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## Jefferson Cardiology Association Happenings

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### Screening for Asymptomatic Carotid Disease

An estimated 7 million US adults have had a stroke. It has been estimated that carotid artery blockage is responsible for 10% of strokes excluding cerebral hemorrhage. Published information reveals that 0.5-1% of adults over 65 have carotid artery blockage exceeding 70%. Studies have shown a 5-year risk of stroke of 5% for persons having 70% or greater carotid stenosis. Can screening and interventions such as surgery or stenting reduce stroke risk? In many communities, screening is urged or sponsored by organizations. Is this helpful or not?

To evaluate the benefit of screening and treating patients with asymptomatic carotid disease, a study was organized by the Agency for Healthcare Research and Quality, a division of the US Department of Health and Human Services. The results of this study were published in the September 2, 2014 issue of the *Annals of Internal Medicine*. An extensive search of English language published research was performed. This included 78 published articles that reported on 56 studies.

After an extensive review of the literature, it was concluded that there was no evidence that carotid screening reduced stroke. It was also found that there was wide variation in techniques used to measure the severity of carotid stenosis.

Are carotid surgery or carotid stenting more beneficial than medical therapy? The researchers found that there are no studies comparing carotid

surgery or stenting with contemporary medical therapy. Therefore, the researchers questioned results of earlier studies demonstrating fewer strokes with surgery as medical therapy was not optimal. Also, some studies demonstrated less death with medical therapy and fewer strokes also. For this reason a new study is to be started comparing carotid stenting and optimal medical therapy with optimal medical therapy alone. Also, carotid surgery plus optimal medical therapy will be compared with optimal medical therapy.

The potential benefit of carotid surgery or stenting of asymptomatic carotid disease may be declining. Better medical therapy appears to reduce risk. The benefit in medications may include better blood pressure control with ACE inhibitors or ARB's, better cholesterol control with statins, better diabetic control and effective use of antiplatelet therapy. It is now estimated that the stroke risk in medically treated patients approaches 1% per year and is similar to stroke risk of surgery. Also, medical management may be 3-8 times more cost effective.

Are there persons who may have greater risk for stroke? Curiously, persons with severe blockage had no greater risk than those with less severe blockage. Also it was thought that an additional 5-10 years of life was needed to show benefit of surgery. It was thought that persons over age 75 would have less survival benefit with surgery for asymptomatic disease.

It was concluded that there is no current evidence of benefit of carotid

surgery in asymptomatic persons compared to medical therapy. Validated tools are not available to distinguish which patients with asymptomatic carotid disease will increase or decrease benefit from carotid surgery or stenting.

### **Comparison of Diet Results**

The annual cost of health care in the United States for cardiovascular disease was \$312.9 billion in 2009 and is estimated to be \$1.48 trillion by 2030. Can diet reduce cardiovascular risk?

A study was sponsored by the National Institutes of Health and published in the September 2, 2014 issue of the *Annals of Internal Medicine*. A group of 148 obese men and women ages 22-75 was recruited. The

participants were divided into 2 groups. One group was given a low carbohydrate diet with less than 40 grams per diet and the other a low fat diet with less than 7% saturated fat.

After one year, the low carbohydrate group demonstrated greater weight loss, greater loss in body fat, and better reduction of cholesterol and triglycerides. It was concluded that reducing carbohydrate intake may be an option for persons seeking to lose weight and reduce cardiovascular risk.

### **Staff Birthday**

We would like to extend a very Happy Birthday to Diane Ranallo, medical assistant.

## **HEALTHY HOLIDAY PUMPKIN CHEESECAKE**

1/3 cup graham cracker crumbs  
1 can (16oz) solid pack pumpkin  
2 cups low-fat ricotta cheese  
3/4 cup sugar  
3 tbsp all purpose flour  
1 tbsp nonfat dry milk powder

1 tbsp ground cinnamon  
1 tsp ground allspice  
1 egg white  
3/4 cup evaporated skim milk  
1 tbsp vegetable oil  
1 tbsp vanilla

1. Preheat oven to 400 degrees. Spray 9 inch springform pan with nonstick cooking spray. Add graham cracker crumbs; shake to coat pan evenly. Set aside.
2. Combine pumpkin and ricotta cheese in food processor or blender until smooth. Add sugar, flour, milk powder, cinnamon, allspice, egg white, evaporated skim milk, oil, and vanilla; process until smooth.
3. Pour mixture into prepared pan. Bake 15 minutes. Reduce temperature to 275 degrees; bake 1 hour and 15 mins. Turn off oven; leave cheesecake in oven with door closed for 1 hour. Remove from oven; cool completely on wire rack. Remove springform pan side. Cover cheesecake with plastic wrap; refrigerate 4 hours to 2 days. Garnish with fruit.

**Nutritional analysis: Calories: 121 Carbs: 20g Fat: 2g Cholesterol: 4mg Sodium: 56mg Protein: 4g**

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