



57th Annual Scientific Session
MARCH 29 – APRIL 1 • CHICAGO

FOR IMMEDIATE RELEASE
Saturday, March 29, 2008
11:00 a.m. CDT

CONTACT: Andrew Crosby
(901) 575-0010
acrosby@crosbyvolmer.com
Amy Murphy
(202) 375-6476
amurphy@acc.org
ACC.08 Newsroom:
(312) 949-3450

**STUDY FINDS SMOKING IS GREATEST PREDICTOR OF RECURRENT
CARDIAC EVENTS AMONG YOUNG HEART ATTACK SURVIVORS**
*Researchers Emphasize Importance of Smoking Cessation for Long-Term Heart
Health*

CHICAGO, IL – Continuing to smoke following a heart attack is the most powerful predictor for recurrent cardiac events among survivors age 35 years or younger, according to research presented today at the American College of Cardiology’s 57th Annual Scientific Session.

In particular, patients who continue to smoke have approximately three times the risk for future heart problems (e.g., cardiac death, a repeat heart attack or revascularization due to clinical deterioration) compared to those who quit smoking after the first acute myocardial infarction (AMI). This higher risk was independent of the type of treatment, presence of other cardiovascular risk factors (e.g., high cholesterol, high blood pressure, diabetes mellitus or body mass index) and even the function of the left ventricle (ejection fraction), which is a well-established, strong predictor of future cardiac events.

“This study suggests that smoking plays a major role not only in the development of AMI, but also in future coronary events,” said Loukianos Rallidis, M.D., of the University General Hospital Attikon in Greece, and lead study investigator. “Patients who have suffered a heart attack very early in life can significantly improve their long-term prognosis by quitting smoking and adopting a healthier lifestyle, in addition to following the treatment plan set forth by their cardiologist.”

Of the 135 subjects in this study, more than half (56 percent) continued smoking after having a heart attack, and one out of three patients developed a cardiac event during this

time period (three deaths, 30 acute coronary syndromes, and 11 revascularizations). Almost half (45 percent) of persistent smokers (on average 20 cigarettes per day) suffered from cardiac events, while only 18 percent of quitters suffered an event during the follow-up period.

Patients were recruited between 1997 and 2001 from two large hospitals in Athens, Greece, and followed for up to ten years. Three out of four patients were overweight or obese when they had their first heart attack; high cholesterol was the second most prevalent risk factor (behind smoking status) among these patients (70 percent had cholesterol levels above 200 mg/dl).

“It is imperative for the health system to provide effective smoking cessation programs as part of the holistic treatment of coronary heart disease,” said Dr. Rallidis. “Smoking is a modifiable risk factor and its effect is largely reversible.”

According to Dr. Rallidis there has been a progressive increase in the number of young people suffering AMI, which is partially due to unhealthy dietary habits, lack of routine physical exercise and a high proportion of smoking among young people. A previous study by Dr. Rallidis’s group found that the majority of patients (95 percent) experiencing a heart attack before the age of 36 years were smokers. This translated to a 6-fold increased risk of AMI before 36 years of age compared to non-smokers - regardless of the presence of high cholesterol, high blood pressure or diabetes mellitus.

This study warns young patients who continue to smoke after suffering a heart attack that they are more likely to suffer from future cardiac problems.

Dr. Rallidis will present on “Long-Term prognosis Factors of Young Patients (less than 35 years) for Having Accute MI: The Detrimental Role of the Continuation of Smoking” on Saturday, March 29, at 11:00 a.m.

###

The American College of Cardiology (www.acc.org) represents the majority of board certified cardiovascular physicians in the United States. Its mission is to advocate for quality cardiovascular care through education, research, promotion, development and application of standards and guidelines- and to influence health care policy. ACC.08 is the largest cardiovascular meeting, bringing together cardiologists and cardiovascular specialists to share the newest discoveries in treatment and prevention, while helping the ACC achieve its mission to address and improve issues in cardiovascular medicine.