

Letter to the Editor: The Pundit Speaks

By Randolph M. Howes, M.D., Ph.D.

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"Experts Say Heart Stents Overused"

Heart disease is big business in the USA. Annually, more than half a million Americans undergo procedures to have a narrowed coronary artery propped open with a stent; whereas, about 1 million angioplasties are done in the United States each year and nearly 40 million people will be taking Lipitor in the United States, with an additional 20 million taking similar statin (cholesterol-lowering) drugs. Many of these interventions can be life saving. But, unfortunately, studies show, stents continue to be implanted in patients who stand to gain little, if any, benefit. In July of 2013, two of the country's largest medical organizations (the American Medical Association and the Joint Commission) identified the procedure commonly used to place a stent — called a percutaneous coronary intervention, or angioplasty — as one of five highly overused medical interventions. Organization spokesmen said, "Roughly 1 in 10 elective angioplasty procedures performed nationwide may be "inappropriate," and another third questionable." The literature shows that the operation costs around \$30,000, and it can cause tears in blood vessel walls, major bleeding and other problems. Their study looked at patients with stable coronary artery disease, a type that can cause chest pain and other symptoms during physical exertion but generally not at other times. Studies show that in these particular patients, inserting a stent is generally no better at preventing a heart attack or an early death than taking medication alone. Sometimes, experts say, doctors are motivated to use stents for financial reasons, or that part of the problem is simply that many patients, and even some doctors, incorrectly regard coronary artery disease as a plumbing problem. However, experts now say the plumbing analogy does not account for crucial factors like inflammation and that most ruptures occur at lesions that appear otherwise mild, in some cases, so small that they do not limit blood flow and may be invisible to cardiologists. Frequently, vulnerable plaques often cannot be identified or stented before they rupture and lead to blood clotting (a thrombus) that completely obstructs an artery. Two of the leading myths about coronary artery disease are that dietary fat creates plaque and clogs arteries. Actually, studies show that diets that include fats like the monounsaturated and polyunsaturated kinds found in nuts and olive oil can protect against heart disease. The other widespread myth is that narrowed arteries are the problem. As for elective angioplasties, about 9 out of 10 patients said they believed the procedure was going to prevent a future heart attack — expectations that were completely at odds with their cardiologist's expectations.

In the America that I love, physicians must fully inform patients of the dangers and benefits of treatments. Patients must be helped to clearly understand their options.

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