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Imaging risk in pulmonary arterial hypertension

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Risk assessment is essential in PAH to optimise treatment decisions aiming to slow disease progression. Imaging of the RV matters in the assessment of these patients, and needs to be seriously considered in the elaboration of more performant tools. <https://bit.ly/3ibbo9F>

Cite this article as: Badagliacca R, Vizza CD. Imaging risk in pulmonary arterial hypertension. *Eur Respir J* 2020; 56: 2002313 [<https://doi.org/10.1183/13993003.02313-2020>].

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Pulmonary arterial hypertension (PAH) is a Janus-faced entity with, on one side, the pulmonary circulation and, on the other side, the right ventricle (RV) [1]. While the disease process is turned on at the site of the pulmonary resistive vessels, the patient symptomatology and prognosis are largely determined by RV structure and function adaptation to increased afterload [2, 3]. Yet, this important cardiac aspect of PAH pathophysiology remains insufficiently recognised. The study by GHIO *et al.* [4], in the present issue of the *European Respiratory Journal*, is therefore a welcome step forward.