Cardiology is ACC’s flagship member magazine and reaches 54,000 ACC members every month, in print and digitally. The magazine provides cardiovascular professionals across the spectrum with a comprehensive and trusted source of features on the top trends in cardiovascular medicine and innovation, along with expert commentary from leaders in their fields, updates on the latest health policy news, and clinical and professional news - putting it all in perspective for today's clinical practice.

- ACC members prefer Cardiology over other news magazines
- Top Ranked Cardiology publication and website
- ACC members trust Cardiology for its credible content
CIRCULATION

TOTAL PRINT CIRCULATION: 35,000
CIRCULATION VERIFICATION: Sworn statement

BREAKDOWN OF CIRCULATION:
ACC Members (Domestic Cardiologists) ~24,000
ACC Interventional Cardiologists ~3,000
ACC Fellows in Training ~4,000
CV Team Members ~4,000

GENERAL INFORMATION

Cardiology, is published monthly by the American College of Cardiology (ACC). Its mission is to put the latest research, science and clinical guidelines in the context of daily clinical practice and to provide clinicians across the entire spectrum of cardiovascular care with updates and commentary on professional news and trends.

Cardiology has been the member publication of the ACC since 1972, providing the College’s 54,000 members with a single, comprehensive source of timely and professional information and news.

EDITORS-IN-CHIEF

Peter C. Block, MD, FACC, is a professor of medicine and cardiology at Emory University Hospital and School of Medicine in Atlanta, GA.

John Gordon Harold, MD, MACC, is clinical professor of medicine at Cedars-Sinai Smidt Heart Institute and David Geffen School of Medicine at UCLA. He is a past president of ACC.
# Rates

## Earned Rates
Rates are based on the total units run in a calendar year (i.e., 6 full pages and 6 half pages earn 12x rate). Space purchased by a parent company and its subsidiaries is combined. Only paid ads count toward frequency.

## Advertising Page B/W Rates

<table>
<thead>
<tr>
<th>Frequency</th>
<th>King Page</th>
<th>3/4 Page</th>
<th>Standard “A” Page</th>
<th>1/2 Page King</th>
<th>1/4 Page</th>
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## Color Rate
(in addition to B&W rate): $2,550

## Premium Positions
(In addition to earned B&W rate):
- 2nd Cover: 35%
- 4th Cover: 50%
- Center Spread: 25%
- Cover Tips, Outserts: (check with ad rep)

## Inserts
Furnished inserts billed at B&W space rate, plus an additional $700 non-commissionable. Check with ad rep for associated fees.

## Issuance & Closing Dates

<table>
<thead>
<tr>
<th>Issue Date</th>
<th>Closing Date</th>
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<th>Inserts**</th>
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<tr>
<td>February</td>
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<td>4/8/22</td>
<td>4/12/22</td>
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<td>5/2/22</td>
<td>5/9/22</td>
<td>5/11/22</td>
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<td>November</td>
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<td>11/10/22</td>
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<td>January</td>
<td>12/1/22</td>
<td>12/7/22</td>
<td>12/7/22</td>
</tr>
</tbody>
</table>

## Frequency:
12x year

## Mailing Class:
Periodical

## Bonus Distribution Issues
- March: ACC.22: April 2-4, Washington, DC
- August: ESC Congress: Aug. 27-30, Barcelona
- September: TCT: Sept. 16-20, Boston
- November: AHA: Nov. 5-7, Chicago

*Subject to live conference being held with exhibition booths. Cancellations must be in writing prior to the closing date.

**Due date earlier if Publisher prints insert. Check with ad rep for dates.

## Acceptance of Advertising
All advertisements are subject to review and approval by the Editorial Board and Cardiology staff.

## Ad Placement Policy
Interspersed within articles.
MECHANICAL REQUIREMENTS

SWOP standards apply. All supplied ads should have registrations, center, and trim marks and should indicate issue date, page positioning, and other pertinent instructions on proofs and insertion orders. Contact your ad rep before ad is due for additional specifications. Submit in PDF format and convert all colors to CMYK. All fonts must be embedded. High-resolution images. File and proof should include bleeds and trim.

