Dear Colleagues

Hope all of you had an excellent spring break. While some of us are still reeling under cold weather most of you might have had glimpse of the spring offerings. This issue of JAFIB opens with the successful completion of the first edition of International Symposium on Left Atrial Appendage (ISLAA2013, www.islaa-kc.com) in Kansas City. It was a great success with several hundred left atrial appendage enthusiasts who joined us in KC despite braving extreme weather conditions. The two day symposium successfully laid out what is known and unknown in the frontier science of LAA. There were live case demonstrations of some of the appendage exclusion technologies. There were some exciting debates on who should perform LAA exclusion to the appropriate utilization of which technology for the right niche of patients. On the heels of ISLAA 2013 preparations for 2014 have already begun.

There are several case reports, original articles and featured reviews that highlight various aspects of the diagnosis and management of atrial fibrillation. Takase et al have published their data on the predictive role of beta natriuretic peptide in the incidence of AF. Schmitt and group have presented a comprehensive review article on the potential role of ischemic conditioning in the treatment of AF. Misra and his Canadian Colleagues have presented their observations on the patterns related to anticoagulation prescription by the emergency room physicians after a new onset AF and flutter. Majority of the ER physicians seems not to adhere to the standard guidelines in place for anticoagulation in patients with AF.

A fine essay on Dronedarone by James Reiffel nicely summarizes its role in the treatment of atrial fibrillation and other cardiac arrhythmias. There is a good deal of discussion on the intricacies of its use and issues related to that. Dello Russo and Colleagues have a nice review on the role of intracardiac echocardiography in AF ablation.

The team from Maastricht Bidar et al wrote a nice article on the pathophysiology, treatment and prevention of post operative atrial fibrillation. Stress is a major trigger of cardiac arrhythmias; it exerts profound effects on electrophysiology of the cardiomyocytes and the cardiac rhythm. Psychological and physiological stressors impact the cardiovascular system through the autonomic nervous system (ANS). In their featured review Shusterman and Lampert described the impact of psychological and circadian stressors on ANS activity and arrhythmogenesis. Fitting well with the theme Lombardi and team have written a nice review article on the role of alternative therapies like acupuncture, yoga and Tai chi in the management of Atrial Fibrillation.

Despite the limitations in accurately identifying and quantifying LA scar atrial fibrosis has been recognized as a key component of that substrate, playing a critical role in conduction abnormalities in the left atrium that appear necessary to maintaining AF. Spragg summarized clinical investigations of atrial fibrosis as a factor in the development and treatment of atrial fibrillation.
in this issue. Herring and colleagues have an original paper outlining the LAA functional parameters in predictive power of CHADS\textsubscript{2}-VASc score and LA diameter for low LAA emptying velocity and LAA thrombus.

Variation in sex ratio has been a topic of debate for millennia. Our group attempted to examine the effects of exposure to fluoroscopic radiation and the sex ratio of offspring of male and female invasive cardiologists. Exposure to ionizing radiation seems to increase the sex ratio as paternal age increases. A higher proportion of females were born to younger fathers exposed to radiation, while a higher proportion of males were born to older fathers.

Wang and colleagues published an excellent paper on the cost of taking care of stroke associated with AF using data from the 2010 Medicare Provider Analysis and Review File. The costs of stroke hospitalizations are high, and they are even higher if the patient has AF. Medina and group from Israel described their experience in treating breathing and speech induced atrial tachycardia by using cryo balloon.

Heart Rhythm Society 34th Annual Session is fast approaching. With less than a month to go we wish you all best of luck with preparations for the meeting. Congratulations to both Anne Gillis, the current president and Hugh Calkins, the incoming president of HRS. See you all in the mile high city of Denver in May. Until then have good reads.

Sincerely

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