

## Preface



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*Guest Editors*

Although heart failure is a common disorder, it is complex and there are a myriad of important clinical questions that must be answered to optimize patient management. What is the etiology? Is there left ventricular systolic dysfunction? Is there diastolic dysfunction? Is the heart remodeling, and, if so, is the remodeling process responding to therapy? How about secondary processes such as ventricular thrombus formation and changing hemodynamics with worsening valvular competency? Who should get revascularization? An implantable cardioverter defibrillator?

It is rare when a clinical tool can even begin to approach the exhaustive demands of clinical practice. In this regard, we are delighted, as guest editors for this issue of *Heart Failure Clinics*, to present a state-of-the-art review of cardiovascular magnetic resonance (CMR) in heart failure. In the articles that follow, an important distinguishing attribute of CMR—its versatility—will become abundantly clear. From a single 45–60 minute examination, CMR allows a comprehensive assessment of structure and function, viability and perfusion, and valvular function and hemodynamics, among others.

For many of these, CMR is considered the “gold standard” approach.

The contributors, all international experts with vast expertise in clinical CMR, have performed admirably in providing a succinct yet thorough review of the topics. The articles range from an introduction of the CMR techniques that are commonly used in a heart failure examination to a discussion of the value of CMR for the purposes of risk stratification and prognostication. We hope that readers will find this issue to be not only stimulating but also of practical value for the routine management of their heart failure patients.

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