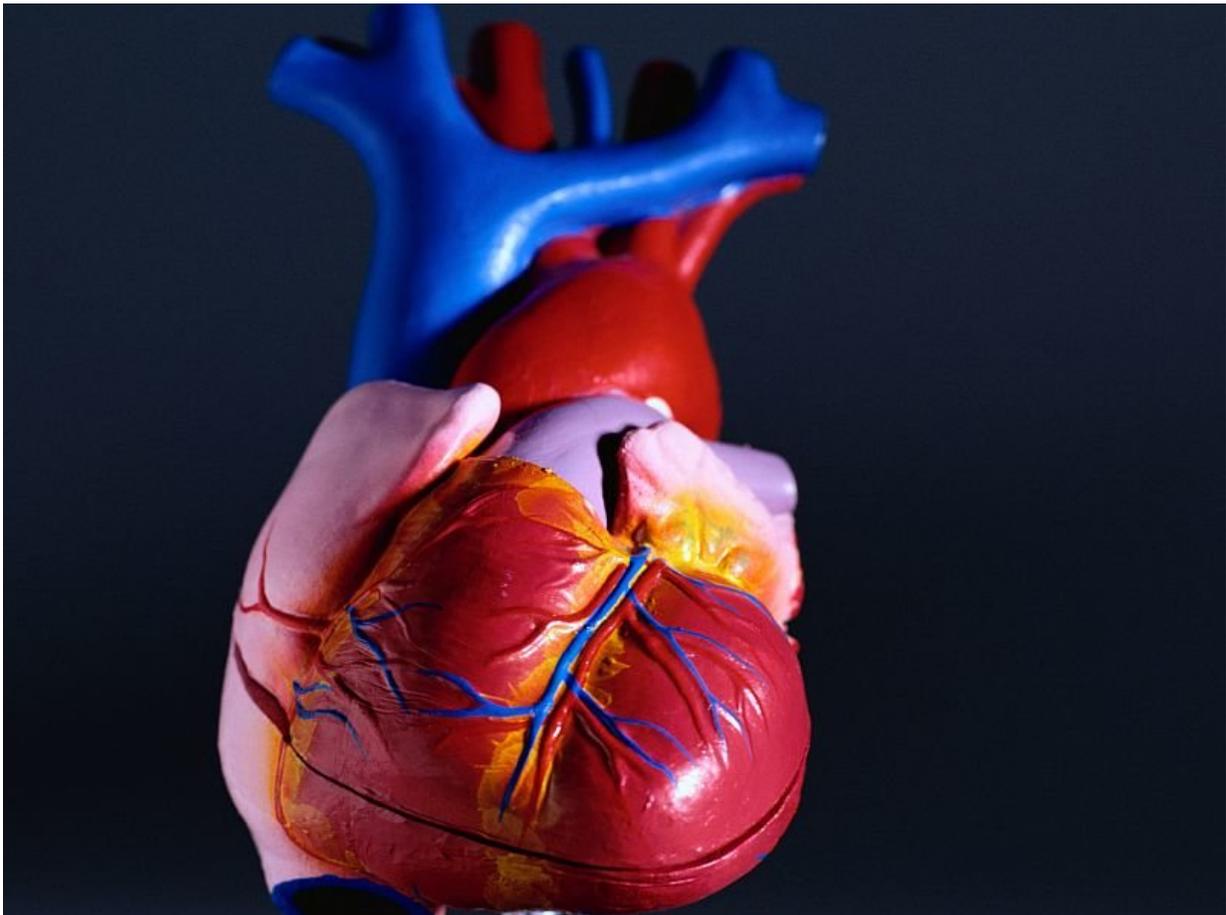


MI incidence down with CT angiography in suspected CAD

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(HealthDay)—For patients with suspected coronary artery disease

(CAD), coronary computed tomography angiography (CCTA) is associated with reduced incidence of myocardial infarction but no reduction in death or cardiac hospitalization versus functional stress testing, according to a review published online Oct. 2 in *JAMA Internal Medicine*.

Andrew J. Foy, M.D., from the Penn State College of Medicine in Hershey, and colleagues conducted a systematic review of 13 randomized trials involving patients with suspected CAD. Overall, 10,315 [patients](#) were in the CCTA arm and 9,777 in the functional stress testing arm, with a mean follow-up of 18 months.

The researchers found that no statistically significant differences were seen between CCTA and functional stress testing in death (1 versus 1.1 percent; risk ratio [RR], 0.93; 95 percent confidence interval [CI], 0.71 to 1.21) or cardiac hospitalization (2.7 versus 2.7 percent; RR, 0.98; 95 percent CI, 0.79 to 1.21). CCTA correlated with reduced [myocardial infarction](#) incidence (0.7 versus 1.1 percent; RR, 0.71; 95 percent CI, 0.53 to 0.96). It also correlated with elevated likelihood of undergoing [invasive coronary angiography](#) (11.7 versus 9.1 percent; RR, 1.33; 95 percent CI, 1.12 to 1.59) and revascularization (7.2 versus 4.5 percent; RR, 1.86; 95 percent CI, 1.43 to 2.43). Patients undergoing CCTA were also more likely to receive a diagnosis of new CAD and have started aspirin or statin therapy.

"CCTA is not associated with a reduction in mortality or cardiac hospitalizations," the authors write.

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