The knowledge base about acute myocardial infarction continues to accrue rapidly with information on pathophysiology, epidemiology, reperfusion therapy, and adjunctive treatment strategies. Given the fact that coronary artery disease is the leading cause of morbidity and mortality in the Western World, multiple studies have focused on these issues. In a relatively short time, we have progressed from the development of coronary care units to lytic therapy to percutaneous coronary intervention. These advances have markedly decreased mortality in patients who have this specific condition.

However, more substantial investigation is required in areas such as (1) patient education strategies for earlier recognition of symptoms which would facilitate earlier and more effective therapy, (2) ways to maximize myocardial flow rather than just epicardial flow very early in the disease progression, (3) improving myocardial salvage with either pharmacologic or mechanical adjunctive approaches, (4) secondary prevention after the initial event, including the need for testing and treatment with multiple antiplatelet strategies, (5) ways to define and deliver optimal care in patients who have acute myocardial infarction, and (6) new approaches to myocardial cell regeneration therapy.

Approaches to these areas will define the future of the treatment of acute myocardial infarction. This issue of Medical Clinics of North America...
explores these areas and defines what works, what has not worked, and what may work in the future.

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