Even not-so-high triglyceride levels increase risk of CVD events

BY ANDREW BOWSER

NEW ORLEANS—Triglyceride levels may signal increased risk for coronary-heart disease at significantly lower levels than current guidelines indicate, according to a new report.

Based on the findings, researchers urged that the recommendations established by the National Cholesterol Education Program (NCEP) be reevaluated, and the cutoff point for triglycerides be drastically reduced.

In the study of 460 men and women aged 30 to 80 who in the late 1970s had suspected atheroscle-

rosis, researchers found that many patients

who had triglyceride levels considered safe still went on to have increased cardiovascular problems.

A blood-triglyceride level of 200 mg/dl or less is considered desirable, according to NCEP. However, even at 100 mg/dl, triglycerides were a "very power-

ful predictor" of future heart-disease events in these subjects, according to Michael Miller, M.D., director of preventive cardiology at the University of Maryland Medical Center in Baltimore.

"In our study, having a triglyceride level that was not high by today's standards was a very important predictor that an individual would have a heart attack or require bypass surgery due to advanced coronary-artery disease," Dr. Miller reported here last month at the annual meeting of the American Heart Association.

About half the subjects in the

study had triglyceride levels over 100

mg/dl. That half had "significantly reduced survival" due to heart-disease-related problems including myocardial infarction, cardiovascular mortality and coronary revascularization compared with those who had triglyceride levels under 100 mg/dl.



Dr. Michael Miller (left), pictured with Dr. Robert Rosenson, recommended lowering the NCEP cutoff level for triglycerides.

"These data show that [triglycerides are] an independent predictor of future cardiovascular events and suggest that the present classification of triglyceride levels may need to be refined," Dr. Miller said.

In general, only 50% of cardiovascular disorders are explainable by major risk factors such as high low-density lipoprotein levels, prompting researchers to suggest that triglycerides play a larger role than previously thought. Triglycerides appear to contribute to coronary-artery disease and heart attack by increasing blood viscosity, especially at higher levels, according to Robert S. Rosenson, M.D., director of the preventive cardiology center at Rush Medical College in Chicago. The more viscous the blood, the harder it is for the heart to pump blood to the tissues, particularly in the smallest vessels.

Dr. Rosenson studied blood

samples from 207 men and women and found that at triglyceride levels above 190 mg/dl, blood viscosity increased dramatically.

In Dr. Miller's study, the lower survival rate for patients with high triglyceride levels was independent of differences in age, alcohol use, cigarette smoking, diabetes, exercise, hypertension and HDL or LDL levels.

The importance of triglycerides in assessing risk of cardiovascular problems is controversial. According to Ishwarial Jialal, M.D., Ph.D., associate professor of internal medicine and pathology at the University of Texas Southwestern Medical Center in Dallas, high triglyceride levels are an "epiphenomenon," indicating that something else is wrong in the body.

Instead of measuring triglycerides, Dr. Jialal noted that it is more important to monitor HDL and remnant lipoproteins, a form of cholesterol intermediate between very low-density lipoprotein and LDL.

Studies have shown that when other conditions such as low levels of HDL or high levels of remnant lipoproteins are factored out. a high triglyceride level "is not a risk factor," Dr. Jialal said.

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Overall, clopidogrel reduced the risk of clinical events by about 33% in patients, while aspirin reduced the risk by roughly 25%.

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