Special Issue

Pulmonary Hypertension: From Pathophysiology to Clinical Management

Message from the Guest Editors

Pulmonary hypertension (PH) affects up to 1% of the world's population and 10% of people over the age of 65. The classification of PH into five groups based on the underlying pathophysiology is particularly important due to its therapeutic implications. Only the rarer groups of pulmonary arterial hypertension (PAH) and chronic thromboembolic pulmonary hypertension (CTEPH) are usually treated specifically. The scientific history of PH is composed of a number of remarkable innovations. Since the first autopsy description in 1891 and the introduction of right heart catheterisation in 1929, numerous pathophysiological, diagnostic and therapeutic advances have been made. Nevertheless, mortality among PH patients remains high; PH cannot be cured in most patients, and for certain PH groups, there is still little evidence for specific treatments. To further improve the pathophysiological understanding and treatment of PH, this Special Issue invites you to participate in this ongoing process. We look forward to receiving your submissions of original papers, review articles, and meta-analyses aimed at improving the pathophysiological and/or therapeutic knowledge about PH.

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