few places in Poland where actually such treatment can be offered to the patients who are disqualified from surgical pulmonary endatherectomy due to prohibitive operative risk.

The true “salt” of the Journal are clinical cases. The first, authored by Dr Pawel Rubis and colleagues, concerns peripartum cardiomyopathy. This is a very rare condition that affects pregnant women at the end of third trimester or as it was in this case few months after uneventful delivery of twins. Thanks to the vigilant obstetrician, who could have also easily dismissed the patient, she was promptly send to our Department where appropriate treatment including Bromocriptine was initiated. Fortunately, all ended well and the patient was discharged home in good clinical status to take care of her babies. The second case, reported by Dr Monika Komar and co-workers, concerns the middle-age patient with very rough course of cryptogenic patent foramen ovale (PFO) and related complications. After few cardiac interventions, including primary angioplasty for acute myocardial infarction and percutaneous closure of PFO and diagnosis of thrombophilia (mutation of Leiden V factor) the patient was eventually discharged home with life-long oral anticoagulation. Next case comes from our Partners from Chrzanow and is about the patient with multiple myeloma and systemic amyloidosis as a long-term complications. The case is enriched with a well-written discussion which gives an overview on amyloidosis and cardiac amyloidosis in particular. The forth case is from Katowice and once again touches the problem of mediastinal masses.

The Editors hope that the current issue of the Journal will, again, serve its main purpose which is to raise awareness on the complexity of rare disease that may occasionally require multi-disciplinary to truly help our patients.

Piotr Podolec
Editor-in-Chief
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