



AMERICAN
COLLEGE of
CARDIOLOGY



Embargoed for Release:
Monday, March 30, 2009
9:15 a.m. EDT

Contact: Amy Murphy
(202) 375-6476
amurphy@acc.org

Andrew Crosby
(901) 575-0010
acrosby@cvic.com

ACC.09 News Room:
(407) 685-5405
Number TBD

OPTIMAL HEART ATTACK CARE WIPES OUT OMEGA-3 BENEFITS

Omega-3 Fatty Acids Offer No Extra edge with Today's Advanced Therapies

Orlando, FL – For patients who have suffered a heart attack dietary supplementation with omega-3 fatty acids added to optimal medical therapy offers no additional benefits, according to research presented today at the American College of Cardiology's 58th annual scientific session. ACC.09 is the premier cardiovascular medical meeting, connecting cardiologists and cardiovascular specialists to the latest and most innovative findings in cardiovascular science.

The OMEGA trial found no significant differences in the rates of heart attack, stroke, sudden cardiac death or death from any cause among patients assigned to guidelines-based optimal medical care alone or optimal medical care plus omega-3 fatty acids. The findings contradict those of previous studies, which suggested that supplementation with omega-3 fatty acids improves long-term survival. However, those studies were conducted when treatment for heart attack, or myocardial infarction, was less advanced than it is today.

“Although omega-3 fatty acids are considered effective for improving prognosis after acute myocardial infarction, no randomized, double-blind trial has tested their effect on top of current, strictly guideline-based treatment,” said Jochen Seneges, M.D., a professor of cardiology at the Heart Center Ludwigshafen, University of Heidelberg, Germany. “In our study, we saw no beneficial effect. In patients who are already taking optimal medical therapy, cardiac event rates become very low and omega-3 do not further improve them.”

The study involved 3,827 patients from 104 German community hospitals, heart centers and university hospitals. Three to 14 days after having a heart attack, patients were randomly

assigned to one year of treatment with highly purified omega-3 fatty acids or placebo, in addition to the best possible medical care.

Almost 94 percent of patients had coronary angiography at the time of the heart attack, and nearly 78 percent underwent percutaneous coronary intervention to restore blood flow through the blocked coronary artery. In about 8 percent of patients, “clot-busting” medications were used as the primary treatment. Upon discharge from the hospital, almost 94 percent of patients were prescribed beta-blockers, 83 percent ACE inhibitors, 94 percent statins, 95 percent aspirin and 88 percent clopidogrel, an anti-clotting medication.

During a follow-up that averaged just over one year, 4.1 percent of patients died, 3.9 percent had another non-fatal heart attack, 1.7 percent had a non-fatal stroke and 1.5 percent experienced sudden cardiac death. There were no significant differences in clinical outcomes between patients assigned to omega-3 fatty acids and those assigned to placebo.

“In our study, there was a very low rate of cardiac events after acute myocardial infarction,” Senges said. “It would be incorrect to say that omega-3 fatty acids are not effective, but we could not find any additional benefits after optimizing medical therapy.”

Dr. Senges will present the study “Randomized Trial of Omega-3 Fatty Acids on Top of Modern Therapy After Acute Myocardial Infarction: The OMEGA Trial” on Monday, March 30 at 10:30 a.m in Hall A2.

###

The American College of Cardiology (www.acc.org) works to influence health care policy and represents the majority of board certified cardiovascular care specialists through education, research, promotion, and the development and application of standards and guidelines. ACC.09 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.