

Heart Action

at the Cardiac Center of Creighton University

June, 1991

After Thirty Years of Service . . .

Richard Booth, MD, will retire from the practice of cardiology on June 30th. Dr. Booth is a co-founder of Creighton's Cardiac Center.

In 1961 he and **Vincent Runco, MD** came to Omaha from Ohio State University to set up a cardiac care center at the old Saint Joseph Hospital at 10th and Castelar Sts.

In that first year, they opened a cardiac catheterization laboratory and started a fellowship program to train physicians to be cardiologists. Over the years, 93 physicians have been trained in this program.

Dr. Booth has influenced the careers of over 2,600 medical students and over 1,000 medical residents while at Creighton University.

In 1963, Dr. Booth's staff, working with Bell Telephone Laboratories, developed a dataphone system whereby rural doctors could transmit EKG readings via the phone and get an interpretation 24 hours a day, seven days a week. From two hospital locations in 1963, the network grew to 178 medical facilities in 10 states. It peaked in 1980 with over 84,000 EKGs being read by Creighton cardiologists.

By 1964, the **Carl W. Rentrom Heart Research Center** was added to the hospital. This two-story wing was the first of its kind in the country.

In 1966, Drs. Booth and Runco pioneered the area's first cardiac intensive care unit at Saint Joseph Hospital.

Drs. Booth and Runco made a commitment to educate local physicians on advancements in the diagnosis and treatment of heart disease. Two or three evenings a week, another cardiologist would accompany one of them to outlying communities and conduct seminars.

Dr. Booth was named Medical Director of Saint Joseph Hospital and Associate Dean of Creighton's School of Medicine in 1971.

Active in the American Heart Association—Nebraska Affiliate, he was on its Board of Directors for 10 years, and served as its president in 1967-68, and Treasurer in 1979.

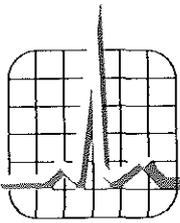


Richard W. Booth, MD

Nationally, he was a member of the American Heart Association's Board of Directors (1972-74); served on its Executive Committee (1973-74); and was a regional vice president of the American Heart Association (1973-74).

Dr. Booth was appointed to the National Subcommittee on Corporate and Concurrent Solicitations for the American Heart Association in 1980. He also served as president of the Combined Health Agencies Drive (CHAD) from 1978-80.

Thank you, Dr. Booth, for 30 years of service to the practice of cardiology, 30 years of service to the Midwest, and 30 years of service to Creighton University.



From the Chief...

To Be Or Not To Be—Mobile Cath Labs

The question of whether or not mobile cath labs are justified is not an issue limited to this technology alone but rather derives its importance or lack of importance from a much larger issue.

First, is there a need to increase the number of diagnostic catheterizations which are presently performed in the United States? I have no sense that there is a lack of availability of those diagnostic catheterizations necessary to provide appropriate healthcare.

Secondly, I am unaware of any study or information which has demonstrated that there is a need or justification for expanding cath lab capacity in the United States.

It is necessary that one asks, "What is the driving force behind the technology of mobile cath labs?" I think that it is apparent that it is market share.

The entrepreneurial cardiologist desires a mobile cath lab for his personal gain. The hospital administrator desires a mobile cath lab so he may fill his beds. This is true for both the small community hospital visited by the mobile cath lab and for the regional center which maintains the mobile cath facility.

Regional centers desire mobile cath labs to establish or to maintain or to increase the size of their referral

pattern. In the final analysis, I believe that market share, rather than the patients' best interest, encouraged by the manufacturers and vendors of this technology, is the driving force behind the establishment of mobile cath labs.

Before mobile cath labs are embarked upon as a needed "high tech" modality for health care, I believe their need should be critically examined by men and women without a vested interest.

It should be asked, "Can we afford the luxury of providing this expensive technology to small communities so that patients do not need to travel fifty to two hundred miles to a major medical center?"

Finally, in my opinion, before there is widespread use of this technology, I believe that it is necessary that there be not only a study related to quality assurance but also one which will address the issue of economic impact. In this age where cost of medical care and its impact upon the gross national product is of paramount importance, I feel that this issue alone is of major significance.

