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Novato Community Hospital

Sutter Medical Center of Santa Rosa

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New Guidelines for Management of ACS Patients Released

A document containing the new guidelines for the management of patients that present with acute coronary syndrome (ACS) was recently released by the AHA/ACC writing committee. The new guidelines update the original document on unstable angina/non ST-elevation Myocardial Infarction that was published in 2002 and includes information on new medications and interventions gathered from clinical trials done over the last several years. One of the most important aspects of the new guidelines is the initial risk stratification of the patient, which determines whether or not an early invasive or conservative protocol is followed. The risk categories are described as follows:

- **High-risk:** elevated cardiac biomarkers, ST depression, transient ST elevation, >20 minutes of rest pain, hemodynamic instability, signs of CHF → **EARLY INVASIVE PROTOCOL OR**
- **Moderate-risk:** no high-risk features, prior MI, prior CABG, T-wave inversions, rest angina <20 minutes relieved promptly with nitroglycerin, age >70 years → **EITHER EARLY INVASIVE OR EARLY CONSERVATIVE PROTOCOL OR**
- **Low-risk:** No high- or moderate-risk features, progressive angina without prolonged rest pain, normal cardiac markers, normal ECG with pain → **EARLY CONSERVATIVE PROTOCOL**

Once the protocol is chosen, the guidelines include very detailed decision algorithms that describe the pharmacologic and revascularization approaches that are appropriate for each patient. Given that over 1.5 million discharges in the United States currently involve patients with ACS, these guidelines will most likely have a significant impact on medical practice. For a complete copy of this article, please note the following reference: Anderson JL. J Am Coll Cardiol 2007; 50(7): 652-726

CPMC Has Exclusive Bay Area Use of HeartMate® II Left Ventricular Assist Device

California Pacific Medical Center is the only medical facility in the Bay area using HeartMate® II Left Ventricular Assist Device (VAD), which is still in trial. Over 600 cases have been performed on patients participating in the study at up to 40 sites throughout the US; the closest sites are in Washington state, San Diego and Utah.

HeartMate® II is used as permanent support for late-stage heart failure, when other options have unsuccessfully been tried – such as medication. There are many advantages of using this technology:

- Less morbidity
- Less infection
- Less bleeding
- More durable (is lasts 4-5 years, as opposed to 12-14 months for other ventricular assist devices)
- Smaller and easier to implant than pulsatile devices, making it suitable for smaller patients, like women

Additionally, CPMC has a dedicated nursing unit for VAD patients – the only one in the Bay area. Currently, three physicians perform this surgical procedure:

- James G Avery, II, MD, Acting Surgical Director, CPMC Heart Transplant Program
- Preben Brandenhoff, MD
- Thomas Oka, MD

SPHC 2nd Annual Physician Symposium Series: Current Topics in Cardiovascular Medicine: Translating State of the Art Diagnosis and Treatment into Clinical Practice

The Sutter Pacific Heart Centers will be hosting their 2nd Annual Physician Symposium Series during the dates of October 27-28, 2007 at the Ritz-Carlton Half Moon Bay. Below is the list of proposed topics that will be addressed during this program:

- State of the Art Medical Therapy in Patients with Congestive Heart Failure - 2007
- Current State of Cell Therapy for CHF
- Aortic Valve operations in Patients with low EF
- Current Surgical Therapies of Mitral Valve Disease
- Percutaneous Intervention of Structural Heart Disease
- Coronary Stenting - 2007 - When to use DES vs. BMS. What Antiplatelet Therapy?
- Syncope
- Atrial Fibrillation
- New Device Features and their Impact on CHF Patients
- Coronary Calcification Assessment and Cardiovascular Risk Prevention
- Hypertension and Cardiovascular Risk
- Non-Pharmacologic Treatment of Coronary Heart Disease
- All Heart Attacks are Not the Same - Broken Hearts and Other Unusual Syndromes
- The Importance of Endothelial Dysfunction in Early Detection of Cardiovascular Disease

Please contact Paula Rowbury for more info: 415 600-5896 / rowburp@sutterhealth.org

The purpose of this monthly newsletter is to bring you up to date on the new features, programs and other newsworthy information from the cardiovascular programs at Marin General Hospital, Novato Community Hospital and California Pacific Medical Center (including St. Luke's). We welcome your input and any newsworthy content you may have for this publication.

