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Applying the ACC/AHA 2007 Guidelines for UA/NSTEMI in Clinical Practice

Christopher P. Cannon, MD

(60 minutes)

Associate Professor of Medicine
Harvard Medical School
Senior Investigator, TIMI Study Group
Associate Physician, Cardiovascular Division
Brigham and Women's Hospital
Boston, Massachusetts

**UP TO 1 AMA PRA
CATEGORY 1 CREDIT™**

This activity is designed for cardiologists, emergency medicine physicians, internists, family physicians, and other interested healthcare professionals.

The American College of Cardiology and American Heart Association (ACC/AHA) recently released updated guidelines for the management of patients with unstable angina and non-ST-segment elevation myocardial infarction (UA/NSTEMI). The new guidelines provide physicians with up-to-date, detailed information on initial diagnostic tests and treatment options that can provide the best possible outcomes for patients with these acute coronary syndromes (ACS). The 2007 update also includes a number of important changes regarding long-term management after discharge for ACS to prevent secondary events. Dr. Cannon reviews the new guidelines, highlighting the major changes from the previous 2002 guidelines based on evidence from recent clinical trials, and discusses how the new guidelines can be applied to critical pathways and implementation tools currently used in clinical practice for the acute and long-term management of patients with UA/NSTEMI.

LEARNING OBJECTIVES

After taking part in this CME activity, participants should be better able to:

- Determine the likelihood of ACS in a patient and assess that patient's risk of subsequent complications
- Apply updated ACC/AHA guidelines and results from recent clinical trials to the acute management of UA/NSTEMI
- Implement ACC/AHA recommendations for long-term management after discharge for ACS to prevent secondary events

CME CREDIT DESIGNATIONS

ACCME The Network for Continuing Medical Education (NCME) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

AMA NCME designates this educational activity for a maximum of 1 *AMA PRA Category 1 Credit™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.

AAFP This activity has been reviewed and is acceptable for up to 1 Prescribed credit by the American Academy of Family Physicians. AAFP accreditation begins September 30, 2007. Term of approval is for one year from this date, with option for yearly renewal.

AOA This activity is eligible for up to 1 hour of credit in Category 2-A of the American Osteopathic Association.

SUGGESTED RESOURCES

- Anderson JL, Adams CD, Antman EM, et al. ACC/AHA 2007 guidelines for the management of patients with unstable angina/non-ST-elevation myocardial infarction: a report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines (Writing Committee to Revise the 2002 Guidelines for the Management of Patients With Unstable Angina/Non-ST-Elevation Myocardial Infarction) developed in collaboration with the American College of Emergency Physicians, the Society for Cardiovascular Angiography and Interventions, and the Society of Thoracic Surgeons endorsed by the American Association of Cardiovascular and Pulmonary Rehabilitation and the Society for Academic Emergency Medicine. *J Am Coll Cardiol.* 2007;50:e1-e157.
- Cannon CP, Steinberg BA, Murphy SA, Mega JL, Braunwald E. Meta-analysis of cardiovascular outcomes trials comparing intensive versus moderate statin therapy. *J Am Coll Cardiol.* 2006;48:438-445.
- NCDRTM—ACTION Registry™. Available at: <http://www.accncdr.com/WebNCDRTM/Action/default.aspx>.
- Peters RJ, Mehta SR, Fox KA, et al. Effects of aspirin dose when used alone or in combination with clopidogrel in patients with acute coronary syndromes: observations from the Clopidogrel in Unstable Angina to prevent Recurrent Events (CURE) study. *Circulation.* 2003;108:1682-1687.
- Petersen JL, Mahaffey KW, Hasselblad V, et al. Efficacy and bleeding complications among patients randomized to enoxaparin or unfractionated heparin for antithrombin therapy in non-ST-segment elevation acute coronary syndromes: a systematic overview. *JAMA.* 2004;292:89-96.
- Pfisterer M, Brunner-La Rocca HP, Buser PT, et al. Late clinical events after clopidogrel discontinuation may limit the benefit of drug-eluting stents: an observational study of drug-eluting versus bare-metal stents. *J Am Coll Cardiol.* 2006;48:2584-2591.
- Stone GW, Bertrand ME, Moses JW, et al. Routine upstream initiation vs deferred selective use of glycoprotein IIb/IIIa inhibitors in acute coronary syndromes: the ACUITY Timing Trial. *JAMA.* 2007;297:591-602.

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