Editorial Comment

107 The Relation between CD40 Ligand and Coronary Artery Disease
Balta, S. (Eskişehir); Ozturk, C. (Ankara)

Review

69 Effect of Angiotensin Receptor Blockers on Flow-Mediated Vasodilation: A Meta-Analysis of Randomized Controlled Trials
Chen, J.-D.; Liu, M.; Chen, X.; Yang, Z.-J. (Nanjing)

Original Research

80 Depressive Symptoms at Discharge from Rehabilitation Predict Future Cardiovascular-Related Hospitalizations

86 The Effectiveness of Preoperative Trimetazidine on Myocardial Preservation in Coronary Artery Bypass Graft Patients: A Systematic Review and Meta-Analysis
Zhang, N.; Lei, J.; Liu, Q.; Huang, W.; Xiao, H.; Lei, H. (Chongqing)

97 Ibuprofen Attenuates Cardiac Fibrosis in Streptozotocin-Induced Diabetic Rats
Qiao, W. (Nanjing/Xuzhou); Wang, C.; Chen, B.; Zhang, F.; Liu, Y.; Lu, Q.; Guo, H.; Yan, C.; Sun, H. (Xuzhou); Hu, G. (Nanjing); Yin, X. (Nanjing/Xuzhou)

109 Prophylactic Application of an Intra-Aortic Balloon Pump in High-Risk Patients Undergoing Off-Pump Coronary Artery Bypass Grafting
Ding, W.; Ji, Q.; Wei, Q.; Shi, Y.; Ma, R.; Wang, C. (Shanghai)

116 Prognostic Value of Serial Brain Natriuretic Peptide Measurements in Patients with Acute Myocardial Infarction

122 Spatial QT Dispersion Predicts Nonsustained Ventricular Tachycardia and Correlates with Confined Systodiastolic Dysfunction in Hypertrophic Cardiomyopathy
Magri, D.; Piccirillo, G.; Ricotta, A. (Rome); De Cecco, C.N. (Rome/Charleston, S.C.); Mastromarino, V.; Serdoz, A.; Muscogiuri, G.; Gregori, M.; Casenghi, M.; Cauti, F.M.; Oliviero, G.; Musumeci, M.B. (Rome); Maruotti, A. (Rome/Southampton); Autore, C. (Rome)

Turning Basic Research into Clinical Success

130 What Physicians Need to Know About Renal Function in Outpatients with Heart Failure
Waldum-Grevbo, B. (Oslo)
Festschrift
Karger – Connecting the World of Biomedical Science
This richly illustrated Festschrift chronicles the company’s development and contributions in the service of medicine and science since 1890. It tells the history of Karger Publishers until the present day.

Please send an e-mail to 125years@karger.com to receive your free copy or discover it online. www.karger.com/festschrift

Publishing Highlights 1890–2015
Take a guided tour through 125 years of medical and scientific publishing! Follow us on a leisurely walk through interesting times, fascinating topics and beautiful illustrations. www.karger.com/highlights

Karger Gazette
The Karger Gazette anniversary issue explores the STM publishing business in the digital age, offers short portraits of Karger’s journal and book series editors as well as interviews with three renowned scientists. www.karger.com/gazette
International Journal of Cardiovascular Medicine, Surgery, Pathology and Pharmacology


