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Pulmonary Embolism: The Discussions Continue

Pulmonary embolism (PE) is an extremely common clinical entity, with one in 1000 inhabitants diagnosed each year. However, the clinical suspicion is about three-fold more common. Traditionally, the fear of missing the diagnosis has been most prevalent and over-treatment was the norm. As a result, many patients have received anticoagulants inappropriately, sometimes with devastating results due to haemorrhagic complications.

The diagnostic arsenal for PE has steadily increased over the years. Furthermore, this increase has focussed on the development of non-invasive diagnostic techniques to try to avoid the “dangerous” pulmonary angiogram. Unfortunately, not all techniques have delivered what was promised: a fast, non-invasive, reliable technique, which could be used to either prove or exclude venous thromboembolic disease.

Furthermore, strategies have been presented that are complicated, demanding and difficult to implement in routine practice.

The current issue is devoted to the diagnostic management of PE. An overview is presented to show the diagnostic modalities that have paved the way. Newer technologies, such as CT-pulmonary angiography and MR imaging methods give a glimpse of current and future developments. Finally, various diagnostic strategies are discussed with a view to what should be current practice. This issue is part of the continuing discussions on PE, and aims to give an interim overview. Much more is to follow, and we look forward to these new data already!

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