Interventional cardiology is evolving rapidly and the development of new technologies along with our evolving understanding of best treatment methods has changed the landscape of interventional cardiology significantly. This supplement to the Journal of Thoracic Diseases tries to provide a contemporary perspective over different topics of interest for interventional cardiologists but also for interventional cardiology trainees, general cardiologists and internists with an interest in cardiology.

Most people would agree that the development of transcatheter valve therapy has been a significant moment in the evolution of interventional cardiology. In this issue, Dr. Vasa-Nicotera and colleagues gives an overview (1) over new developments in transcatheter aortic valve repair (TAVR), while Dr. Claudia Walther and colleagues provides a review of current mitral valve therapies (2). Both reviews allow a glance into the future and show us how the field is continuing to develop. Peripheral vascular disease and its percutaneous treatment has also seen significant growth and Drs. Kokkinidis and Armstrong present a comprehensive overview of developments in endovascular therapy of peripheral arterial disease (3) which is especially interesting in the light of the paclitaxel-coated devices controversy which is still ongoing.

Other topics are related to coronary interventions: Dr. Antonazzo and colleagues present an umbrella review of oral antiplatelet therapy in elderly patients undergoing percutaneous interventions (4), Dr. Hizoh and colleagues present an overview of risk scores predicting outcomes in patient undergoing primary percutaneous interventions (5), while Dr. Patel and colleagues discuss ways of optimizing the outcomes of percutaneous coronary interventions in patients with stable angina (6).

Other topics are topics of general interest for all cardiologists working in the cath lab, whether performing coronary interventions, or peripheral interventions or structural interventions: Drs. Riso and Vidovich review methods of minimizing radiation in the cardiac catheterization laboratory (7). Dr. Hauq and colleagues provide a review of the topic of contrast-induced acute kidney injury or contrast-induced nephropathy (8) and last but certainly not least, Dr. Henien and colleagues reviews the very important topic of quality assurance and quality management in the cardiac catheterization laboratory (9).

I hope that you will enjoy reading the interventional cardiology-focused supplement of the Journal of Thoracic Diseases.

Acknowledgments

None.

Footnote

Conflicts of Interest: The author has no conflicts of interest to declare.

Ethical Statement: The author is accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

References

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