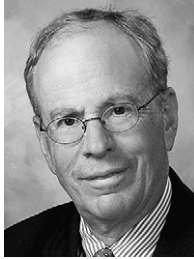


Preface



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Guest Editors

As with most surgical specialties, surgery of the heart, aorta, and great vessels is constantly changing with the advent of new diagnostic and therapeutic technologies. Today's practice of cardiac surgery is vastly different from what it was even 10 years ago, and today's cardiac surgeons, although looking forward with excitement to what tomorrow will bring, sometimes struggle with the decision of what new techniques and technologies to embrace. For those not closely associated with the practice of cardiac surgery, keeping up to date with this rapidly changing landscape is difficult, to say the least. New treatments for atrial fibrillation, aortic dissections, valvular heart disease, and heart failure are often completely unknown to those outside of our specialty. However, it is important for all surgeons to be at least familiar with how the specialty of cardiac surgery is changing and what treatment options are presently available for patients with heart disease and diseases of the aorta and great vessels. The ability to perform coronary artery bypass without the morbidity associated with cardiopulmonary bypass or the ability to repair or replace heart valves without a sternotomy or cardiectomy are just a few examples of how drastically our specialty has changed over the past decade, to the benefit of the patient. Left ventricular assist device (LVAD) technology has improved significantly in just a very short time and is now an option for many patients with end stage heart failure, as "destination" LVAD therapy has become a reality. This issue of *Surgical Clinics of North America* includes updates on all of the most rapidly changing aspects of diagnosis and treatment of common cardiac, aortic, and great vessel pathologies. We hope you find this issue a valuable resource.

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