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New heart disease test could become routine

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A simple, low-cost blood test that could help assess one's risk of heart disease could soon become part of regular medical exams along with blood pressure and cholesterol screenings, say Bay Area doctors.

A large new study, disclosed this week at a scientific meeting of the American Heart Association in New Orleans, found that even among people who appear to be in good health with relatively low cholesterol, the blood test could be a strong gauge of heart disease or stroke risk. If the test detects a high level of a specific protein, patients could reduce their risk of heart disease by using popular statin drugs, the study found.

Local cardiologists said the study, which involved about 18,000 people in 26 countries, could benefit many patients.

"This kind of study probably will change cardiac practice," said Dr. Deepak Srivastava, director of the Gladstone Institute of Cardiovascular Disease at UC San Francisco. "The test will likely become part of the panels that are routinely done. The study provides pretty compelling evidence that even if people have normal cholesterol levels, then they would benefit from statins if they have signs of increased inflammation."

Check for inflammation

Known as CRP, the test measures whether people have elevated high-sensitivity C-reactive protein levels, an indication of inflammation that can be associated with increased risk of heart disease. Dr. Anthony Steimle, chief of cardiology at Kaiser Permanente's Santa Clara Medical Center, said the benefit of the test is strongest in toss-up cases where statins might be a preferred course of treatment, but it's not entirely clear.

"This blood test can act as a tie-breaker in making treatment decisions," he said. "It would be particularly beneficial for patients that are at intermediate risk for coronary artery events, for somebody with risk factors but not enough to absolutely need medication."

Like other physicians, Steimle said that he has used the CRP test for a handful of years. The test costs about \$20.

Physicians have known for years that elevated levels of low-density, or LDL, cholesterol are associated with coronary heart disease and that lowering the levels can reduce the number of heart attacks and strokes. Statins lower LDL cholesterol and inflammation.

Heart disease is the leading cause of death in the United States. Every 26 seconds, an American has a coronary event, and about one person every minute dies from it, according to the federal Centers for Disease Control and Prevention.

The study found that those taking the medication Crestor for over a year and a half were 54 percent less likely to have a heart attack, 48 percent less likely to have a stroke, and 46 percent less likely to require angioplasty or bypass surgery.

"This was a well-organized international study," said Dr. John Kane, a professor of medicine at UCSF who specializes in disorders of lipoprotein metabolism. He treats high-risk patients.

"They got a resoundingly successful result," he said. "It opens up a whole new group of people who probably ought to be treated. Before, if you came in for a routine physical in your 40s, no one would have measured your CRPs. Now this study says there's a reason to measure it. It will lead to a change in guidelines for patients."

Some doctors cautious

Some doctors, though, voiced caution about the study. They noted that it was financed by the pharmaceutical firm that makes Crestor - though those involved in the study said the manufacturer had no influence over the analysis. Local doctors also said the study did not involve young people - the male volunteers in the study were over age 50 and the female volunteers were over 60.

"It's a very sexy topic," said Dr. Peter J. Curran, a cardiologist at St. Mary's Medical Center. "But it is too early to say that everybody should get this test."

Experts also stressed that the public should not lose sight of standard public health guidelines to reduce heart and stroke risk, such as quitting smoking, losing weight and exercising.

"Diet and exercise should be a part of everyone's lifestyle," said **Dr. Jennifer Tremmel**, an interventional cardiologist at **Stanford** Medical Center and clinical director of the women's heart health program. "I expect that primary care doctors will be hearing a lot about this from their patients. None of us at this point are saying you need to run to your doctor to get your CRP checked - there should never be mass hysteria based on one study. But I do think this will lead to a change in our guidelines."

Cardiologist Mark Hlatky, a professor of health research and policy at **Stanford** University School of Medicine, said he has no plans to take the test.

"I don't have high risk, and I wouldn't take a statin if my CRP was elevated," he said. "My risk level is so low that it doesn't justify going on a drug for the rest of my life."

But for heart patients like San Francisco resident Carl Gallagher, anything that can help people avoid heart disease is valuable.

"To know that there is the possibility that people can reduce the trauma and anxiety of heart problems is just wonderful," said Gallagher, 74, who has been taking statins since 2001, when he underwent bypass surgery. "We don't think about heart failure in our 40s. But if there was a routine blood test that identified susceptibility to heart disease, I would definitely have done it. Diet and exercise and medication is a wonderful alternative to heart surgery."

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