Cardiac Failure Review is a bi-annual journal designed for busy and time-pressured cardiologists to stay abreast of key advances and opinion in a rapidly advancing field. Major developments are occurring every year in the diagnosis, management and treatment of heart failure. Guided by an experienced Editorial Board of leading physicians, this peer-reviewed journal will highlight review articles in all the areas relevant to a practising cardiologist: where advances have been made, when traditional thinking is being challenged and also where knowledge is limited and expert input can be so vital. All articles will be contributed by leading authorities within the specialist field. The journal will be distributed in print and eJournal format via controlled circulation to leading physicians within the community, and further disseminated through the free-to-access availability of its articles at CFRjournal.com

Andrew JS Coats is the inaugural Joint Academic Vice-President of Monash University, Australia and the University of Warwick, UK and Director of the Monash-Warwick Alliance.

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In this first issue we are proud to review some major themes in the world of heart failure research. Hector Ventura and colleagues from the Ochsner Clinical School review the epidemiology of the interaction of heart failure and diabetes – an area of increasing importance. These disorders cluster together more than by chance and interact to cause disability and heightened mortality, even over the already high mortality of heart failure alone. Diabetes plays an important role at every stage; it predicts the development of heart failure, it accelerates its course and it interferes with the effectiveness of certain heart failure therapies. The area is one of vital importance, especially as several new anti-diabetes therapies have been abandoned due to an excess of new cases of heart failure developing whilst on therapy.

Marco Guazzi reviews practical advice of how to assess heart failure patients for an exercise prescription, while at the other end of the spectrum Mariell Jessup summarizes the exciting “tomorrow’s world” developments in the field of left ventricular assist devices, which are fast becoming a real option for increasing numbers of end-stage heart failure patients. We have an expert review by Lisa LeMond and Sarah J Goodlin on a topic that sadly affects so many of our patients – and yet one of enormous importance to them and their carers – that of modern and effective end-of-life care, a field for too long considered a Cinderella.

There is an excellent and very detailed review of the state of the art of sleep disordered breathing in chronic heart failure. This is an enormous problem affecting 30-50% of our heart failure clinic patients, but one about which until very recently we had little in the way of developed clinical pathways or effective services, swamped as most sleep clinics are. Martin Cowie is a leader in this field with colleagues at the Royal Brompton Hospital in London and he leads the exciting study of treatment of this condition in heart failure – Treatment of Predominant Central Sleep Apnoea by Adaptive Servo Ventilation in Patients With Heart Failure (SERVE-HF) – the results of which we eagerly await. Professor Coats reviews the confusing field of heart failure with preserved ejection fraction that has been ignored for so long and is now the subject of intense debate and study. How could a feature of half or more of our patients with heart failure have been left so poorly understood and so poorly treated for so long? Readers will want to see what is around the corner in this field as the next few years unfold.

Another leading international expert, CM Yu from the Chinese University of Hong Kong leads his team in an excellent review of cardiac resynchronization therapy in the treatment of heart failure. Last, but certainly not least, Mihai Gheorghiade, Gerasimos Filippatos and colleagues review the cutting edge challenges of devising new therapies for a problem as old as the recognition of heart failure itself: what to do for the patient with acute pulmonary oedema?

Welcome to the journal and we hope you will enjoy reading it as much as we do in putting the experts together to review the fields that excite us the most.