

Patients with cancer history experiencing severe heart attacks benefit from cardiac care

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One in 10 patients who come to the hospital with the most severe type of heart attack have a history of cancer, showing that this is an emerging subgroup of heart patients, according to Mayo Clinic research published in *Mayo Clinic Proceedings*. In addition, the study found that these patients have a three times higher risk of noncardiac death. Meanwhile, their risk of cardiac death is not higher? both at the time of their acute heart attack and over long-term follow-up.

Researchers conducted a <u>retrospective cohort study</u> of 2,346 patients seen at Mayo Clinic's Rochester campus for an ST-elevation myocardial infarction? the most severe <u>acute heart attack</u>. The retrospective covered a 10-year timeframe, beginning in 2000, when the newest and current types of stents were introduced into clinical practice. The patients were followed for acute and long-term outcomes for an average of six years.

"We've watched <u>cancer</u> survivorship increase over the past $2\frac{1}{2}$ decades, which is wonderful, but it has led to new challenges, such as handling of downstream illnesses and side effects to an extent never encountered before," says Joerg Herrmann, M.D., senior author and interventional cardiologist at Mayo Clinic. "In particular, as cardiologists, we wanted to know if cancer and its therapies left these patients debilitated from a cardiovascular disease standpoint."

Other study findings are:



- Patients with a history of cancer arrived at the hospital more frequently with cardiogenic shock, where the heart suddenly cannot pump enough blood. In addition, they more often received intra-aortic balloon pump therapy, a device inserted to help the heart pump blood, and possibly indicating a reduced cardiac reserve.
- Patients with a history of cancer, despite arriving to the hospital sicker, do not have a higher cardiac death rate. "This indicates that these patients receive the same, if not greater, benefit from angioplasty for an acute heart attack," Dr. Herrmann says.
- Patients with a history of cancer have a significantly higher possibility of dying in the hospital for reasons unrelated to the heart, despite arriving at the hospital with an acute heart attack.
- Patients diagnosed within the six months before the heart attack had the highest (sevenfold increased) risk of death in the hospital following angioplasty. The reason is not clear, Dr. Herrmann says.
- Patients with a history of cancer have a significantly higher risk of being hospitalized for heart failure during follow-up. But, with optimal medical treatment, there is no increased risk of dying from heart disease. These patients eventually die from their cancer disease, researchers found.

"This study supports the importance of cardiologists and oncologists working together to care for these patients," Dr. Herrmann says.
"Clearly, our goal is that the cancer patients of today do not become the cardiac <u>patients</u> of the future and, if they do, that we comprehensively see them through."

This concept of care, which has become known as "cardio-oncology," is an emerging medical discipline.



Provided by Mayo Clinic

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