Incorporating Heart Drug (published 2001–2005)
Editorial Board

M. Hori, Osaka
S.K.S. Huang, Temple, Tex.
B.K. Kantharia, Houston, Tex.
J.S. Karliner, San Francisco, Calif.
R.E. Kerber, Iowa City, Iowa
N.Z. Kerin, Detroit, Mich.
A. Kimchi, Los Angeles, Calif.
R.N. Kitsis, Bronx, N.Y.
P. Kligfield, New York, N.Y.
X. Kong, Nanjing
M.A. Konstam, Boston, Mass.
J.B. Kostis, New Brunswick, N.J.
P. Kowey, Wynnewood, Pa.
K.H. Krieger, New York, N.Y.
H. Krum, Melbourne, Vic.
E. Kuschnir, Córdoba
H. Kusuoka, Osaka
J.M. Lazar, Brooklyn, N.Y.
C.V. Leier, Columbus, Ohio
M.C. Limacher, Gainesville, Fla.
R.J. Lipicky, North Potomac, Md.
T.F. Lüscher, Zurich
F.I. Marcus, Tuscon, Ariz.
A.J. Marian, Houston, Tex.
J.D. Marmur, Brooklyn, N.Y.
E.A. Martinez, Córdoba
M.G. Massad, Chicago, Ill.
P. Meier, London
E.H. Messerli, New York, N.Y.
J. Midwall, Atlantis, Fla.
R.M. Mills, Raritan, N.J.
J.E. Mitchell, Brooklyn, N.Y.
R.J. Myerburg, Miami, Fla.
J. Narula, Orange, Calif.
J.V. Nixon, Richmond, Va.
H. Oh, Okayama
P. Pibarot, Quebec City, Que.
B. Pitt, Ann Arbor, Mich.
G.M. Pohost, Los Angeles, Calif.
E.N. Prystowsky, Indianapolis, Ind.
N. Reichek, Roslyn, N.Y.
W.J. Remme, Rhoon
R. Roberts, Ottawa, Ont.
W.C. Roberts, Dallas, Tex.
R. Rosenhek, Vienna
F. Ruschitzka, Zurich
J.N. Ruskin, Boston, Mass.
M.E. Sarano, Rochester, Minn.
V.L. Serebruany, West Friendship, Md.
M.R. Starling, Mesa, Ariz.
P. Supino, Brooklyn, N.Y.
J.L. Swain, La Jolla, Calif.
K. Swedberg, Göteborg
A.J. Tajik, Rochester, Minn.
L. Tavazzi, Cotignola
J.R. Teerlink, San Francisco, Calif.
M. Tendelaar, Katowice
U. Thadani, Oklahoma City, Okla.
K. Thygesen, Aarhus
N.K. Wenger, Atlanta, Ga.
W.B. White, Farmington, Conn.
J.T. Willerson, Houston, Tex.
R.G. Williams, Los Angeles, Calif.
K.K.-Y. Wu, Zhunan Town
F. Zannad, Nancy
B.L. Zaret, New Haven, Conn.
D.P. Zipes, Indianapolis, Ind.
Submission

Cardiology publishes original reports in research and observations pertaining to cardiovascular physiology, epidemiology, pharmacology, disease and therapy. Only original papers written in English are considered. The articles should be readily comprehensible to a reader who is fluent in English. Therefore, all manuscripts originating from non-English-speaking authors must be edited prior to submission to assure that standard English grammar and usage are observed. This may require help from a colleague or other editorial assistant. It must be clear from the text that all editing has been achieved. Manuscripts should be submitted using the online submission website:

www.karger.com/crd

If you have any problems with submission, please contact:

S. Karger AG
Editorial Office ‘Cardiology’
P.O. Box
CH–4009 Basel (Switzerland)
Tel. +41 61 306 1356
Fax +41 61 306 1434
E-Mail crd@karger.com

All manuscripts must be accompanied by a covering letter signed by all authors. Assurance should be given that the manuscript is not under simultaneous consideration by any other publication and that there are no conflicts of interest, see below. The preferred word-processing package is Word for Windows®. Presentation of manuscripts should conform with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (see N Engl J Med 1997;336:309–315).

Main Sections

1. Original Research

2. Original Research – Clinical Trial Design

Submissions will be accepted reporting the study design protocols of planned clinical trials that have been appropriately registered with regulatory authorities. These submissions will be limited to 4,500 words and 35 references.

3. Review

4. Turning Basic Research into Clinical Success

One or two focused review articles are published in each issue, and should offer an overview of existing concepts and literature in a format assimilable to the largely clinical cardiologist readership, i.e. a reader-sharp base with limited sophistication as to methods and terminology associated with cell and molecular biology. Most manuscripts are submitted upon invitation. Authors planning to submit an unsolicited paper are requested to contact the Editorial Office with an outline of the intended contribution. All submissions are subject to peer review. These articles are available also to nonsubscribers in free access on the journal’s website. Submissions should comprise no more than 4,500 words and 50 references. They should have an abstract of approximately 200 words and about 5 key words should be provided.

