Editorial Scope

AsiaIntervention Journal is an international, English language, peer-reviewed journal whose aim is to create a forum of high quality research and education in the field of percutaneous and surgical cardiovascular interventions. It is released twice in paper and electronic formats. AsiaIntervention will apply for indexation in Science Citation Index® (ISI), SciVerse Scopus, MEDLINE®/PubMed®.

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Manuscripts must be accompanied by a cover letter. This letter should:
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Acknowledgements

The contributions of individuals whom the authors would like to acknowledge should be listed in the Acknowledgements section above the Funding and/or Conflict of interest statement.

Funding

All sources of funding should be acknowledged in this section.

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In no more than 3 sentences (i.e., 125 words=900 characters with spaces), please explain the clinical significance of your article, underlining the “take-home” message that you believe a reader should retain for their daily practice.
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From what used to be frequently called the "Far East" to what is now China, focusing on the challenging treatment of left main disease and bifurcation lesions. Immediately after this "far eastern" event, we present articles dedicated to innovations for interventional medicine. The field of bifurcation lesions is very well represented in this issue of the Journal, with special emphasis on the HORIZONS-AMI study in acute myocardial infarction (AMI) patients undergoing primary percutaneous coronary intervention.

Abstract

The HORIZONS-AMI trial compared a provisional stenting strategy in bifurcation lesions to a protected approach in non-bifurcation lesions. The aim of this study was to assess the clinical outcomes in patients with ST-segment elevation myocardial infarction (STEMI) undergoing percutaneous coronary intervention (PCI) with a provisional stenting strategy in bifurcation lesions. The results of the HORIZONS-AMI trial showed a lower incidence of target vessel revascularization in the provisional stenting group compared to the protected approach group.

Key Points:

- In HORIZONS-AMI, bifurcation lesions in which a provisional approach was planned had no worse clinical outcomes compared to a protected approach.
- The provisional stenting group had a lower incidence of target vessel revascularization.

Conclusions:

The provisional stenting strategy in bifurcation lesions showed similar clinical outcomes to a protected approach in STEMI patients. This highlights the potential for using a simpler approach in certain bifurcation lesions.

Keywords:

- Bifurcation lesions
- Percutaneous intervention
- STEMI
- Provisional stenting

References:

1. Department of Interventional Cardiology, Jagiellonian University Medical College, Krakow, Poland; 2. Icahn School of Medicine at Mount Sinai, New York, NY, USA; 3. LeBauer CV Research Foundation/Moses Cone Hospital, Greensboro, NC, USA; 4. London, UK; 5. St. Jude Medical, St. Paul, MN, USA; 6. EuroIntervention, Brussels, Belgium.

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NEW INNOVATION

The goal of the new innovation section is to describe a new innovation as it develops from its first appearance in the blueprints, through bench testing and animal models, leading to final use on patients. We are particularly interested in technical descriptions of devices, since a common complaint from interventionalists is that devices often have poor or incomprehensible technical reports. Articles submitted under “New innovation” must not exceed 1,500 words (including 5 references, figure and/or moving image legends and tables). If the authors exceed the word count, the Editors will not consider the manuscript for peer review.

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TOOLS AND TECHNIQUES

This is a series of educational articles, in line with conventional European practice, covering basic and advanced interventional and diagnostic techniques. The series is allied to the educational arm of EuroPCR and will have interactive, online learning and communication content.

The chapters are written with the intention of providing a clear practical, step-by-step teaching source and reference for cardiovascular intervention. The emphasis is very much on a practical approach and the complete work will encompass all the major cardiovascular procedures: coronary and peripheral intervention, structural heart disease and invasive imaging.

Generally a Tools and Techniques Clinical or Tools and Techniques Statistics article is published on an “invitation only” basis.

IMAGE IN CARDIOLOGY

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The patient underwent a TA VI procedure with a CoreValve right common iliac artery was dilated with a 7×40 mm balloon, advanced on a 0.018” guidewire in the crossover position. After haemostasis system, the SoloPath™ 14-18 Fr was successfully inserted from the right femoral artery to allow for advancing the aortic prosthesis. We decided not to perform the pre-stent struts protruding from the LM in the aorta. Finally, we performed partial “crushing” of the stent struts from the metallic elements of the prosthesis.

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The submiting authors will present the actual treatment.

Part 2 - The invited experts’ opinion

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