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# American Journal of Preventive Cardiology

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## Editors' message-March 2024

As the *American Journal of Preventive Cardiology* begins its fifth year, we continue to attract and publish articles from a wide range of geographic areas globally and from an ever-expanding range of topics in the field. We continue to express our appreciation to our editorial board and contributors from around the world for thinking of the *Journal* for interesting and novel research, state-of-the-art reviews, and special articles. As we continue to expand our editorial board with dedicated experts in the field, we wish to welcome Dr. Mahmoud Al Rifai from the Houston Methodist Debaakey Heart & Vascular Center as a new associate editor. In addition, the *Journal* is interested in developing special issues around topics of great relevance to preventive cardiology. Current issues in development which will feature invited articles from key experts in the field but are also open to unsolicited submissions involve topics of New Therapies for Dyslipidemia (edited by Dr. Michael Shapiro) as well as on Women's Cardiovascular Health (edited by Dr. Martha Gulati).

In the current issue of the *Journal*, we are pleased to highlight just a few of the original research articles we hope our readership will find of interest. One such study was a multinational study examining the age- and sex-based heterogeneity in coronary artery plaque presence and burden in familial hypercholesterolemia by Nasir and colleagues. This study demonstrated females were noted to have less obstructive coronary disease across all ranges of positive coronary calcium, with the authors noting the need to further investigate the long-term prognostic implications of these differences. Another study by Agarwal and colleagues examined the association of pulse pressure with death, myocardial infarction, and stroke among cardiovascular outcome trial participants with pre-existing cardiovascular disease, and found pulse pressure to be a better predictor than systolic and diastolic blood pressure, suggesting the need for further consideration of pulse pressure in risk assessment among such patients. A third study done by Neeland and colleagues examined the effectiveness of an integrated team-based intervention program called CINEMA for improving treatment and risk factors in patients with type 2 diabetes or pre-diabetes at increased cardiovascular risk, finding such a program has continued after two years to demonstrate effectiveness with significant improvements in cardiovascular risk factors and improved use of evidence-based therapies. Also, in a paper from the REasons for Geographic and Racial Differences in Stroke (REGARDS) study, Kong and colleagues showed an increased risk of ASCVD events in those with intermediate or high predicted ASCVD risk ( $\geq 7.5\%$  10-year risk) even the absence of conventional risk factors, emphasizing the importance that risk-reducing

interventions could potentially benefit such individuals who may often go undertreated. Finally, in a study examining social and psychosocial determinants of racial and ethnic differences in cardiovascular health from the MASALA and MESA studies, Shah and colleagues showed the factors that were associated with the largest magnitude of explained differences in mean cardiovascular health score compared to White participants were income for Black participants, place of birth for Chinese participants, and education for Hispanic and South Asian participants, further demonstrating the importance of certain social determinants of health in explaining disparities in cardiovascular health.

The issue is also rounded out by an interesting Fellow's Voice piece commenting on the differences between precise and pragmatic approaches for lipoprotein(a) testing recommendations, as well as a commentary on the National Lipid Association (NLA)/American Society for Preventive Cardiology (ASPC) response to the US Preventive Services Task Force recommendation statement on screening lipid panel in children and adolescents. Finally there were short reports on glucagon-like peptide-1 receptor agonist and sodium-glucose cotransporter 2 inhibitor use among adults with diabetes mellitus according to cardiovascular-kidney disease risk, school screening programs to identify hypertension in Hispanic youth, as well as a study examining different high sensitivity troponin assays and mortality in US adults with cardiovascular disease.

The *Journal* looks forward to attracting key and novel research and review articles on important and timely topics in preventive cardiology that have implications for further developing and improving the practice of preventive cardiology in the United States and globally. We are also always open to hearing from our readership about new topics you would like to see featured as well as other suggestions you may have for us to improve the *Journal* further to best serve your needs.

### Declaration of competing interest

The authors have no relevant disclosures.

### CRediT authorship contribution statement

**Nathan D. Wong:** Validation, Writing – original draft, Writing – review & editing. **Erin D. Michos:** Validation, Writing – review & editing.

<https://doi.org/10.1016/j.ajpc.2024.100642>

Received 20 February 2024; Accepted 24 February 2024

Available online 28 February 2024

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