5. Letter to the Editor

Letters to the Editor (max. 1,500 words, including references) are encouraged if they directly concern articles previously published in this journal and issues raised by those articles. The Editor reserves the right to submit copies of such letters to the authors of the articles concerned prior to publication in order to permit them to respond in the same issue of the journal.

6. Novel Insights from Clinical Experience (formerly Case Reports)

Contributions to this section are expected to provide novel insight into a clinical problem. Submissions can be based on a single case or a number of similar cases. While a case report can describe an entirely novel clinical condition, it is unlikely that most case reports will provide such information. In the more common setting of a description of a well-recognized condition, the most important aspect of the presentation, on which editorial judgments will be based, is the description of the new perspective(s) on the phenotype, pathophysiology, clinical presentation, evaluation strategy and/or management that can be drawn from the case findings. We require that a highlighted box containing one or two bullet points on Established facts and Novel insights should be placed on the first page of the report. These should be selected to reinforce the novelty of the clinical observation.

The manuscript should be presented with an abstract (up to 200 words), brief introduction, case or case series description and results, followed by a discussion. Novel Insights from Clinical Experience should not be more than 2,500 words (including statements in the highlighted box) and should contain no more than 20 references. Please note that case reports that are not submitted in this format will not be considered, and that such reports cannot be submitted as Letters to the Editor.

7. Short Communications

These manuscripts should not contain more than 2,000 words, including key words, essential references (not more than 15) and not more than 3 tables or figures. Such communications should report complete, original studies and should be arranged in the same way as full length manuscripts.

8. Commentary

Authors who wish to contribute a manuscript to this category should contact the Editor. Commentaries should offer a more personalized perspective on a topic that will be of interest to the general readership; paralleling Editorials (defined as commentaries invited by the Editors or opinion pieces produced by members of our editorial board). All contributions to this category will be subject to editorial review for relevance for the readership, perception of topicality and general importance/interest, and quality of the submitted work. To submit a Letter to the Editor, see point 5. above.

Conditions

All manuscripts are subject to editorial review. Manuscripts are received with the explicit understanding that they are not under simultaneous consideration by any other publication. Submission of an article for publication implies the transfer of the copyright from the author to the publisher upon acceptance. Accepted papers become the permanent property of Cardiology and may not be reproduced by any means, in whole or in part, without the written consent of the publisher. It is the author’s responsibility to obtain permission to reproduce illustrations, tables, etc. from other publications.

Conflict of Interest in Cardiovascular Publications

Declaration of potential conflict of interest should be part of each publication or presentation and be designated as one of more than four categories: (1) No relationship. (2) Relationship with a For Profit Organization. (3) Research relationship with a For Profit or Not For Profit Organization, which should be named. (4) Employee of a For Profit or Not For Profit Organization. For legal reasons, all authors are required during submission of their manuscript to complete and sign a Copyright Transfer & Conflicts of Interest Statement. The corresponding author must ensure that all authors have been asked to sign this form and to disclose any conflicts of interest.

Ethics

Published research must comply with the guidelines for human studies and animal welfare regulations. Authors should state that subjects have given their informed consent and that the study protocol has been approved by the institute’s committee on human research. Further, they should also state that animal experiments conform to institutional standards.

Plagiarism

Authors should not appropriate the ideas, language or other elements of the work of others without providing appropriate attribution (i.e. ‘plagiarism’). Plagiarism includes, but is not limited to, verbatim copying without quotation marks, close paraphrasing or summarization of sentences or narrative passages without citing source, and duplication of figures, graphs, images or data without acknowledgement of their origins. Authors also should not submit a previously published manuscript or a section of a previously published manuscript, even when re-titled, otherwise re-worded or augmented, without clearly identifying its relation to the author’s earlier work (duplicate publication or ‘self-plagiarism’). For additional guidance, see Roig, M.: Plagiarism and self-plagiarism: What every author should know. Biochemia Medica 2010;20:295–300.

