

# CARDIOVASCULAR NEWS



## COMPANION shows strong results for cardiac devices

The Comparison of Medical Therapy, Pacing and Defibrillation in Chronic Heart Failure (COMPANION) trial demonstrated the use of cardiac devices, when used with optimal drug therapy, improves the quality of life for people suffering from heart failure.

The results, published in the *New England Journal of Medicine*, showed implantable cardiac pacemaker and defibrillation devices reduce death by 36% and combined death and hospitalization by 20% in advanced heart failure patients.

“This study proves for the first time the significant improvement in patient outcomes achieved with car-

diac resynchronization therapy over and above optimal drug therapy,” said Dr. Michael R. Bristow, co-chair of the COMPANION study. “Heart failure is a major public health problem. Despite improvements in drug therapy, heart failure is a disease with high rates of hospitalization, death, and poor patient quality of life.”

More than 350,000 Canadians suffer from heart failure. Between 25% to 40% of patients die within the first year after diagnosis.

Study Focused on Extending and Improving the Lives of People with Advanced Heart Failure. Toronto (Ontario). May 20, 2004.

## High-dose AGGRASTAT<sup>®</sup> indicated for high-risk patients

The ADVANCE trial, which evaluated the safety and efficacy of a high-dose injection of Aggrastat<sup>®</sup> (tirofiban hydrochloride), 25 mcg/kg, compared to abciximab or placebo in patients undergoing primary coronary angioplasty, concluded Aggrastat (in combination with heparin and aspirin) is indicated for the treatment of acute coronary syndrome including those managed medically and those undergoing percutaneous transluminal coronary angioplasty (PTCA) or atherectomy.

The results, published in the *Journal of the American College of Cardiology*, yielded a significantly reduced primary composite endpoint with heparin

plus tirofiban over heparin plus placebo (20% versus 35%, respectively).

“These data suggest that high-dose tirofiban can reduce the frequency of major adverse cardiovascular events in high-risk patients undergoing percutaneous coronary intervention (PCI),” said Dr. Matthew Meldorf, senior director, Medical Affairs of Guilford Pharmaceuticals. “We are encouraged by these data and are evaluating our options for pursuing additional large-scale trials to confirm these results.”

New Clinical Trials Evaluate High-Dose AGGRASTAT<sup>®</sup> in High-Risk Patients. Baltimore (Maryland). July 29, 2004.

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## Study reveals genetic influence on HDL


A new study published in the journal *Science*, conducted by researchers at the University of Ottawa Heart Institute, discovered mutations in the ABCA1 gene can contribute to low high density lipoprotein (HDL).

Dr. Yves Marcel, director of the Lipoprotein & Atherosclerosis Research Group, said the study identifies a genetic influence that was not previously apparent. "We hope that the insight gained from these findings will lead to new and innovative medications to treat people with low levels of HDL, ultimately having a positive impact on reducing the risk of heart disease."

While low density lipoprotein (LDL), the "bad cholesterol", is known to lead to increased risk of heart disease, HDL acts as a cholesterol scavenger to minimize LDL buildup by transporting cholesterol back to the liver for further metabolism.

"Research in genetics is the appropriate direction for us to reach our goal of conquering heart disease in this century," said Dr. Robert Roberts, president and CEO of the Ottawa Heart Institute. *PCad*

Heart Institute Genetics Study Published in "Science" Journal. Ottawa (Ontario). August 6, 2004.



There's no cure for ALS (Lou Gehrig's disease).  
But Chris Rice and his family know  
there will be. There must be.  
MDA funds the research that offers them hope.

## ALS DOESN'T PLAY FAVORITES

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