Michael H. Sketch, Sr., M.D.
Chief, Division of Cardiology
Creighton University

Women, Hormones and Heart Disease

by Syed Mohiuddin, MD

Cardiac Center Associate Director

Coronary heart disease (CHD) is the most common cause of death in women, as well as men, in the United States. However, the perception that heart disease is the primary killer of men only continues to exist at all levels of health care providers, leading to a "silent epidemic" among women of this country.

This misconception leads to a lack of early recognition and delays referral for proper diagnostic and treatment strategies. Delays in early diagnosis result in higher mortality and morbidity, both for coronary artery bypass surgery and percutaneous transluminal angioplasty (PTCA) procedures.

CHD and stroke are the most frequent causes of death in women over 60 years of age. These diseases kill more women than breast and uterine cancer, which have received far more attention from physicians, as well as female patients.

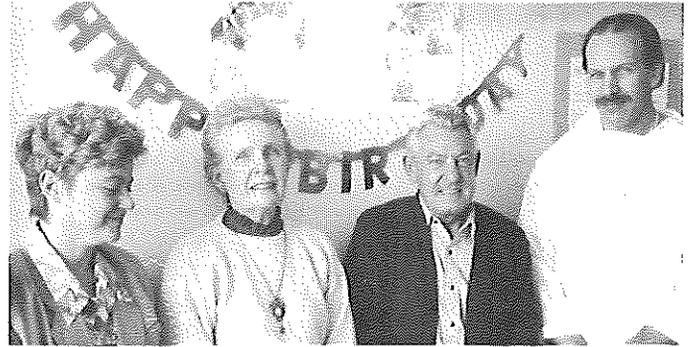
CHD is rare among the pre-menopausal women unless they smoke cigarettes or suffer from diabetes. The onset of CHD in women is delayed 10 years when compared to men and this time difference points to sex hormones having a pivotal role. However, there is no immediate and dramatic rise in the rate of CHD occurrence in women age 50-60 years, which may suggest that factors other than estrogen may also be significant contributors.

Men and women share many similarities regarding the risk factors for CHD but with some important differences.

Cigarette smoking appears to be a major hazard. It not only leads to premature menopause (possibly removing a protective factor), it also increases the risk of a heart attack by a factor of 3.6 x. The combination of diabetes, smoking and the use of oral contraceptives may be accumulative, resulting in the equalization of CHD rate for men and women under the age of 50 years.

Transplant Patient Marks 1st Anniversary

Ray Beeson, a 64-year old resident of Salix, Ia., celebrates the first birthday of his new heart with members of the heart transplant team. Since the surgery at Saint Joseph Hospital, he has ridden his motorcycle "...only on the backroads and he's enjoying life..." says his wife, Bernice.



Left, Cardiologist, Claire Hunter, MD, Mrs. Bernice Beeson, Ray Beeson, and Transplant Surgeon, Martin Rothberg, MD

Cardiac Rehabilitation Is On the Move

Several Outpatient Cardiac Rehabilitation program participants and staff members took part in the recent American Heart Association's Heart and Soul 2-Mile Walk/Run. Those walking/jogging included participants Dale Harris and his wife, Carol, Ed Rasmussen and his wife, Jo, Don Bienhoff, Gene Cunningham, Jim Graves and Gabe Parks. Tom Baechle, EdD, (Exercise Specialist) and Nurse Specialists Tami Docken, Terri Fogland, and Karen Hardy represented the staff. Dr. Baechle, Geri Moore, MA (Exercise Specialist) and her husband, Jeff, helped organize the event.

The Cardiac Center's Outpatient Cardiac Rehabilita-

tion staff hosted the annual Health and Fitness Assessment for patients, spouses and friends in April. The assessment was designed to help identify areas that patients can make changes to reduce their risk factors. The following evaluations were offered: blood pressure, height & weight, body composition, blood lipid profile, resting pulse, flexibility and grip strength.

