EDITORS NOTE



Editor's note to the September 2021 issue

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Published online: 14 August 2021

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Dear reader,

Apparently, our Journal has become attractive, actually already for quite some time, for submissions in the field of echocardiography, given the large number of submissions that we are receiving and are also accepting for publications. And in the echocardiography field, strain analysis has been a major topic of research and clinical application, which also has spread to magnetic resonance imaging and computed tomography. In addition, strain analysis is not limited to the left and right ventricles, but also to the atrium.

For this September 2021 issue, I have therefore selected and would like to recommend the paper entitled "Left atrial strain in the assessment of diastolic function: providing new insights into primary myocardial dysfunction in Marfan syndrome" by García-Izquierdo, E and colleagues from the Departments of Cardiology and Cardiac Surgery, Hospital Universitario Puerta de Hierro Majadahonda, Madrid, Spain [1]. They studied 127 adult patients with Marfan syndrome and 38 healthy controls, performed detailed echocardiograms and selected left atrial reservoir strain (LASr) as a surrogate of impaired relaxation. They found that LASr is reduced in patients with Marfan compared to controls, and correlated with impaired myocardial relaxation, rather than elastic properties of the aorta; this may represent an early stage of LV diastolic dysfunction. This is a well performed study and there is novelty associated with it, as diastolic function using a new parameter, such as this left atrial strain, has not been explored earlier in this patient population.

I wish you much pleasure in reading this and other papers in this issue of the International Journal of Cardiovascular Imaging.

Johan HC Reiber, PhD. Editor-in-chief.

Reference

 García-Izquierdo E, Moñivas-Palomero V, Forteza A et al (2021) Left atrial strain in the assessment of diastolic function: providing new insights into primary myocardial dysfunction in Marfan syndrome. Int J Cardiovasc Imaging. https://doi.org/10.1007/ s10554-021-02247-7

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Accepted AP4 L Strain = 44.1 % Appens HG St 10.5 Appens AAA Accepted AP4 L Strain = 44.1 % Appens AAA ACCEPTED AAA ACCEPTED AAAA ACCEPTED AAAAA ACCEPTED AAAAA ACCEPTED AAAAA ACCEPTED AAAAA ACCEPTED AAAAA ACCEPTED

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