

Letter From the Editors of *Reviews in Cardiovascular Medicine*

We are pleased to bring you our third issue of *Reviews in Cardiovascular Medicine*. Your positive input and suggestions have helped us continue to improve the journal. The goal of the journal is to provide up-to-date and concise information about clinically relevant topics in cardiology. We hope that our current format accomplishes that goal.

We all recognize that in this information age, the busy practitioner receives an enormous amount of new scientific data every day. The growth of the Internet has had a profound impact on the transmission of information and will continue to change how we receive and process scientific information. As noted on our cover, the full text of our articles can be found on our Web page, available at www.medreviews.com, and we encourage you to use our Web site to read the journal online. We know, however, that many physicians still prefer to use the printed journal format, and we will continue to publish in both venues as long as there is a need to do so.

In this issue, we have selected several interesting and important papers to present. The first is the second installment of Dr Hachamovitch's review of coronary artery disease risk assessment. In addition, new information is provided by Dr Izzo about the evolving area of arterial stiffness and its clinical relevance. We are delighted to have our distinguished editorial board present the highlights of the American Heart Association Scientific Sessions, held in New Orleans in November 2000. Included in this issue are reviews of the "Late Breaking Trials," such as TARGET, TACTICS, VMAC, INHIBIT, C-PORT PCI, Val-HeFT, MIRACL, and HATS, the results of which may impact your clinical practice. Topics of interest in the fields of valvular heart disease and hypertension are also covered.

We hope you enjoy this issue. Any suggestions are appreciated, including ideas about topics to be covered in future issues. We also offer the opportunity to publish case reports that are unique and provide important clinical insights. You can contact us through our Web site. Thank you again for your support, and we will see you again in Spring 2001. We look forward to hearing from you.

