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Editorial Cardiovascular

Indian Journal of Cardiovascular Disease in Women



2023: The Year in Review from a Women in Cardiology and Related Sciences Perspective

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Received: 07 February 2024 Accepted: 27 February 2024 Published: 22 March 2024

DOI 10.25259/IJCDW_8_2024

Quick Response Code:



As we embrace the arrival of 2024, the Indian Journal of Cardiovascular Disease in Women (IJCDW), an official publication of the Women in Cardiology and Related Sciences (WINCARS) Association, spearheaded by women cardiologists across India, stands as a distinctive initiative. This is an attempt, dedicated to increasing awareness, providing access to healthcare, and embracing advancements in the cardiovascular health of women.

The year 2023 witnessed a transition from a challenging and chaotic global COVID-19 pandemic into an endemic phase. Science and technology also witnessed a transition into a more digital phase with widening access to artificial intelligence and robotics. IJCDW in continuation with its legacy of being updated and at par, delivered original research, review, and interventional rounds, hovering the latest agenda of women's heart health.

The COVID-19 pandemic lockdown witnessed a mass reduction in Outpatient Department (OPD) attendance of the patient. IJCDW's original research article^[1] not only revealed a substantial decrease in attendance at OPDs during the lockdown period but also found a significant decrease in female versus male OPD attendance. Moreover, this reduction in attendance affected predominantly non-urgent medical specialties.

An interesting study by Kapoor^[2] revealed how women in India played a crucial role being the center of the fight against COVID-19 as nursing staff, paramedical and astute physicians. They also identified more pregnancy-related adverse events psychosocial issues, increased self-assessment anxiety scale and depressive behavior in many female patients.^[2]

Kendyala and Yarlagadda^[3] correlated coronary computed tomography angiography (CCTA) and neck vessel Doppler in evolution of coronary artery disease (CAD) burden in diabetic patients.^[2] Carotid intima-media thickness and plaque burden correlate with CCTA (specifically the coronary artery calcium score). These parameters especially in diabetes and hypertension can facilitate timely interventions given their potential risk for future ischemic events.

With changing metabolomes in premenopausal CAD attracting the interest of research, Sahu *et al.*^[4] showed the association between serum sex hormones and CAD in premenopausal women. Interestingly, approximately 66% of premenopausal women underwent coronary angiography and were found to have CAD.^[5] Subjects with metabolic syndrome, low progesterone and low insulin levels were in the high-risk category for developing CAD.^[5]

Agrawal and Rao,^[6] in her editorial on the increasing role of women in global conferences, identified the Matilda effect where men claim success for an invention that was invented by women.

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Vijayalakshmi *et al.*,^[7] in a review on the spectrum of CAD in Indian females, found that CAD in India was increasing and touching to epidemic proportions with increasing risk factors. Women were facing a higher risk of cardiac events majorly due to sex-specific novel risk factors anemia, pregnancy, depression, ignorance, and late presentation, besides usual risk factors.^[7] The implementation of primordial, primary, and secondary prevention strategies in women was the need of the hour.^[7]

Rongali *et al.*^[8] and Mahilmaran,^[5] in their single-center study, identified that women have a higher likelihood of recurrent heart failure (HF) and hospitalization after a myocardial infarction in comparison to males. Despite similar comorbidities, age, and percutaneous coronary interventions (PCI) performed, the use of renin-angiotensinaldosterone blockers, the incidence of hospitalization due to HF continued to be higher in females indicating different pathophysiological and biological factors among them.

Pregnancy, an important part of a woman's life, acts as a stress test mainly affecting the cardiovascular system. Shandilya *et al.*,^[9] in their study, found preeclampsia with a prevalence of 6.2%. The majority of preeclampsia women were younger with a high body mass index.^[9]

A yet another fascinating review by Fatima^[10] evaluated Ambulatory Blood Pressure Monitoring and Sleep Quality in Hypertensive Men and Women.^[10] The Pittsburgh sleep index was used to assess sleep quality. Both males and females with uncontrolled blood pressure were found to have an association with disrupted sleep quality.^[10]

Madaka *et al.*,^[11] in their comprehensive review on smallvessel coronary angioplasty, enlisted the recent advances in the field, along with their promising aspects and limitations.^[11] Drug-coated balloons have now emerged as an intriguing and viable technology for small vessel disease patients, offering effective drug delivery without residual medium and allowing for shorter dual antiplatelet therapy.^[11]

In the editorial "The Saga of Toil and Consistency,"^[12] the author highlighted the journey of WINCARS and IJCDW over the years and its potential to mark a change in cardiovascular ailments in Indian women's heart health. The main aim of IJCDW is to narrow down the existing gap by creating awareness and research directed specifically to cardiac disease management in women.^[12]

Furthermore, a rising number of Indian women cardiologists would not only ensure the uplift of women in cardiology but also make a substantial change in cardiovascular health issues related to women, given their different biological and reproductive lives.

It is our privilege to be the digital platform for original research published articles in IJCDW in arenas of various

interventions that include cardiogenic shock,^[13] transcatheter intervention in pulmonary hypertension and pulmonary embolism,^[14] prevention, and management of coronary no-reflow,^[15] advances in intravascular ultrasound,^[16] complications of PCI and its management,^[17] management of coronary thrombus,^[18] interventions in the left internal mammary artery,^[19] management of in-stent restenosis,^[20] predictors of post catheterization femoral artery pseudoaneurysm,^[21] and much more.

The IJCDW group works relentlessly to improve the quality of life of patients and health-care providers, with a mission to educate colleagues, and to bring the limelight the need for delivery of timely, specialized cardiac care to women right at their doorstep. It also strives for equity and decreased gender bias in all the spheres. The future of women's heart health now rests more assured given the sincere dedicated efforts of IJCDW in this direction.

At the digital platform for the WINCARS and official publication site, IJCDW, 2024, is welcomed with open arms and great zeal. Cheers to a year of continued expansion, alliance, and excellence in the arena of women's health. Happy New Year 2024.

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How to cite this article: Chhabra S, Garg A. 2023: The Year in Review from a Women in Cardiology and Related Sciences Perspective. Indian J Cardiovasc Dis Women. 2024;9:1-3. doi: 10.25259/IJCDW_8_2024