

Editors' Medal 2023

Klaus A. Hausegger¹

Published online: 26 September 2023

© Springer Science+Business Media, LLC, part of Springer Nature and the Cardiovascular and Interventional Radiological Society of Europe (CIRSE) 2023

On the occasion of the CIRSE Annual Meeting, I have the privilege and pleasure to announce the Editors' Medal. The aim of this medal is to reward the authors of one of the top manuscripts published in CVIR in the preceding year. Publishing high-quality research is the main goal of our journal; however, who decides what is best? Of course, there are objective parameters which can be applied, such as the download rates and altmetrics, which are an indicator of the popularity of a manuscript and the citation rate, which may indicate the relevance of a manuscript for the scientific community. Nonetheless, these parameters are time-dependent—a manuscript published earlier in the year will have a higher chance to become recognized by the end of the year compared to a manuscript published in the second half of the year. Therefore, it is difficult and probably not fair to establish the decision on these objective, time-dependent parameters.

The decision for the Editors' Medal is a recommendation made by the Section and Regional Editors, a group consisting of 18 individuals, with the final decision being made by me as the Editor-in-Chief. This year, we have selected two manuscripts that are ranked equally among numerous other competitors. While there are other deserving manuscripts that could also be mentioned here, including them would disrupt the format of this editorial.

One of the manuscripts to be awarded this year is titled "Improved Outcomes of Thermal Ablation for Colorectal Liver Metastases: A 10-Year Analysis from the Prospective

Amsterdam CORE Registry (AmCORE)" [1]. This extensive single-centre observational study included 449 patients with liver-only metastatic colorectal carcinoma who were treated using radiofrequency or microwave ablation (RFA or MWA). The procedures were performed either under CT guidance ($n = 309$) or intraoperatively ($n = 232$). The study spanned a period of 19 years (January 2010–February 2021). The authors could show a significant improvement in the 2-year local tumour-free survival over the course of the study, improving from 37.7% early in the study to 90.2% at the end of the study with no difference between percutaneous CT-guided and open approach. This is important data to further foster the important role of local ablation specifically in the treatment of liver metastases and primary liver tumours, although these aspects were not specifically addressed in the study. Technical development and increasing experience pave the road to T-0 ablation in analogy to surgical R-0 resection. Studies like this play an essential role in supporting this advancement.

The other awarded manuscript is titled "Long-Term Effectiveness and Safety of Femoropopliteal Drug-Coated Balloon Angioplasty: 5-Year Results of the Randomized Controlled EffPac Trial" [2]. Over the past few years, the use of paclitaxel-eluting technology in peripheral arterial interventions has been the subject of extensive discussion. However, concerns regarding increased mortality after 3 and 5 years have now been addressed (as indicated in the FDA letter [3]). Nevertheless, the discussion about the increased mortality risk has overshadowed the examination of the clinical aspects, particularly the long term. The enduring benefits of drug-coated technology still need to be confirmed. Some studies report a sustained benefit in terms of clinically driven target lesion recanalization over

✉ Klaus A. Hausegger
CVIR.Hausegger@kabeg.at

¹ Department of Diagnostic and Interventional Radiology,
Klagenfurt State Hospital, Klagenfurt, Austria

5 years. However, this study did not establish any clinically significant benefit after the 5-year mark. In addition, there were no safety concerns for the DBE technology. This study is important to further stimulate the research regarding the long-term benefit of drug-eluting technology in peripheral arterial disease.

The editorial team is proud to publish such types of scientific manuscripts, and we thank the author groups for submitting their papers to CVIR.

Funding None.

Declarations

Conflict of interest There is no conflict of interest.

Ethical approval Not applicable.

Informed consent Not applicable.

Consent for publication For this type of study, consent for publication is not required.

References

1. Puijk RS, Dijkstra M, van den Bemd BAT, et al. Improved outcomes of thermal ablation for colorectal liver metastases: a 10-year analysis from the prospective Amsterdam CORE Registry (AmCORE). *Cardiovasc Intervent Radiol.* 2022;45:1074–89. <https://doi.org/10.1007/s00270-022-03152-9>.
2. Teichgräber U, Lehmann T, Ingwersen M, et al. Long-term effectiveness and safety of femoropopliteal drug-coated balloon angioplasty: 5-year results of the randomized controlled EffPac trial. *Cardiovasc Intervent Radiol.* 2022;45:1774–83. <https://doi.org/10.1007/s00270-022-03265-1>.
3. Center for Devices and Radiological Health, US Food and Drug Administration. Update: treatment of peripheral arterial disease with paclitaxel-coated balloons and paclitaxel-eluting stents potentially associated with increased mortality: letter to health care providers. <https://www.fda.gov/medical-devices/letters-health-care-providers/update-treatment-peripheral-arterial-disease-paclitaxel-coated-balloons-and-paclitaxel-eluting>. Published 2019. Accessed 8 May 2020

Publisher's Note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.