Arrangement

Title page: The first page of each paper should indicate the title, the authors’ names, the institute where the work was conducted, and a short title for use as running head.

Full address: The exact postal address of the corresponding author complete with postal code must be given at the bottom of the title page. Please also supply phone and fax numbers, as well as e-mail address.

Key words: Please supply 3–10 key words in English that reflect the content of the paper.

For submissions to Main Sections 1, 2 and 3:

Original Research, Original Research – Clinical Trial Design, and Review Papers

Abstract: The abstract is an essential and most read part of the paper. It should be printed on a separate page, up to 200 words, factual, free of abbreviations (except as specifically defined within the abstract text at first use) and should be structured as follows:

Objective: Should describe the purpose of the study.

Methods: Should explain how the study was performed (samples and/or population, procedures, analytical methods).

Results: Should describe the main findings with specific data and their statistical significance, if possible.

Conclusions: Should contain a succinct interpretation of the inferences to be drawn from results.
Footnotes: Avoid footnotes. When essential, they are numbered consecutively and typed at the foot of the appropriate page.

Tables and illustrations: Tables and illustrations (both numbered in Arabic numerals) should be prepared on separate sheets. Tables require a heading and figures a legend, also prepared on a separate sheet. Due to technical reasons, figures with a screen background should not be submitted. When possible, group several illustrations in one block for reproduction (max. size 180 × 223 mm) or provide crop marks. Each illustration must be labelled with its number and the first author’s name. b/w half-tone and color illustrations must have a final resolution of 300 dpi after scaling, line drawings one of 800–1,200 dpi. Figure files must not be embedded in a document file but submitted separately (see detailed instructions at http://www.karger.com/ckd/).

Color illustrations

Online edition: Color illustrations are reproduced free of charge. In the print version, the illustrations are reproduced in black and white. Please avoid referring to the colors in the text and figure legends.

Print edition: Up to 6 color illustrations per page can be integrated within the text at CHF 960.00 per page.

References: In the text identify references by Arabic numerals [in square brackets]. Material submitted for publication but not yet accepted should be noted as [unpublished data] and not be included in the reference list. The list of references should include only those publications which are cited in the text. Do not alphabetize; number references in the order in which they are first mentioned in the text. The surnames of the authors followed by initials should be given. There should be no punctuation other than a comma to separate the authors. Preferably, please cite all authors. Abbreviate journal names according to the Index Medicus system. Also see International Committee of Medical Journal Editors: Uniform requirements for manuscripts submitted to biomedical journals (www.icmje.org).

Examples

(b) Papers published only with DOI numbers: Theoharides TC, Boucher W, Spear K: Serum interleukin-6 reflects disease severity and osteoporosis in mastocytosis patients. Int Arch Allergy Immunol DOI: 10.1159/000063858.

Reference Management Software: Use of EndNote is recommended for easy management and formatting of citations and reference lists.

Digital Object Identifier (DOI)

S. Karger Publishers supports DOIs as unique identifiers for articles. A DOI number will be printed on the title page of each article. DOIs can be useful in the future for identifying and citing articles published online without volume or issue information. More information can be found at www.doi.org.

Supplementary Material

Supplementary material is restricted to additional data that are not necessary for the scientific integrity and conclusions of the paper. Please note that all supplementary files will undergo editorial review and should be submitted together with the original manuscript. The Editors reserve the right to limit the scope and length of the supplementary material. Supplementary material must meet production quality standards for Web publication without the need for any modification or editing. In general, supplementary files will not exceed 10 Mb in size. All figures and tables should have titles and legends and all files should be supplied separately and named clearly. Acceptable files and formats are: Word or PDF files, Excel spreadsheets (only if the data cannot be converted properly to a PDF file), and video files (.mov, .avi, .mpeg).

