



Cardiac Magnetic Resonance (CMR), Coronary Computed Tomography Angiography (CCTA) and Invasive Functional Assessment in Coronary Disease

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Message from the Guest Editor

In recent years, the diagnostic approach and therapeutic management of patients with coronary heart disease has changed dramatically. The possibility of performing an accurate non-invasive diagnostics (i.e., CCTA) capable of discriminating patients has found its consecration in important international studies. In the same way, the possibility of having accurate data on myocardial viability (i.e., CMR) has made coronary angioplasty an increasingly precise and effective tool for the patient. In this panorama, having both hyperemic (e.g., FFR) and non-hyperemic (e.g., iFR) functional evaluation indices has made it possible to better treat patients who do not have pre-procedure evaluations, significantly reducing inappropriate angioplasty and the number of stents implanted. At the same time, the evaluation both by CMR and by pressure wire (IMR, CFR) of the coronary microcirculation in addition to pharmacological tests has allowed us to better classify the various types of angina. The purpose of this Special Issue is to analyze the new discoveries in the field of coronary heart disease by focusing on research in the invasive and non-invasive diagnostic field.





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