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State of the Art: Clinical Management of Pulmonary Hypertension

Guest Editor:

Dr. Shigefumi Fukui
Department of Cardiology, Fujita Health University, Toyoake, Japan

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Message from the Guest Editor

Dear Colleagues,

In the past couple of decades, the management of pulmonary hypertension (PH) has significantly evolved, especially in the field of pulmonary arterial hypertension (PAH) and chronic thromboembolic pulmonary hypertension (CTEPH). Briefly, early diagnosis, PH-specific therapies, and initial combination therapy for PAH has improved prognosis, as well as multimodal imaging, invasive intervention such as pulmonary endarterectomy and balloon pulmonary angioplasty, and PH-specific therapies for CTEPH. However, there are still significant issues to be clarified. Although right ventricular function is considered to be an important prognostic predictor of PH, its adaptation for increased afterload varies among patients and underlying diseases. The treatment algorithm for patients with idiopathic, heritable, drug-associated, and connective tissue-disease-associated PAH in the latest ESC/ERS PH guidelines differentiates initial combination therapy and monotherapy according to the presence of cardiopulmonary comorbidities. [...]
For further reading, please follow the link to the Special Issue Website at:https://www.mdpi.com/journal/jcm/special_issues/2PGW3VC05S

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Journal of Clinical Medicine Editorial Office
MDPI, Grosspeteranlage 5
4052 Basel, Switzerland

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