

Updated Appropriate Use Criteria Address Coronary Revascularization for Patients with Stable Ischemic Heart Disease

Open configuration options

Document is the second of the updated two-part criteria for coronary revascularization

WASHINGTON (March 10, 2017) — The American College of Cardiology, along with several partnering organizations, today released updated appropriate use criteria for performing coronary revascularization in patients with stable ischemic heart disease.

In ischemic heart disease, clogged arteries cause the heart muscle to be deprived of the oxygen-rich blood needed to function. Patients with ischemic heart disease may experience chest pain or shortness of breath during exercise or times of stress.

This update is the second of a two-part revision for coronary revascularization. The first part updated appropriate use criteria for coronary revascularization in patients with acute coronary syndromes and was published last December. These criteria were developed to assist clinicians in the rational use of coronary revascularization in common clinical scenarios found in everyday practice.

“These new appropriate use criteria are an important advance in the efforts of the partnering societies to improve the quality of cardiovascular care and deliver the right care to the right patients,” said Manesh R. Patel, MD, FACC, FAHA, FSCAI, chief of the division of cardiology and co-director of the Duke Heart Center at Duke University and chair of the writing committee for the document. “The document provides a framework for how patients and providers can think about revascularization in the stable setting and will help health systems and medical societies judge quality of care.”

The writing group was tasked with developing clinical indications or scenarios that reflect typical situations encountered in everyday practice; these scenarios were later rated by a technical panel. The clinical scenarios were scored to indicate whether revascularization is appropriate, may be appropriate, or is rarely appropriate for the clinical scenario presented.

For this update, the format of the document has been modified to address concerns and improvements suggested by physicians and professional organizations. The rating panel members included an increased percentage of physicians directly involved in performing revascularization procedures, such as interventional cardiologists and cardiothoracic surgeons.

Prior recommendations mandating two antianginal drugs, which are used to treat chest pain, for medical therapy have been replaced by a step-wise use of antianginals. This starts ideally with a guideline-directed beta-blocker as first-line therapy, with other antianginals used to escalate therapy as clinically necessary. This is integrated with the determination of appropriateness for percutaneous coronary intervention or coronary artery bypass grafting as medical therapy is advanced. Writing committee members said they felt this approach was more applicable to real-world treatment patterns.

The updated criteria now place a greater emphasis on global risk assessments for future events and non-invasive testing results.

According to the writing committee, the criteria should be used as an overall guide, and physicians should evaluate each case on an individual basis. Patients should ask their providers if their proposed revascularization is appropriate.

These appropriate use criteria are a product of a partnership between the ACC, the American Association for Thoracic Surgery, the American Heart Association, American Society of Echocardiography, the American Society of Nuclear Cardiology, the Society for Cardiovascular Angiography and Interventions, the Society of Cardiovascular Computed Tomography and The Society of Thoracic Surgeons.

The *ACC/AATS/AHA/ASE/ASNC/SCAI/SCCT/STS 2017 Appropriate Use Criteria for Coronary Revascularization in Patients with Stable Ischemic Heart Disease* will publish online today in the *Journal of the American College of Cardiology*.

About the American College of Cardiology

The American College of Cardiology is a 52,000-member medical society that is the professional home for the entire cardiovascular care team. The mission of the College is to transform cardiovascular care and to improve heart health. The ACC leads in the formation of health policy, standards and guidelines. The College operates national registries to measure and improve care, offers cardiovascular accreditation to hospitals and institutions, provides

professional medical education, disseminates cardiovascular research and bestows credentials upon cardiovascular specialists who meet stringent qualifications. For more, visit acc.org.

About the American Heart Association

The American Heart Association is devoted to saving people from heart disease and stroke – the two leading causes of death in the world. We team with millions of volunteers to fund innovative research, fight for stronger public health policies, and provide lifesaving tools and information to prevent and treat these diseases. The Dallas-based association is the nation's oldest and largest voluntary organization dedicated to fighting heart disease and stroke. To learn more or to get involved, call 1-800-AHA-USA1, visit heart.org or call any of our offices around the country. Follow us on Facebook and Twitter.

About the American Society of Echocardiography

As the largest global organization for cardiovascular ultrasound imaging, the American Society of Echocardiography (ASE) is the leader and advocate, setting practice standards and guidelines. Comprised of nearly 17,000 physicians, sonographers, nurses, and scientists, ASE is a strong voice providing guidance, expertise, and education to its members. The Society has a commitment to improving the practice of ultrasound and imaging of the heart and cardiovascular system for better patient outcomes. For more information about ASE, visit ASEcho.org.

About the American Society of Nuclear Cardiology

The American Society of Nuclear Cardiology ASNC is the recognized leader in quality, education, advocacy and standards in cardiovascular imaging, with nearly 4,000 members worldwide. ASNC is the only society dedicated solely to advocacy issues that impact the field of nuclear cardiology and is working with success to influence regulations to fight onerous private health plan policies -- diverting reimbursement declines and fighting for improved payment and coverage. ASNC is dedicated to continuous quality improvement, education and patient-centered imaging, illustrating the ongoing commitment as a leader in the field of nuclear imaging and improving patient outcomes. ASNC establishes standards for excellence in cardiovascular imaging through the development of clinical guidelines, professional education, advocacy and research development. ASNC's members are comprised of cardiologists, radiologists, physicians, scientists, technologists,

imaging specialists and other professionals committed to the science and practice of nuclear cardiology. www.asnc.org

About the Society for Cardiovascular Angiography and Interventions

The Society for Cardiovascular Angiography and Interventions is a 4,300-member professional organization representing invasive and interventional cardiologists in approximately 70 nations. SCAI's mission is to promote excellence in invasive/interventional cardiovascular medicine through physician and allied health professional education and representation, and advancement of quality standards to enhance patient care. For more information about SCAI, visit www.SCAI.org.

About the Society of Cardiovascular Computed Tomography

SCCT is the international professional society representing physicians, scientists and technologists advocating for research, education and clinical excellence in the use of cardiovascular computed tomography. Our goal is to build a strong national and international membership body of physicians, scientists, technologists, administrators, and other individuals with interest in clinical applications or research in cardiovascular CT, and to develop evidence-based standards, guidelines, and recommendations relative to the clinical utilization of cardiovascular CT. Learn more at www.scct.org!

About The Society of Thoracic Surgeons

Founded in 1964, The Society of Thoracic Surgeons is a not-for-profit organization representing more than 7,200 cardiothoracic surgeons, researchers, and allied health care professionals worldwide who are dedicated to ensuring the best possible outcomes for surgeries of the heart, lung, and esophagus, as well as other surgical procedures within the chest. The Society's mission is to enhance the ability of cardiothoracic surgeons to provide the highest quality patient care through education, research, and advocacy.

Contacts:

ACC: Rachel Cagan, rcagan@acc.org, 202-375-6395

AHA: Darcy Spitz, darcy.spitz@heart.org, 212-878-5940

ASE: Angie Porter, aporter@asecho.org, 919-297-7152

ASNC: Kristin Bukovsky, kbukovsky@asn.org, 301-215-7575 ext. 203

SCAI: Kimberly Brown, kbrown@scai.org, 202-644-8561

SCCT: Elise Bender, ebender@scct.org, 703-766-1712

STS: Jennifer Bagley, [Contact](#), 312-202-5865