All material should be supplied to the following specs:

**TRIM SIZE:** 10.5” x 14”

**BLEED:** 0.125”

**LIVE MATTER:** 0.5” from trim and gutter

**TYPE OF BINDING:** Saddle-stitched

<table>
<thead>
<tr>
<th>Ad Sizes</th>
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<th>Bleed</th>
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<td>10.75” x 14.25”</td>
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<td>9.5” x 10”</td>
<td>10.75” x 10.75”</td>
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<td>7” x 10”</td>
<td>7.875” x 10.75”</td>
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<tr>
<td>Standard “A” Spread</td>
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</tr>
<tr>
<td>1/2 King Vertical</td>
<td>4.625” x 13”</td>
<td>5.5” x 14.25”</td>
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<tr>
<td>1/2 King Horizontal</td>
<td>9.5” x 6.5”</td>
<td>10.75” x 7.25”</td>
</tr>
<tr>
<td>1/4 Vertical</td>
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<tr>
<td>1/4 Horizontal</td>
<td>4.625” x 6.375”</td>
<td>NA</td>
</tr>
</tbody>
</table>

**PAPER STOCK:**
- Inside: 50 lb. coated stock
- Covers: 80 lb. coated stock

**REPRODUCTION REQUIREMENTS:** DIGITAL FILES REQUIRED.

**INSERTS**
- **Quantity:** 37,000 (includes spoilage)
- **Paper weight:** 80# maximum
- **Specifications:**
  - 8” x 11” pretrimmed head and face (0.125” foot trim will be applied). Inserts should be supplied folded.

Inserts not meeting mechanical specifications are subject to a surcharge. Publication requires preclearance of all inserts by submission of sample paper stock or paper dummy when insert is not standard. Please check with ACC for availability and other information required.

**OUTSERTS**
- **Specifications:** A-Size – 8” x 11”

**COVER TIPS**
- **Quantity:** 41,000 required
- **Trim size:** 10.5” x 6”

NOTE: If client is providing the files for print, please include a bleed of .125”. If client is providing preprinted material, they must be trimmed to spec.
New Study Shows Efficacy of Bempedoic Acid and Ezetimibe Combination for LDL-C Reduction

Cholesterol-lowering therapies.

For the present study, the authors predicted that a combination therapy of the BA + EZE cohort compared with the individual components and to placebo (17.5% and 0%, respectively; P<0.001), to bempedoic acid alone (42.5% and 0%, respectively; P=0.003) or to ezetimibe alone (43.9% and 6.1%, respectively; P≤0.003) vs. to placebo (17.5% and 0%, respectively; P<0.001). Ballantyne and colleagues noted that other therapies such as statins and ezetimibe work via differing mechanisms. They reported that the design of the fixed-dose combination study was that both BA + EZE have so it really adds well to a statin, which blocks cholesterol production. "It would make sense that this combination of a statin to ezetimibe is beneficial," he said. "It would make sense that this combination meets an unmet need for those who do not derive adequate benefit from these treatments."

PAPER SPOTLIGHT

Statins inhibit a different enzyme (HMG-CoA reductase), which also translates into ASCVD risk reduction," they wrote in the editorial. "This increase, constipation, fatigue, muscle spasms, and oral discomfort.

The study limitations included its short duration of 12 weeks, as well as the unmet medical need is that there are patients who are taking statins with hypercholesterolemia who do not achieve their age, ethnicity, or sex). Fasting LDL-C was required to be 2.6 mmol/L [HDL-C], or a coronary artery calcium score above the 95th percentile for adults at high risk for CVD who presented with the presence of ASCVD, in -10.0%, respectively; P≤0.002). Inclusion in this publication does not constitute a guarantee or endorsement by the American College of Cardiology (ACC), content developed for This content is made possible through an unrestricted educational grant provided by Esperion and was written and developed independently from the content. Dr. Ballantyne's comments in this paper spotlight were taken from an interview conducted by the Publisher.

