We have read with great interest the article recently published by Jonas et al. entitled “Prognostic role of traditional cardiovascular risk factors in patients with idiopathic pulmonary arterial hypertension” [1]. In this study we would like to draw attention to some important points.

The authors have shown a possible relationship between the lifespan and severity of the disease and alterations in glucose metabolism and lipid profiles in patients with idiopathic pulmonary arterial hypertension (IPAH). Selective serotonin reuptake inhibitors (SSRI) are worldwide prescribed anti-depressant drugs and they increase the risk of cardiovascular diseases [2, 3]. A recent report has shown that use of SSRI definitely increases pulmonary artery hypertension [4]. However, in this present study, we did not see any information related to the use of SSRI in patients with IPAH and control subjects. Amphetamines, which increase dopamine concentration by inhibiting dopamine reuptake in neuronal synapses, are widely used for treatment of attention-deficit disorders, obesity and narcolepsy [4, 5]. However, abuse of these drugs is also increasing around the world. It is well documented that amphetamines significantly increase the risk of cardiovascular diseases [6]. The authors have never mentioned the drug use between the groups. We suggest that use of SSRIs and amphetamines should be questioned in patients with IPAH.

Conflict of interest
The authors declare no conflict of interest.

References
