



September 2, 2008

Cardiovascular News Update

Dear Colleague,

Westside Medical Associates of Los Angeles (WMALA) in conjunction with Westside Medical Imaging (WMI) would like to provide you with this weekly update on important new developments in cardiovascular care. If you have any suggestions on subjects you would like covered, please let us know.

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64-slice CT may reliably exclude significant coronary disease

64-slice CT reliably excludes significant coronary disease were the conclusions from a research study published in the *American Journal of Medicine*. Investigators performed a review of all published trials of 64-slice CT scanning in the diagnosis of CAD, comparing the results with those for invasive coronary angiography and intravascular ultrasound. According to **Dr. Norman Lepor**, co-director of cardiovascular imaging at **Westside Medical Imaging**, a negative 64-slice CT coronary angiogram reliably excluded significant coronary artery disease. 64 slice CT offers the opportunity in lower risk patients to avoid the small vascular risk associated with conventional angiography along with the cost and time away from work. **Dr. Ivor Geft** of the **Westside Medical Associates of Los Angeles** adds that "combining the results of 64-slice CT with clinical assessment would strengthen the diagnosis for the individual patient allowing for targeting care based on facts and not estimates of risk." He adds that "this exam is particularly useful in patients with atypical chest discomfort and cardiac risk factors, and those patients with borderline or milder abnormalities on stress testing."

Carotid endarterectomies can be performed safely in patients with multiple comorbidities

Carotid endarterectomies (CEA) can be performed safely even in patients with multiple comorbidities based on the results according to a study published in the *Journal of the American College of Surgeons*. Study patients had high comorbidity rates, with hypertension in 83 percent, coronary artery disease in 64 percent, diabetes in 37 percent, and pulmonary disease in 22 percent yet only 1.6% of patients suffered peri-operative stroke, one of which was fatal. There were also one myocardial infarction, three arrhythmias, and one episode of congestive heart failure outcomes." The researchers concluded that medically high-risk patients who present with carotid stenosis should be offered CEA by an experienced surgeon. Please contact **Dr. Hooman Madyoon** at **Westside Medical Associates of Los Angeles** who has been a pioneer in the less

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invasive, percutaneous treatment of carotid stenosis and published his own experience in the peer reviewed literature.

Patients over a certain age should take daily aspirin to prevent heart attacks

According to an analysis published in the journal *Heart*, men and women over a certain age should take aspirin daily to prevent heart attacks. Researchers looked at nearly 12,000 patients aged between 30 and 75 and found that by the age of 47 in men and 58 in women, the ten-year coronary heart disease risk is ten percent. The researchers commented at that point, unless someone is at risk of dangerous side effects because they have a condition such as a stomach ulcer, the benefits of aspirin use outweigh the disadvantages. This also reinforces the need for aggressive cardiovascular screening in this patient population who did not have any particular predisposition to the development of coronary artery disease with coronary calcium screening, carotid intimal medial thickening or 64 slice CT coronary angiography.

FDA investigating link between Vytorin and cancer with no conclusion yet

Food and Drug Administration (FDA) is reviewing a recent study, called SEAS, that found an increased risk of cancer and deaths from cancer in patients taking Vytorin (ezetimibe and simvastatin), compared with those given a placebo. The agency said it will likely take six months to fully evaluate the data. Investigators involved in the SEAS study have claimed that the increased cases were likely due to chance. The FDA said patients should not stop taking Vytorin because the evidence of a cancer link is unclear. The agency said that one recent clinical trial indicated higher rates of cancer for patients taking the medication while two studies currently under way have shown no increased risk.

Statins not associated with an increased risk of cancer.

According to research published in the *Journal of the American College of Cardiology*, cholesterol-lowering drugs taken by millions of Americans don't raise the risk of cancer. Investigators evaluated the findings from 15 statin trials involving nearly 100,000 patients, 51,797 statin-treated patients, 45,043 control patients. The average follow-up was 4.4 years. The investigators reported that cancer rates were 3.9 to 26.5 per 1,000 person-years in the treatment groups and 6.0 to 23.7 per 1,000 person-years in the control groups. According to the investigators, levels of LDL cholesterol were inversely associated with cancer risk but the increased risk was not caused by the drugs themselves. The investigators said that when the relationship between cancer rates and LDL cholesterol levels in the treatment group was compared with that in the control group statin treatment was associated with lower levels of LDL cholesterol ($P < 0.05$) but similar rates of cancer. This lack of an effect of statin therapy on cancer risk was consistent across all levels of LDL cholesterol.

Westside Medical Associates of Los Angeles (WMALA) and Westside Medical Imaging (WMI) are premier centers in cardiac diagnosis and treatment.

**Please feel free to contact
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