

Controversies in Practice

The PCI landscape is ever changing. In this issue we explore changing practices in a variety of areas, including articles that challenge guidelines for on-site surgery and left main PCI, and the boundary between medical therapy and intervention for stable coronary disease. Our interviews are engaging as ever.

Gregory J. Dehmer, MD, provides insight on the debate surrounding elective PCI without on-site cardiac surgery by reviewing the definition of standard of care and evaluating the data surrounding this controversial question. Kimberly A. Skelding, MD, FSCAI, and Bonnie H. Weiner, MD, MSEC, MBA, FSCAI, attempt to assess how findings from the COURAGE trial apply, or do not apply, to current healthcare for patients with chronic stable angina. Anthony White, MBBS, PhD, and Raj Makkar, MD, address whether stenting for left main stenosis is ready for everyday practice. Their conclusion is that the data are still nebulous and that appropriate treatment

continues to be dependent on the situation. John F. Rhodes, Jr, MD, reviews the evidence base regarding a possible relationship between PFO and recurrent stroke to see if it is time to reconsider the debate.



SCAI President-elect Steven R. Bailey, MD, discusses the Society's current concerns and efforts in this issue's Society Update. Yasushi Asakura, MD, addresses the standard Japanese techniques for PCI of coronary CTOs, including guidewire and catheter selection. In our Imaging & Diagnostics column, Gary Mintz, MD, and Jean Marco, MD, share their candid thoughts about IVUS and its

impact on patient outcomes.

We end this issue with our Interview With column featuring Barry D. Rutherford, MD, who tells us about his current research and his views on recent device approvals and published data.

I hope this issue finds you well, while you find it informative. Please send us feedback about what you have enjoyed in this and past issues, and would like to see in future issues. ■

A stylized, handwritten signature in black ink, appearing to read 'Ted E. Feldman'. The signature is fluid and cursive, with a prominent loop at the end.

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