



## Editor's message

This issue of the *Osteopathic Family Physician* focuses on cardiovascular disease. Despite major gains in the reduction of cardiovascular deaths in the United States, the established risk factors that contribute to cardiovascular disease are still a substantial threat to public health. Approximately 75% of Americans die from cardiovascular disease. We now realize that prevention of cardiovascular disease may be even more complicated than smoking cessation and optimal lipid and blood pressure control. The role of inflammation, nitrous oxide, and endothelial dysfunction bring a whole new level of complexity to this disease.

In general, the well-established risk factors of hypertension, dyslipidemia, and diabetes are not optimally controlled. This "clinical inertia" is seen in the management of many chronic diseases, but its etiology is not clear. In the era of "pay for performance," physicians need to develop new systems to better evaluate practice-based learning and systems-based practice. The use of clinical registries is one such tool to address these competencies.

In this issue, **William Burke, DO**, and colleagues demonstrate how the use of the American Osteopathic Association Clinical Assessment Program (AOA-CAP) registry can assist in the management of this disease. They describe how this program can assist in tracking patients and serve as a quality improvement tool. The American Board of Osteo-

pathic Family Physicians now requires that all family medicine residents complete the AOA-CAP program to qualify for certification.

**Jason McHugh, DO**, and colleagues provide a thorough review of the clinical indications for the use of beta-blockers in cardiovascular disease and special populations for hypertension. In this manuscript, they review the guidelines for the use of this class of medications and further review research to support when specific beta-blockers should be used in special circumstances.

This issue also includes two interesting case reports. **Benjamin Sussman, DO**, presents a case of premature coronary artery disease and highlights other important diseases to consider in the differential diagnosis. **Barret Cromeans, OMS 4**, and **Russell Gamber, DO, MPH**, present how an osteopathic approach to a person with a "functional gastrointestinal disorder" substantially improved a patient's quality of life.

Finally, the OFP editorial team humbly provides suggestions on how to write a scientific paper. We review steps we feel are important in the process of producing a scientific paper and use this journal as an example. Happy reading...and writing!

Jay H. Shubrook, Jr., DO, FCOFP  
*Editor-in-Chief*