Author’s Choice

With this option the author can choose to make his article freely available online against a one-time fee of CHF 3,000.00. This fee is independent of any standard charges for supplementary pages, color images etc. which may apply. More information can be found at www.karger.com/authors_choice.

NIH-Funded Research

The U.S. National Institutes of Health (NIH) mandates under the NIH Public Access Policy that final, peer-reviewed manuscripts appear in its digital database within 12 months of the official publication date. As a service to authors, Karger submits the final version of your article on your behalf to PubMed Central. For those selecting our premium Author’s Choice service, we will send your article immediately upon publishing, accelerating the accessibility of your work without the usual embargo. More details on NIH’s Public Access Policy are available at http://publicaccess.nih.gov/FAQ.htm#a1.

Self-Archiving

Karger permits authors to archive their pre-prints (i.e. pre-refereeing) or post-prints (i.e. final draft post-refereeing) on their personal or institution’s servers, provided the following conditions are met: Articles may not be used for commercial purposes, must be linked to the publisher’s version, and must acknowledge the publisher’s copyright. Authors selecting Karger’s Author’s Choice feature, however, are also permitted to archive the final, published version of their article, which includes copyediting and design improvements as well as citation links.

Page Charges

There are no page charges for papers of 6 or fewer printed pages (including tables, illustrations and references). Each additional complete or partial page is charged to the author at CHF 325.00. The allotted size of a paper is equal to approx. 18 manuscript pages (including tables, illustrations and references).

Proofs

Unless indicated otherwise, proofs are sent to the corresponding author and should be returned with the least possible delay. Alterations made in proofs, other than the correction of printer’s errors, are charged to the author.

Reprints

Order forms and a price list are sent with the proofs. Orders submitted after the issue is printed are subject to considerably higher prices.
The biomedical themes of the Karger Gazette are topical, urgent, exciting. Its articles, written by experts from all over the world, provide a wide audience with the basic issues, new findings and controversies in a lively and readable style. Alongside invited contributions, each issue carries attractively presented support material, such as informative graphics, historical summaries, interviews, or portraits of individuals and institutions. The Karger Gazette is published in newspaper format and appears once a year.

And what’s more – it’s free!

To see behind the cover, please register for your free print subscription or read it online.

www.karger.com/gazette

Current issue:

125 Years Karger Publishers
– Read about the STM publishing business in the digital age
– Have a look at the portraits of Karger’s journal and book series editors
– Meet three world-renowned scientists who talk about their careers and how they define progress

S. Karger AG
Karger Gazette
Allschwilerstrasse 10
CH–4009 Basel (Switzerland)
E-Mail gazette@karger.com
www.karger.com
Contents

See the journal website for contents
Take a guided tour through
125 years of medical and scientific publishing

This hand-picked selection represents the history of the publishing house and illustrates the development of medicine and its subspecialties:

www.karger.com/Publishing-Highlights

‘A collection of extraordinary essays’

GOTTFRIED SCHATZ

A MATTER OF WONDER

What Biology Reveals about Us, Our World, and Our Dreams

Where do we come from? Is our destiny determined by the genes we inherit? In this book Gottfried Schatz, the world-renowned biochemist and co-discoverer of mitochondrial DNA, gives lucid – albeit often surprising – answers to universal questions and takes the reader on a fascinating journey of discovery across the boundaries of scientific disciplines. With passion and a keen sense of wonder he draws on philosophy, cultural history and art to formulate his reflections on the mysteries of life. His essays will appeal not only to scientists but to all inquisitive minds, regardless of educational and professional background.

G. Schatz (Basel)
A Matter of Wonder
What Biology Reveals about Us, Our World, and Our Dreams
Translated by A. Shields
XII + 190 p., 2 color fig., hard cover, 2011
CHF 29.– / EUR 21.50 / USD 29.00

More information and sample essays at www.karger.com/schatz
The Tobacco Epidemic
2nd, revised and extended edition

Editors
Robert Loddenkemper
Michael Kreuter

This completely revised and enlarged 2nd edition of The Tobacco Epidemic provides a comprehensive update of the clinical, public health and political aspects of tobacco smoking. Since its 1st edition in 1997, knowledge of the health hazards of tobacco and nicotine addiction has increased considerably, but recent data has shown that the global problem has become more aggravated in low- and middle-income countries. If current trends continue, tobacco smoking will be responsible for the deaths of 1 billion people in the 21st century.

