



HIGHLIGHTS

OF THE DAY

Transcatheter Treatment of Tricuspid Regurgitation: One-year Results of the Clasp TR Study

Greenbaum A

Greenbaum A, presented the findings from the CLASP-TR which sought to evaluate the feasibility of an investigational transcatheter repair system for tricuspid regurgitation. A total of 65 patients received the investigational device, 70% of whom had tricuspid regurgitation that was rated massive or torrential despite treatment with diuretics. One-year follow-up results were available for 49 patients that showed 10.8% death and 18.5% rehospitalisation due to heart failure. These results compare with an expected one-year mortality rate of about 30% for patients with tricuspid regurgitation.

Long Term Effect of Renal Denervation on Blood Pressure Reduction in Patients on Antihypertension Medications: 3-year Efficacy Outcomes from the Spyral Htn-on Med Pilot Study

Mahfoud F

Mahfoud F, presented the 3-year efficacy outcomes from the Spyral Htn-on Med Pilot Study which aimed to investigate the long term effect of renal denervation on blood pressure reduction in patients on antihypertension medications. Patients with uncontrolled hypertension (N=80; n=38 renal denervation patients, n=42 sham) were included in the study. The results showed that patients with renal denervation had significant and clinically meaningful reductions in ambulatory systolic blood pressure at 3 years compared with sham control patients despite similar antihypertension medication burden.

Finerenone & Cardiorenal Outcomes by History of Cardiovascular Disease in Patients with Type 2 Diabetes and Chronic Kidney Disease: Fidelity Analyses

Filippatos G

Filippatos G, presented the findings from the Fidelity analyses that evaluated the efficacy and safety of finerenone, a selective nonsteroidal mineralocorticoid receptor antagonist, in patients with stage 1-4 chronic kidney disease and type 2 diabetes mellitus. Over a 3-year median follow-up, finerenone lowered the risk of the composite CV outcome vs. placebo (Hazards ratio 0.86; 95% Confidence Interval: 0.78-0.95). The results showed that finerenone reduced the risk of cardiovascular and kidney outcomes in patients with chronic kidney disease and type 2 diabetes mellitus vs. placebo, regardless of cardiovascular disease history.







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Differential Impact of Residual Inflammatory Risk & Residual Cholesterol Risk among Atherosclerosis Patients with and Without Chronic Kidney Disease: Secondary Analysis of the Cantos Trial

Ridker P

Ridker P, presented the findings from the canakinumab anti-inflammatory thrombosis outcomes study (CANTOS) trial that evaluated the differential impact of residual inflammatory risk and residual cholesterol risk among atherosclerosis patients with and without chronic kidney disease. The study showed that residual inflammatory risk may have greater importance than residual cholesterol risk among atherosclerotic patients with impaired kidney function. The trial has clinical implications for cardiovascular risk stratification and the development of novel agents that target inflammatory processes in patients with chronic kidney disease.

Unified Approach to CV and Related Chronic Diseases

Ornish D

Ornish D, presented an informative session on unified approach to cardiovascular diseases and related chronic diseases. New unifying theory involves certain lifestyle changes that can help prevent and reverse the progression of a wide variety of chronic diseases. This is due to the fact that most common chronic diseases share common biological pathways. These biological pathways are directly influenced by diet, response to stress, physical activity, and social life. Chronic inflammation, immune system, oxidative stress, apoptosis, and gene expression share the same underlying mechanisms. This unified approach to cardiovascular diseases simplifies the lifestyle recommendations for patients with cardiovascular diseases as well as the general public.

The Effect of GLP-1 Agonists In Patients With Type 2 Diabetes on All-Cause Mortality and Cardiovascular Mortality: An Updated Meta-Analysis of 44 Randomized Controlled Trials

Al-Sadawi M

Al-Sadawi M, presented the findings from a meta-analysis which was conducted to evaluate the association of glucagon-like peptide-1 receptor (GLP-1) agonists and all-cause and cardiovascular mortality in patients with type 2 diabetes mellitus. The results showed that GLP-1 agonists were associated with lower risk of all-cause mortality (odds ratio 0.891, 95% confidence interval 0.837-0.949; P <0.01) and reduced cardiovascular mortality (odds ratio 0.88, 95% confidence interval 0.881-0.954; P <0.01) over a follow-up of greater than 1 year in patients with type 2 diabetes mellitus.







