

From the Editor's Desk

Indranill Basu Ray, MD

Tulane University Heart and Vascular Institute, Tulane University School of Medicine, New Orleans, LA

On a flight from Atlanta last winter, a discussion with my hospitalist copassenger who was fresh out of internal medicine residency helped me decide what kinds of articles to invite for this special internal medicine issue of *The Ochsner Journal*. More than 30 physicians, including some who are preeminent in their fields, have presented their research into and analysis of a wide variety of topics related to the practice of internal medicine. We have emphasized topics that still have knowledge gaps or are controversial and have tried in this issue to answer some of the challenging questions that internists face in their day-to-day practices.

Among these topics are heart failure, pneumonia, diabetes, and deep vein thrombosis. These conditions are common, but knowledge about them is a changing paradigm. Dr Le Jemtel from the Tulane University Heart and Vascular Institute presents a panoramic view of developments in the field of heart failure during the past 3 decades. His article covers the knowledge gaps, misconceptions, and future direction in the treatment of systolic heart failure. With more than 1 million admissions every year and a readmission rate almost one-fifth that number, pneumonia presents a big challenge in terms of diagnosis, treatment, and prevention for primary care physicians and hospitalists alike. Dr Alpesh Amin from the University of California at Irvine reviews this problem and provides helpful insights gleaned through years of experience heading a major academic hospitalist program. Diabetes remains the seventh leading cause of death in the United States, with estimated health-care costs in the billions of dollars. As new drugs have come to market, physicians have attempted to better control the disease through pharmacologic management. Although these drugs may be effective for controlling blood sugar, a decade's evidence shows that they can have significant cardiovascular side effects, and Dr Debabrata Mukherjee's article reviews the cardiovascular side effects of currently available diabetic drugs. Drs Steve Jenkins and Paul Michael provide a contemporary view of interventional techniques available to treat deep vein thrombosis, a common disease that has considerable mortality and morbidity if it is not appropriately treated.

Our many contributors have explored a variety of other topics. Dr Arnab Ray and his group from the Department of Gastroenterology at Ochsner Medical Center chronicle their experience with fecal microbiota transplantation as a treatment for *Clostridium difficile* infection. This article is a must read, given the increasing menace of this infection in hospitalized patients. Dr Shobha Joshi reviews the screening of hepatitis C. Internists need to understand the screening process, so patients can be properly diagnosed and treated with the highly effective emerging pharmacotherapy. Dr Rampolla's article gives the practicing internist an overview of lung transplantation. Dr Bazan reviews carotid occlusive disease, a disease mired in many controversies with the emergence of newer endovascular treatment techniques. Dr Bazzano from the Department of Epidemiology at Tulane provides a well-constructed review of the treatment of acute hypertension, a disease that lacks sufficient data from clinical trials, unlike its chronic counterpart. Dr Pejic presents information on familial hypercholesterolemia and the effects of drug treatment and lifestyle changes. Resident handoff, the transfer of patient information and responsibility from one physician to another, is an important component of any academic medicine training program. Dr Breaux and colleagues from Ochsner Medical Center report preliminary results of a quality improvement project focused on handoff methods. Dr Re presents an authoritative review on the development of intracrinology both as a concept and as a science. Dr Rao and his colleagues provide a comprehensive overview of the Louisiana Clinical Data Research Network and its role in leveraging regional and national resources to improve clinical research.

The issue also includes a number of cardiology articles. Dr Owen Obel, an electrophysiologist at the University of Texas Southwestern Medical Center in Dallas, shares his experience with treating supraventricular tachycardia, a common arrhythmia faced by internists in hospital medicine and primary care settings. Cardiac resynchronization therapy (CRT) has changed the treatment of heart failure by reducing morbidity and mortality in a select group of appropriately chosen patients. The article by Drs Morin and Jaffe elucidates the current concepts for

choosing the right candidates for CRT therapy. Dr Nidal Abi Rafeh and his group from the Interventional Cardiology Division of the Tulane University Heart and Vascular Institute present a systematic review of interventions to treat pseudoaneurysm of the ascending aorta. Drs Frohlich and Quinlan, two of the country's foremost health experts, present an overview of the public's perception of coronary risk factors.

Mind-body medicine has become an important complement to medical therapy. Thanks to research being conducted all over the world, the links that connect the mind and the body are slowly being unraveled. Dr Denninger and his colleagues from the Benson Henry Institute for Mind Body Medicine at Massachusetts General Hospital review the existing data from clinical trials that measured global and targeted transcriptomic, epigenomic, or proteomic changes in peripheral blood as a mechanism of different mind-body therapies. This excellent analysis presents findings from 15 trials on this interesting

topic. We review the effects of meditation on cardiovascular diseases.

The end of life is also covered in this issue. Frequent exposure to death leads to anxiety and stress among oncology nurses, but these reactions often remain unaddressed. Dr Karen Rice and colleagues report on their innovative research into grief expression and resolution. Dr Marcus's article provides insight into how to deliver the news about a life-limiting diagnosis, and Dr Blais models appropriate communication for integrating goals of care with the patient's desires and prognosis.

This issue would not have seen the light of the day without the help and support of many people. My wife Julie helped review some of the invited articles and thus made my job easier despite being in the middle of a busy teaching semester. And I thank all the contributors who, despite being extremely busy in their academic practices, accepted my invitation to contribute to this issue.