

DECREASE-III

Discussant:

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No Conflicts to Disclose

DECREASE III

- Clinically Important
- Well founded and run
- Academically interesting
- The results show significant reduction in myocardial ischemia and the combined endpoint of cardiovascular death and non-fatal myocardial infarction in patients treated with fluvastatin XL.

coronary artery

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Interesting Questions:

- Is the beneficial effect unique to fluvastatin or a general effect of statins?
- Is there a systemic inflammatory effect caused by cross-clamp injury or a hemodynamic injury or some combination of both—potentially ameliorated by a pleiotropic effect of fluvastatin?
- Are there genetically determined differences in the patients? “Responders vs Non-responders?”
- Are there other clinically important “co-triggers” such as DM, obesity, smoking, sleep apnea, or platelet reactivity?

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Conclusions:

- Fluvastatin should be considered in statin naïve patients undergoing major peripheral vascular procedures.
- The risk profile of this therapy is so benign that this could change the guidelines.
- Future studies of other statins should consider avoiding a placebo arm.
- This study gives strong support to the concept of a clinically significant pleiotropic effect in humans.