Written by outstanding international experts, the book covers the history of tobacco production and use, the economics of tobacco use and control, as well as the health consequences of active and passive smoking in both adults and children. Special chapters discuss the impact of media, movies and TV on tobacco consumption in young people, the patterns and predictors of smoking cessation in the general population and in different social subgroups, and initiatives supported by the WHO Framework Convention on Tobacco Control. Readers will find the latest information on how nicotine dependence is treated with nicotine replacement products, what role health care professionals play in helping smokers to quit and what effects smoke-free environments, advertising bans and price increases have on smoking prevalence. The potential harms and benefits of smokeless tobacco, waterpipe tobacco smoking and electronic cigarettes are also evaluated.

This book is a must-read for anyone in the medical profession who treats patients with smoking-related diseases and for those engaged in tobacco control. It will also be appreciated by interested nonmedical readers like journalists and legislators.

Contents
• Foreword/Preface
• History of Tobacco Production and Use: Hanafin, J.; Clancy, L.
• Global Tobacco Epidemic: Mackay, J.; Schluger, N.
• The Tobacco Epidemic and the Commercial Sector: Tobacco Industry Strategy to Increase Profits and Prevent Regulation: Weishaar, M.
• Chemistry and Primary Toxicity of Tobacco and Tobacco Smoke: Wiebel, F.J.
• Nicotine Dependence: Zaveri, N.T.; Rollema, H.; Swan, G.E.
• The Psychology of the Smoker: Gilbert, D.G.; Pergadia, M.L.
• Respiratory Disorders Related to Smoking Tobacco: Murray, J.F.; Buist, A.S.
• Cardiovascular and Other (Except Respiratory) Disorders Related to Smoking Tobacco: Barnoya, J.; Monzon, J.C.
• Health Effects of Passive Smoking in Children: Bush, A.
• Health Effects of Passive Smoking in Adults: Clancy, L.; Kabir, Z.
• Economics of Tobacco Use and Control: Townsend, J.
• Legislation and Smoking Prevention: Lutfi, E.; Warner, V.
• The WHO Framework Convention on Tobacco Control: Pötschke-Langer, M.; Schotte, K.; Szilagyi, T.
• Youth and Tobacco: Bauer, C.; Kreuter, M.
• Impact of Media, Movies and TV on Tobacco Use in the Youth: Sargent, J.D.; Hanewinkel, R.
• Social Determinants of Cigarette Smoking: Upson, D.
• Smoking and Mental Health Problems: Caillé, S.; Baker, A.L.; Todd, J.; Turner, A.; Dayas, C.V.
• Patterns and Predictors of Smoking Cessation: Ditre, J.W.; Zale, E.L.; Brandon, T.H.
• Examining the Role of the Health Care Professional in Controlling the Tobacco Epidemic: Individual, Organizational and Institutional Responsibilities: Leone, F.T.; Evers-Cassey, S.
• Pharmacotherapy: Nicotine Replacement Therapy and Other Drugs in Smoking Cessation (Including Vaccination): Tennesen, P.
• Smokeless Tobacco – Health Hazards or Less Harm?: Bolinder, G.; Gilljam, H.
• Waterpipe Tobacco Smoking: A Less Harmful Alternative?: Jawad, M.
• Electronic Cigarettes: The Issues behind the Moral Quandary: Vardavas, C.I.; Agaku, I.T.

Author Index / Subject Index

The easiest way to order: www.karger.com/prrer

Orders may be placed with any bookshop, subscription agency, directly with the publisher or through a Karger distributor.

Karger – Medical and Scientific Publishers
CH-4009 Basel, Switzerland
orders@karger.com, f: +41 61 306 12 34
www.karger.com