

American Heart Month: Are Stents and Bypass Surgeries Still Necessary?

Research suggests medicine, lifestyle changes are just as effective at preventing heart attacks

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VO/SOT SCRIPT

SUGGESTED TEASE	AMERICAN HEART MONTH IS ALL ABOUT RAISING AWARENESS OF THE LEADING CAUSE OF DEATH FOR MEN AND WOMEN. HOW THE APPROACH TO TREATING HEART DISEASE FOR SOME PEOPLE MAY BE CHANGING.
ANCHOR LEAD	FEBRUARY IS HERE WHICH MEANS HEART DISEASE AWARENESS IS IN THE SPOTLIGHT FOR AMERICAN HEART MONTH. A HEALTHY LIFESTYLE HAS ALWAYS BEEN KEY TO PREVENTION... BUT A RECENT STUDY ¹ IS CASTING DOUBT ON THE NEED FOR CERTAIN MEDICAL PROCEDURES FOR SOME PEOPLE WHO ALREADY HAVE HEART DISEASE. FOR DECADES, STENTING AND BYPASS SURGERIES HAVE BEEN STANDARD TREATMENT FOR PEOPLE WITH SEVERELY BLOCKED ARTERIES. THOUGH NEW RESEARCH SUGGESTS MEDICATION AND LIFESTYLE CHANGES MAY WORK JUST AS WELL AT PREVENTING HEART ATTACKS. DR. ANDREW FREEMAN, A CARDIOLOGIST AT NATIONAL JEWISH HEALTH, EXPLAINS.
(SOT :23) CG: Andrew M. Freeman, MD National Jewish Health	<i>"By and large stents don't save lives. Now people say to me, Well, doc, so and so my neighbor or myself or my family member just had a stent put in, and it did wonders for them. So if you're in the setting of an acute heart attack, a stent may be helpful. But it turns out that the vast majority of people who are getting stented, and most of these are done as outpatients in stable condition, it doesn't actually do anything."</i>
ANCHOR TAG	

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	<p>STENTING IS STILL RECOMMENDED AS AN IMMEDIATE PROCEDURE WHEN PEOPLE ARE HAVING A HEART ATTACK.</p> <p>THE RESEARCH ALSO FOUND STENTS ARE BETTER THAN MEDICINE AND OTHER LIFESTYLE CHANGES AT RELIEVING CHEST PAIN.</p>
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EXTRA BITES

<p>CG: Andrew M. Freeman, MD National Jewish Health</p>	<p>Dr. Freeman says alternative solutions can be effective for symptom relief: <i>"We try them on medicines, we try them on lifestyle, or we put them into our intensive cardiac rehab program. Because angina is a cover diagnosis by insurance which is wonderful and when they come through that by and large with good medicine and good lifestyle, their symptoms go away."</i> :14</p> <p>Dr. Freeman says stents don't change outcomes: <i>"If you have a blockage, we fix it, you should feel better. But for the vast majority of patients that turns out to not necessarily be the case. And what we're finding out with our experience as time goes on, and the research that goes on is our hunches right, it may fix it. You know the way it looks, but it may not change outcomes."</i> :17</p> <p>Dr. Freeman says diet and exercise help to reverse disease progression: <i>"The lifestyle that's been shown to reverse heart disease - cardiovascular coronary disease - is a low fat plant based whole food lifestyle combined with regular exercise, regular stress relief, regular connection and support and sleeping enough and if we can get all those things, we may be able to get people even better."</i> :18</p> <p>Dr. Freeman says alternative treatments are now considered instead of stents: <i>"It used to be that if we saw a blockage, we'd put a stent in. These days we have to take a pause and really think about it and make sure it's right for the patient, and the patient wants it themselves."</i> :10</p> <p>Dr. Freeman says stents are still a necessary solution for certain patients: <i>"There are some caveats to this, right? There are certain territories in the coronary tree, the left main or the proximal LAD, which are the 'widow maker' or the top part of the coronary tree that have prognostic implications. What does that mean? Well, it means that these people, if we don't do anything, are at a higher risk of dying."</i> :16</p>
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CG: Andrew M. Freeman, MD
National Jewish Health

Dr. Freeman says lifestyle changes are better for low-risk patients:
“The vast majority of people don’t have disease in those territories. It’s the other territories that don’t necessarily make a big difference necessarily, and so managing things medically with good medicines and/or massive lifestyle changes can be really powerful.” :16

Dr. Freeman says stents don’t cure the problem:
“When we put in stents, or when we do a bypass we don’t actually cure the problem. So we have to think about that for a second, right? If I put a bypass, I’m taking a blood vessel from someone’s leg, and I’m putting it and literally bypassing the blockage. So I didn’t cure the blockage, I just bypassed it. And a stent takes all those years of cheesesteaks or pizza, whatever it is we’ve been eating, and squishes it up against the wall of the artery. It doesn’t actually cure the problem.” :23

Dr. Freeman says lifestyle changes are most effective for disease prevention:
“When you look at coronary disease and you look at lifestyle interventions, one of the most potent antianginals is not nitroglycerin, not the things that caused angio chest pain. Nitroglycerin does get rid of chest pain, but when we put people on the lifestyle that I just described it is as effective if not more effective than any pill I’ve ever used, but it requires a massive lifestyle change.” :21

Dr. Freeman explains the risks behind invasive procedures:
“By and large they’re very, very safe, but there’s about a 1 percent risk during a heart catheterization or an angiogram or a stent that there could be a problem. What kind of problems? Well, any time we put something in a blood vessel there could be bleeding, infection, blood vessel damage, and the risk for heart attack and stroke, the very things that we’re trying to prevent, is around a half a percent.” :20

References

¹*International Study of Comparative Health Effectiveness With Medical and Invasive Approaches - ISCHEMIA, Presented by Judith S. Hochman at the American Heart Association Annual Scientific Sessions (AHA 2019), Philadelphia, PA, November 16, 2019. Online: <https://www.acc.org/latest-in-cardiology/clinical-trials/2019/11/15/17/27/ischemia>*

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