What It Means for Patients, and What's Next

Maybe their levels are very high to begin with, or the patient has difficulty or sometimes even three hypertension drugs in combination instead," Dr. Ballantyne said. "The unmet medical need is that there are patients who are taking statins with hypercholesterolemia who do not achieve adequate benefit from these treatments.6-7 The design of the fixed-dose combination study was that both BA + EZE have so it really adds well to a statin, which blocks cholesterol production.9-12

Mean age of the study population was 64.3 years, and the study population included 50.5% women. The majority of study patients had ASCVD or HeFH. Ballantyne and colleagues sought to evaluate the efficacy of the BA + EZE 180 mg/10 mg fixed-dose combination was compared to BA 180 mg/day (n=100), EZE 10 mg/day (n=100), the BA + EZE cohort compared with the individual components and to placebo (17.5% and 0%, respectively; P<0.001), to bempedoic acid alone (42.5% and 0%, respectively; P=0.003) or to ezetimibe alone (43.9% and 6.1%, respectively; P≤0.003) vs. to placebo (17.5% and 0%, respectively; P<0.001).

The study limitations included its short duration of 12 weeks, as well as the sample size of 382 patients. The patients were randomized (2:2:2:1) to fixed-dose combination or monotherapy?"

PAPER SPOTLIGHT

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CAPS LOCK:

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OUTSERT

ADVERTORIALS

KOL interviews or a Paper Spotlight with key findings/take-home messages from a published article are options for paid advertorials that run within Cardiology.

The ACC must approve the proposed KOL/topic/paper and the final advertorial. The designed pages must be distinct from ACC’s editorial content, clearly marked as sponsored content and include ACC’s standard disclaimer. The advertiser has the option to write, design and submit the advertorial or to pay an additional fee for this service via the Publisher.

COVER TIPS

SUPPLEMENTS

Supplements for polybagging with Cardiology include conference highlights and “Best of” focused topics. Contact your sales rep for topics, pricing and available issues.

FAUX COVER

DIGITAL ADVERTISING

Banner ads in the monthly table of contents newsletter mailed to ACC members by Publisher are available. Contact the ad rep for pricing and details.
DIGITAL FILE SPECIFICATIONS

FILE FORMATS
Preferred format is PDF/Acrobat 4.05 or later, set for compatibility with PD version 1.3 (Acrobat 4); EPS; TIFF. All high-resolution images and fonts must be included. TIFF & EPS files must conform to the following minimum resolution specifications: Grayscale and color images: 300 dpi; Combination Grayscale and Color images: 500-900 dpi; Line art (Bitmap) images: 900-1200 dpi. Do not nest EPS files.

PAGE LAYOUT
Supply as single page files only, Right Reading, Portrait Mode, 100% Size, No Rotation. Created to the trim of the journal, plus a minimum 0.125” bleed on all sides. Keep live matter 0.5” from trim edges. Crop marks and SWOP color bars must be included, position 0.5” outside trim. Reverse type should be no less than 6pt. Fine lettering (thin lines, serifs) should be restricted to one color. All fonts and graphics must be embedded or included with the files and conform to the file formats listed above.

PROOFS
Proofs must be produced from the final file submitted. All proofs must conform to SWOP standards. For a list of current SWOP-approved proofs, visit www.swop.org/certification/certmfg.asp, and click on “Certified Systems & Ads.” Desktop inkjet printer proofs do not meet SWOP standards. ACC cannot guarantee color match unless acceptable proof is provided.

DISPOSITION OF MATERIAL:
Reproduction material will be held one year from last insertion.

DELIVERY OF MATERIALS

INSERTION ORDERS TO
M. J. Mrvica Associates, Inc.
Attention: Mark Mrvica
2 W. Taunton Avenue
Berlin, NJ 08009
(P) 856-768-9360
(F) 856-753-0064
Email: markmrvlc@mrvica.com

R.O.B. AD MATERIAL TO
M. J. Mrvica Associates, Inc.
Attention: Mark Mrvica
2 W. Taunton Avenue
Berlin, NJ 08009
(P) 856-768-9360
(F) 856-753-0064
Email: markmrvlc@mrvica.com

INSERT SHIPPING INFORMATION
Democrat Printing & Litho
Attention: Alan Mazander
6401 Lindsey Road
Little Rock, AR 72206
1-800-622-2216
Packaging should be clearly marked “Cardiology” with issue date