

Editorial



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Disclosure

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In This Issue on 04-March-2024

Jin-Hong Yoo , Editor-in-Chief, *Journal of Korean Medical Science*

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In this issue, 7 original articles have been published.

1. Association Between Multiple Heavy Metal Exposures and Cholesterol Levels in Residents Living Near a Smelter Plant in Korea.

Kim YD et al.

This study investigates the effects of heavy metals on dyslipidemia markers among individuals living near a refinery. Using Bayesian kernel machine regression, the study finds a significant correlation between combined metal exposure and increased cholesterol levels.

2. Adverse Events Following COVID-19 Vaccination in Adolescents: Insights From Pharmacovigilance Study of VigiBase.

Shin JY et al.

This pharmacovigilance study explores the safety of COVID-19 vaccination in adolescents, focusing on serious adverse events (AEs). This pharmacovigilance study examines the safety of COVID-19 vaccines in adolescents, particularly serious adverse events. The study reports a disproportionate number of immune-related events and underscores the need for ongoing safety monitoring. The study suggests a disproportionate reporting of immune-related AEs following COVID-19 vaccination in adolescents, emphasizing the importance of ongoing monitoring for potential risks.

Readers should also refer to the editorial response for this article.

3. Impact of Lactate Dehydrogenase and Hemoglobin Levels on Clinical Outcomes in Patients With Paroxysmal Nocturnal Hemoglobinuria: Results From a Korean PNH Registry.

Lee JW et al.

Paroxysmal nocturnal hemoglobinuria (PNH) leads to intravascular hemolysis, thromboembolism, renal failure, and premature mortality. A secondary analysis of Korean

PNH Registry data identified lactate dehydrogenase (LDH) as a significant predictor of thromboembolism (TE) and death in complement inhibitor-naïve PNH patients. Controlling intravascular hemolysis, particularly LDH levels, was emphasized for improving clinical outcomes in PNH patients.

4. Mildly Reduced Renal Function Is Associated With Increased Heart Failure Admissions in Patients With Hypertrophic Cardiomyopathy.

Kim HK et al.

This study explores the connection between renal function and cardiovascular outcomes in hypertrophic cardiomyopathy (HCM) patients. Patients with stage III-V renal function exhibited a significantly higher risk of major adverse cardiovascular events (MACE), driven by increased cardiovascular death and hospitalization for heart failure (HHF). The findings emphasize the importance of monitoring renal function in HCM patients for improved prognostication and care.

5. Comparison of High- and Low-Dose Rivaroxaban Regimens in Elderly East Asian Patients With Atrial Fibrillation.

On YK et al.

This study assesses the safety and efficacy of high-dose rivaroxaban regimen (20/15 mg) and low-dose rivaroxaban regimen (LDRR) in elderly Korean population atrial fibrillation (AF) patients. The result showed comparable safety and effectiveness between the two regimens. The findings support the safety and effectiveness of both high and low-dose rivaroxaban in real-world practice for stroke prevention in elderly East Asian AF patients.

6. Risk Factors for the Mortality of Patients With Coronavirus Disease 2019 Requiring Extracorporeal Membrane Oxygenation in a Non-Centralized Setting: A Nationwide Study.

Baek MS et al.

This retrospective study examines the outcomes of COVID-19 patients receiving extracorporeal membrane oxygenation (ECMO) support across 19 Korean hospitals from January 2020 to August 2021. Among 127 patients, 55.1% died within 90 days of ECMO initiation. Older age and CRRT use were linked to higher mortality rate in COVID-19 patients undergoing ECMO. Authors emphasize that ECMO should be applied cautiously in patients with respiratory failure, accounting for their age and renal insufficiency.

7. Chromosomal Microarray Analysis in Fetuses With Ultrasonographic Soft Markers: A Meta-Analysis of the Current Evidence.

Lee SM et al.

The authors evaluated the clinical significance of chromosomal microarray analysis (CMA) for fetuses with isolated ultrasonographic soft markers and a normal karyotype. Ultrasonographic soft markers are considered normal variants, and guidelines recommend a detailed fetal anatomy survey to determine the need for antenatal karyotyping. They included seven soft markers (CPC, EB, EIF, HNB, SF, SUA, and UTD). The study concludes that CMA could assist in risk assessment and pregnancy counseling for pregnancies with isolated ultrasonographic soft markers and a normal karyotype.