RSNA Launches Radiology: Cardiothoracic Imaging

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Held to the same high editorial standards as RSNA's premier research journal, *Radiology*, this new addition to the Society's family of journals emphasizes the research advances and technical developments in medical imaging that drive cardiothoracic medicine.

"The body of clinically impactful imaging research and advancement has increased substantially over the past decade. There is now a strong need for a platform for scientific exchange and for dissemination of meaningful cutting-edge subspecialty imaging content," said editor Suhny Abbara, M.D., FACR, FSCCT, professor of radiology and chief of the Cardiothoracic Imaging Division at UT Southwestern Medical Center and medical director of Parkland Cardiothoracic at Parkland Health & Hospital System in Dallas, Texas.

"*Radiology: Cardiothoracic Imaging* will address the demand for a venue in which to publish high-quality curated cardiothoracic imaging content and will highlight scientific advances and technological innovations in medical imaging as they relate to advancements in cardiac, vascular and pulmonary medicine," he said.

Included in the first issue are:

- "Hatching *Radiology: Cardiothoracic Imaging*" by Suhny Abbara, M.D., FACR, FSCCT.
- "Going beyond Cardiomegaly: Evaluation of Cardiac Chamber Enlargement at Non-Electrocardiographically Gated Multidetector CT: Current Techniques, Limitations, and Clinical Implications" by Partha Hota, D.O., and Scott Simpson, D.O.
- "Dual-Energy (Spectral) Late Iodine Enhancement Cardiac CT: Does a Dual-Layer Detector Make It Work?" by Harold I. Litt, M.D., Ph.D.
Original Research:

- "Detection and Hemodynamic Evaluation of Flap Fenestrations in Type B Aortic Dissection with 4D Flow MRI: Comparison with Conventional MRI and CT Angiography" by Bradley D. Allen, M.D., M.S., et al. 4D flow MRI depicts small type B aortic dissection flap fenestrations and enables additional hemodynamic characterization of flow between true and false lumens at fenestration sites relative to CT angiography and conventional MRI.

- "Reproducibility and Agreement of Tissue Tracking versus Feature Tracking for Strain Measurement on Cardiac MR Images in Patients with Repaired Tetralogy of Fallot" by Jimmy C. Lu, M.D., et al. Strain measurements by feature tracking and tissue tracking on cardiovascular MR images in patients with repaired tetralogy of Fallot have systematic differences in values and reproducibility, particularly for longitudinal strain.

- "Myocardial Late Iodine Enhancement and Extracellular Volume Quantification with Dual-Layer Spectral Detector Dual-Energy Cardiac CT" by Seitaro Oda, M.D., Ph.D., et al. Dual-energy cardiac CT with a dual-layer spectral detector gives data about myocardial late iodine enhancement and extracellular volume quantification, comparable to the findings obtained by using cardiac MRI.

- "Sexual Dimorphism of Coronary Artery Disease in a Low- and Intermediate-Risk Asymptomatic Population: Association with Coronary Vessel Wall Thickness at MRI in Women" by Ahmed M. Ghanem, Ph.D., et al. Coronary artery disease (CAD) is influenced by sexual dimorphism in low/intermediate CAD risk asymptomatic population where coronary vessel wall thickness shows the strongest association with CAD in women, whereas age had the strongest association in men.

The new journal invites manuscript submissions that cover all aspects of cardiac, vascular and pulmonary imaging.

"We are excited and honored to provide a platform for knowledge sharing and advancement of cardiothoracic imaging and medicine," Dr. Abbara said. "This journal is dedicated to improving patient care through the dissemination of imaging-related science, innovation and education, and we look forward to partnering with our readers and authors for decades to come."

Radiology: Cardiothoracic Imaging is published bi-monthly and available exclusively online.

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RSNA is an association of over 53,400 radiologists, radiation oncologists, medical physicists and related scientists promoting excellence in patient care and healthcare.
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