

## **IQ\_2012\_06\_venus - Editorial**

### **A Welcome From the Editor**

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Dear Readers,

It gives me great pleasure to present this edition of Intervention IQ, with venous interventions as the leading theme. When we talk of venous disorders, many people might think only of unsightly varicose veins and underestimate them as merely a cosmetic problem. However, visible varicose veins are just one sign of chronic venous insufficiency; a disease state that has serious implications for long-term health and quality of life.

As well as offering treatments for manifestations of chronic venous disease, interventional radiology (IR) is making its presence felt in the treatment of acute venous problems, namely deep vein thrombosis.

The high prevalence of these disorders means that a great many individual lives are touched. Furthermore, healthcare institutions and societies as a whole must come to terms with the costs of venous disease. Intervention IQ looks at the vitally important work that interventional radiologists do each day, examining how these efforts contribute to the multidisciplinary team and result in excellent outcomes for patients and hospitals.

Venous interventions represents an exciting field to be involved in, where minimally invasive image-guided techniques are already well established yet new developments are always on the horizon. Ongoing improvement and advancing technologies continue to provide us with the tools to make a real difference to patients' lives. In this edition we take a look at the development of prosthetic venous valves as an example of IR pushing back the boundaries of modern medicine.

This innovative spirit has always been characteristic of IR and the story of the milestone development of catheter-delivered vena cava filters is recounted in our Early Days feature. Further supporting articles look at the unique challenges of paediatric IR and how an understanding of health economics is increasingly important to us all.

I sincerely hope you enjoy reading this issue and that you find our overview of IR's role in venous interventions both informative and inspirational.

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