

Jefferson Cardiology Association Happenings

ACC Convention News

Each year at this time we try to bring our readers up to date on the newest events in cardiology. Specifically, we bring information from some of the most relevant research studies presented at the Annual Scientific Session of the *American College of Cardiology* which concluded on March 27. Below is a summary of studies of particular interest.

ASCERT STUDY

This study evaluated outcomes in 190,000 patients in the United States between 2004 and 2009 who received either coronary angioplasty or coronary bypass surgery for stable multi-vessel coronary artery disease. The patients were collected from the *Society of Thoracic Surgeons* database and Medicare claims. The results demonstrated better survival with surgery compared to multi-vessel angioplasty in the first four hours after treatment. The angioplasty group had a 20.8% death rate compared to 16.4% for bypass surgery. The investigators warn however that treatment decisions must be individualized and differences among patients evaluated could affect the results of the study.

Surgery vs. Medication Treatment for Obese Diabetics

It has been shown in past studies that bariatric surgery, weight loss surgery, can benefit control of blood sugar in obese diabetics. There has not been a previous study to compare the results of bariatric surgery and intense medical therapy. In this study, patients were randomized to medication alone, medical therapy plus gastric bypass or medical therapy plus a sleeve paced over the stomach. The goal was to reduce glycosylated hemoglobin, HbA1c, to 6 or normal value.

The study included 141 patients whose baseline mean HbA1c was 9. After 12 months the surgically treated patients had dramatically improved findings. Among the gastric bypass patients, 42% attained the target value and did so without need for diabetic medications. Those with the sleeve procedure had 37% reaching target and of these, 28% required diabetic medication. Only 12% of those treated exclusively with medications reached target. Those with gastric bypass averaged 65 pounds lost weight while the sleeve patients averaged 55 pounds lost weight while the medical group averaged 12 pounds weight loss.

In short, intensive medical therapy plus bariatric surgery achieves better diabetic control than medical therapy alone. Gastric bypass and sleeve procedures had similar outcomes with slightly more complications with gastric bypass. Overall results with gastric bypass yielded the best control of diabetes. Long term results of this study will be available in future years.

Non Surgical Aortic Valve Replacement

Several major studies looked at the new technique to change the aortic valve in high risk patients without surgery. The PARTNERS study compared high risk aortic stenosis patients treated catheter based valve replacement and compared outcomes to similar patients treated surgically. Results showed that the catheter based procedure was not inferior to surgical therapy. Two follow up outcomes were not significantly different. After the procedures there were slightly more strokes with the catheter based procedures in the first 30 days but this risk dramatically decreased there after. The catheter based

procedure demonstrated better survival than medical treatment.

A European study using another valve was structured as a real world study evaluating frail high risk patients with aortic stenosis evaluated over 1000 patients with 1 and 6 month follow ups. Procedural success was 97.8% and only 0.7%

needed open valve replacement with total complication rate of 0.4%. Prior to the procedure, 79% of patients had severe symptoms and only 13% had severe symptoms after the procedure. There was 95.5% all cause survival at 1 month and 87.25% all cause survival at 6 months. Certainly there is now hope for frail elderly patients with severe aortic stenosis who are not surgical candidates.

Chicken and White BBQ Potatoes

4 (6 ounce) Yukon gold or baking potatoes
Cooking spray
2/3 cup canola mayonnaise
3 tablespoons white vinegar
1 tablespoon Dijon mustard
2 teaspoons freshly ground black pepper
½ teaspoon sugar
¼ teaspoon salt
2 garlic cloves, minced
1 ½ cups shredded skinless, boneless rotisserie chicken breast
3 tablespoons sweet pickle relish
¼ cup sliced green onions

1. Pre-heat oven to 450 degrees
2. Pierce potatoes with a fork, and coat lightly with cooking spray. Bake at 450 degrees for 50 minutes or until tender. Remove potatoes from oven, and cool slightly. Cut a lengthwise slit in each potato that goes to, but not through, the other side, and squeeze the ends to loosen potato flesh.
3. Combine mayonnaise and next 6 ingredients (through garlic) in a medium bowl. Stir in chicken and relish. Divide the chicken mixture evenly among potatoes. Top each potato with 1 tablespoon onions

A publication of Jefferson Cardiology Association

Alan D. Bramowitz, M.D., Peter M. Lemis, M.D., Michael S. Nathanson, M.D., Gennady Geskin, M.D., Inna V Lamm, M.D.

Jefferson Hospital Medical Building
Suite 403, Coal Valley Road
P.O. Box 18285
Pittsburgh, PA 15236
TEL:(412) 469-1500
FAX:(412) 469-1531

Belle Vernon
1533 Broad Street Ext
Suite 200
Belle Vernon, Pa 15012
TEL: (412) 469-1500

E-mail: Jeffcrd@aol.com

<http://www.Jeffersoncardiology.com>