

Atrium

This month's article by Fernando A. Navarro in the "Into the heart of terminology" section discusses the difference between the English terms *cardiac vein* and *vein of heart*, which is much broader than the corresponding difference between the Spanish terms.

The first editorial comment, by Moya and Lidón, discusses an original article related to the *Girona Territori Cardioprotegit* project. As our readers probably know, Girona is one of the regions that has most promoted the dissemination and use of automated external defibrillators (AED). In the original article, Loma-Orsorio et al. retrospectively analyze all the electrocardiographic tracings and performance of AED between 2011 and 2015 in Girona and report that asystole was the most prevalent rhythm (42%), while ventricular fibrillation represented 23% of recorded rhythms. The authors of the editorial remind us of other similar studies, as well as the importance of the survival chain, and highlight the most important findings of the study, for example, that AED use was considered correct in most cases and that mobile deployment was the most frequently used form.

This issue also includes 2 editorial comments on clinical practice guidelines of the European Society of Cardiology. As usual, these articles highlight the most important features of each guideline, the most relevant changes compared with previous guidelines, and areas for improvement. In the first of these comments, the working group coordinated by Evangelista and San Román assess the guidelines on valvular heart disease, while in the second, the working group coordinated by Pérez de Isla and Moñux provide an in-depth discussion of peripheral arterial disease, which has a major overlap with cardiovascular disease. Translations of the guidelines to Spanish are included in this issue as special articles.

Among the original articles, Navas Tejedor et al. focus on the rare hereditary pulmonary veno-occlusive disease; specifically, on the phenotypic characterization and survival analysis of Romani patients with this disease carrying the founder mutation (p.Pro1115Leu in *EIF2AK4*) and included in the national registry of pulmonary hyper-

tension. A total of 18 patients were studied, all with the mutation, and distinct phenotypes are described according to their tolerance to pulmonary vasodilators, pulmonary histology, prognostic impact, and familial distribution.

In the next original article, López-Messa et al. analyze temporal trends in admission rates due to acute myocardial infarction, angina, heart failure, and stroke in 239 586 hospital discharges from 2001 to 2015 corresponding to hospitalizations for cardiovascular disease in Castile and León. In general, hospital admission rates showed an increasing tendency, which was especially marked for heart failure, while in-hospital mortality showed a decreasing trend, which were similar in men and women. The authors conclude that these data indicate a stabilization and decrease in hospital mortality due to vascular disease, at least partially attributable to the prevention measures established in the last few decades.

Last, the article by de Agustín et al. aimed to determine the agreement between multidetector computed tomography and invasive coronary angiography in coronary calcium measurement. Noninvasive measurements agreed with invasive coronary angiography in 83% of cases ($\kappa = 0.684$), with no significant differences between vessels and with no statistically significant influence of coronary artery calcium score. Multidetector computed tomography had high sensitivity, specificity and predictive values in the detection of coronary disease.

As always, don't forget to take a look at the excellent images in this issue or read the letters, some of which include information on notable advances in the fields of geriatrics, ischemic heart disease, critical care, and imaging. All of this will no doubt stimulate an enriching debate. We also encourage you to take part in our monthly ECG Contest.

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