

Special Issue

Coronary Physiology in Clinical Practice: Fractional Flow Reserve and Beyond

Message from the Guest Editor

The class IA ESC/EACTS Guidelines 2018 recommend FFR_{myo} and iFR (instantaneous wave-free ratio) for pressure-derived and lesion specific measurements before revascularization, which is based on numerous randomized clinical outcome trials. Beyond this, there are many more resting and hyperemic indexes, such as the coronary flow reserve (CFR) index of myocardial resistance (IMR), which may be relevant in different clinical situations. In fact, to define a new gold standard in coronary assessment is rather difficult, but there is an emerging support for the idea that whole coronary circulation should be taken into account in the decision-making process, not only before but also during and after revascularization. In this Special Issue, we will focus on original and review articles dedicated to coronary physiology and combined techniques. We are interested in the coronary physiology not only of patients with coronary and myocardial pathologies but also of patients with a combination of coronary and other diseases, e.g., aortic valve stenosis or cardiomyopathies.

Guest Editor

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There has been an explosion of gene and target based research and therapeutics in the multitude of fields that compose clinical medicine. The *Journal of Clinical Medicine's* (JCM) staff and editorial board are dedicated to providing cutting edge, timely, and peer-reviewed articles covering the diverse subspecialties of clinical medicine. The journal publishes concise, innovative, and exciting research articles as well as clinically significant articles and reviews that are pertinent to the myriad of disciplines within medicine. The articles published are relevant to both primary care physicians and specialists. The journal's full-texts are archived in PubMed Central and indexed in PubMed. Please consider submitting your manuscripts for publication to our journal and check us out on-line!

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