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Additive Cardiovascular Risk Reduction of GLP1a and SGLT2 inhibitor in Diabetic **Patients with Atherosclerotic Disease**

Loyo PL

Loyo PL, presented the findings from a database review conducted for patients with diabetes mellitus and ischemic heart disease, cerebrovascular disease, or peripheral arterial disease who had been prescribed SGLT2 inhibitor (control-S), GLP1a (control-G), or both (exposure group). The main outcome was a time-to-first-event composite of all-cause mortality, non-fatal myocardial infarctions, and non-fatal cerebrovascular events which occurred in 3.9% of the cohort at 12 months. The conclusions stated that combination therapy with SGLT2 inhibitor and GLP1a is associated with a lower risk of main clinical outcomes at 12 months than either agent alone.

Outcomes in Patients With Psychiatric Disorders Admitted for Cardiovascular Diseases: Insights From a Nationwide Database

Ramadan S, presented the findings of a study which sought to assess the associations between psychiatric diseases and peri-hospitalization outcomes in patients with cardiovascular diseases (CVD). Among 2,001,839 admissions for CVD, 9.6% had concurrent mood disorders, 7.2% had anxiety disorders, and 0.8% had psychotic disorders. Psychotic disorders were also associated with longer length of stay compared with anxiety and mood disorders or no psychiatric illness. The results suggested that the presence of psychiatric illnesses was associated with higher readmissions in patients admitted for CVD.

CETP Inhibition: Past Failures, Future Prospects

Tardif JC

Tardif JC, presented a session on the past failures and future prospects of cholesteryl ester transfer protein (CETP) inhibition. The results of the first CETP inhibition i.e., the main dal trial outcomes, the treatment effect by different genotypes, supporting evidence from the dal-PLAQUE-2 trial including the change in global cholesterol at 12 months were discussed. The session concluded with the study design of Dal-Gene involving 6147 patients with the AA genotype randomized to either dalcetrapib or placebo, with visits every 6 months until endpoint target is achieved; results are awaited.





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High Sensitivity Troponin in the Evaluation of Acute Chest Pain

Jaffe A

Jaffe A, presented a session on high sensitivity troponin in the diagnosis and evaluation of patients with acute chest pain. Clinical outcomes including the primary endpoints and safety assessments of the high-sensitivity cardiac troponin on presentation to rule out myocardial infarction or HISTORIC trial were discussed. The conclusions stated that unstable angina or acute chest pain still exists, appropriate clinical judgment is very important, and using high sensitivity troponin to define who is at risk of acute chest pain is helpful.



Kliner J

Kliner J, presented a session on optimizing medical therapy for stable ischemic heart disease. Guideline directed medical therapy for ischemic heart disease includes antiplatelet therapy, statins, angiotensin converting enzyme (ACE) or angiotensin receptor blocker (ARB) antagonists, beta-blockers; therapy for ischemic cardiomyopathy includes beta-blockers, ACE/ARB, mineralocorticoid receptor antagonists, and SGLT2 inhibitors. Medication optimization clinic is referral-based telemedicine that utilizes structured algorithms to optimize guideline-directed medical therapy in a structured timeframe, which reduces the risk of heart failure and related hospitalizations.



Cardiac Rehab and Alternative Therapies for Management of Chronic Chest Pain

Rivas-Estany E

Rivas-Estany E, presented a session on cardiac rehabilitation and alternative therapies for the management of patients with chronic chest pain. ACC/AHA guidelines recommend cardiac rehabilitation for patients with cardiac diseases, including patients with angina were highlighted. The session covered benefits associated with cardiac rehabilitation including exercise-based cardiac rehab which has consistently demonstrated its effectiveness in reducing cardiovascular mortality and hospitalizations compared with no exercise in patients with coronary artery disease and the benefits that occur across all diagnostic categories.







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