

In CAD, many don't get optimal secondary prevention med combo

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(HealthDay)—About one-third of coronary artery disease (CAD) patients fail to receive their optimal combination of secondary prevention medications, according to a study published online Oct. 30 in the *Journal of the American College of Cardiology*.

Thomas M. Maddox, M.D., from the VA Eastern Colorado Health Care System in Denver, and colleagues utilized data from the National Cardiovascular Data Registry PINNACLE Registry, a national outpatient cardiology practice registry, to investigate medication prescription patterns among 156,145 eligible CAD patients from 58 practices between July 2008 and December 2010.

The researchers found that about two-thirds of patients (66.5 percent) were prescribed the optimal medication combination for which they

were eligible. The rate of optimal combined prescription varied by practice from 28.8 to 100 percent, with a median rate of 73.5 percent. The practice median rate ratio for prescription was 1.25, after adjustment for patient factors, indicating a 25 percent likelihood that two random practices would vary in their treatment of identical CAD patients.

"Among a national registry of CAD patients treated in outpatient cardiology practices, over one-third of patients failed to receive their optimal combination of [secondary prevention](#) medications," the authors conclude. "Significant variation was observed across practices, even after adjusting for patient characteristics, suggesting that quality improvement efforts may be needed to support more uniform practice."

Several authors disclosed financial ties to the pharmaceutical industry. The PINNACLE Registry is sponsored by Bristol-Myers Squibb and Pfizer.

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