Smokers needed angioplasty and stenting a decade before non-smokers

10 June 2021

Smokers needed their blocked arteries fixed nearly a decade earlier than non-smokers, and patients with obesity underwent these procedures four years earlier than non-obese patients, according to a new statewide study.

The research included patients without a history of heart attack who were treated at hospitals across Michigan participating in BMC2, the Blue Cross Blue Shield of Michigan Cardiovascular Consortium. The patients had undergone angioplasty and/or stenting to widen or unblock their coronary arteries and restore blood flow. Almost all of them had at least one traditional risk factor, including smoking, obesity, high blood pressure, high cholesterol and diabetes. Most had three or more.

Additionally, women generally had their first procedure at a later age than men. Over the past decade, among patients undergoing their first angioplasty or stent procedure, the rates of obesity and diabetes have increased, while smoking and high cholesterol have decreased.

"Smoking is a completely preventable risk factor," said senior author Devraj Sukul, M.D., M.Sc., an interventional cardiologist and a clinical lecturer at the University of Michigan Health Frankel Cardiovascular Center. "If we direct additional efforts at preventing smoking and obesity we could significantly delay the onset of heart disease and the need for angioplasty and stenting."

Smoking cessation is a growing focus of the Michigan Collaborative Quality Initiatives, of which BMC2 is a member.

"In Michigan, we will work to help every smoker quit at the time of cardiac care because it is an unmatched teachable moment for patients," said Michael Englesbe, M.D., a surgeon and professor at Michigan Medicine who serves as portfolio medical director for the Collaborative Quality Initiatives.

Sukul also serves as associate director of BMC2's work in percutaneous coronary intervention.


Provided by University of Michigan