

## Foreword



Michael H. Crawford, MD  
*Consulting Editor*

The last issue of *Cardiology Clinics* devoted to heart failure was published in 2001, and the guest editor was Dr. Young. Since then, major advances have been made in our understanding of heart failure, and new treatment options are now available. I was delighted, therefore, when Dr. Young teamed up with Dr. Narula to guest edit two issues devoted to this topic. Heart failure mortality has decreased significantly in the last 10 years mainly because of advances in therapy. It is important to know about these advances so your patients can benefit. Despite the decrease in mortality, the prevalence of heart failure is increasing. The future of heart failure is prevention. Drs. Young and Narula launch this issue with a discussion of the new direction in heart failure prevention.

The first section of this issue starts with a description of the scope of the heart failure problem. Unfortunately, many have been confused by different heart failure management guidelines from professional organizations. These are discussed, as is the relevance of the Joint National Committee and the American Diabetes Association guidelines to heart failure prevention and treatment.

The second section of this issue updates the management of advanced and decompensated heart failure. Who needs hemodynamic monitoring? What about intravenous natriuretic peptides and positive inotropes? Finally, mechanical circulatory support is discussed. I have been impressed

that these new devices are now saving lives with low risk to the patient. We have come a long way since the intraaortic balloon pump.

The last section of this issue covers the therapy for chronic heart failure. Several new drugs that affect the renin-angiotensin-aldosterone system are described. What to start first, beta-blockers or angiotensin-reducing or -blocking agents, is discussed. Finally, the use of implantable cardioverter defibrillators and biventricular pacing is detailed. The increased use of these valuable electronic devices is creating a natural synergy between heart failure specialists and electrophysiologists. Add cardiac transplant surgeons and those who put in mechanical circulatory support devices and you have the new team that manages advanced heart failure in referral centers. In many centers such a team has its own cost center independent of traditional academic departments. Welcome to the new world of heart failure management.

Michael H. Crawford, MD  
*Division of Cardiology  
Department of Medicine  
University of California  
San Francisco Medical Center  
505 Parnassus Avenue, Box 0124  
San Francisco, CA 94143-0124, USA*

*E-mail address:* [crawfordm@medicine.ucsf.edu](mailto:crawfordm@medicine.ucsf.edu)