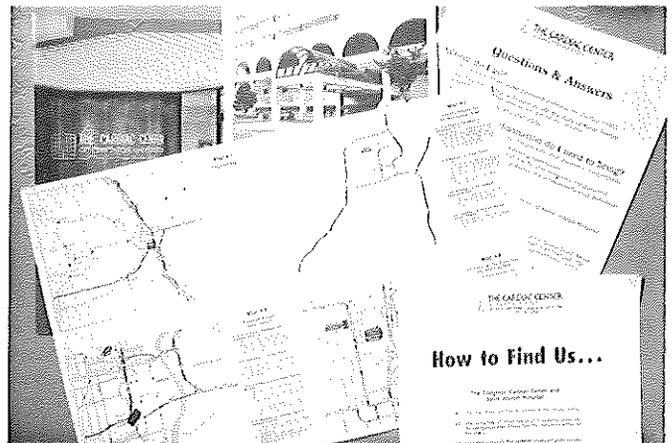
The May 13th educational meeting followed up with a "patient perspective" on reducing risk factors. Individual counseling allowed patients to discuss their results with the Outpatient Cardiac Rehabilitation staff.

New Patient Information Packet "FYI"

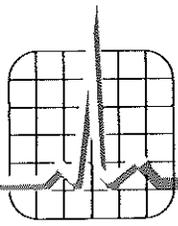
Its purpose is to make a stressful trip easier on the patients who are coming to the Cardiac Center for the first time, if they are unfamiliar with our location.

Preferred routes in Iowa and Nebraska are illustrated in four easy-to-follow maps. A general Q & A sheet answers typical questions for patients and their family members. A brief overview of the Cardiac Center plus a photo of the entrance to Saint Joseph Hospital are also included.

Packets are being distributed to referring physicians and outreach network hospitals. Creighton cardiologists will also have them available for the patients they see at the outreach clinic, if and when they need to come into the Cardiac Center.



Materials for New Patient Information Packets



Cardiac Center Sets the Pace

Richard Bowser (Arrhythmia Monitoring Lead Computer Systems Engineer) chaired a working meeting on "Waveform Databases and Testing". The meeting was open to all medical equipment standards groups at the annual meeting of the Association for the Advancement of Medical Instrumentation, in Washington, D.C. in May. He also participated in meetings of the Ambulatory Monitoring Subcommittee and the Cardiac Monitors Subcommittee. These committees are writing and revising documents which will become the American National Standards for such equipment.

Eddy Butkus, RN, BSN (Cardiac Drug Evaluation Clinic Nurse Specialist), and **Lois Stengel, RN, BSN** (Cardiac Drug Evaluation Nurse Coordinator) attended a recent investigators' meeting on the results of the study entitled, "Circadian Anti-Ischemic Program (CAP) Clinical Multicenter Evaluation of Nifedipine-GITS in Reducing the Total Ischemic Surge in Patients With Symptoms of Coronary Artery Disease." The Cardiac Center was a participating site in the study, involving the use of Procardia-XL.

The Cardiac Center's Outpatient Rehabilitation staff was well represented at the Nebraska Cardiovascular and Pulmonary Rehabilitation Network's annual Conference in Lincoln. Our attendees included Nurse Specialists, **Tami Docken, RN, Terri Fogland, RN, BSN, MA,** and **Karen Hardy, RN,** plus **Geri Moore, MA** (Exercise Specialist), **Lisa Thalken** (Exercise Leader), and **Mark Williams, PhD** (Co-Director).

Terri Fogland is President-Elect and Chairperson of the Fund Raising Committee. **Tami Docken** and **Lisa Thalken** co-chair the Research Committee and **Martha Monnig, RN** (Nurse Specialist) is Chairperson of the Public Relations Committee.

Joan Gannon, PharmD (Cardiac Drug Evaluation Clinic Research Fellow) presented a poster entitled, "Interaction Between Theophylline and Mexilitine" at the 92nd annual meeting of the American Society for Clinical Pharmacology and Therapeutics, in San Antonio, Texas.

Sonya Goddard, RN (Cardiac Drug Evaluation Clinic Nurse Specialist) recently attended an investigators' meeting in Chicago on a new study, "Effect of Pravastatin on Controlling Hypercholesterolemia."

Karen Hardy, RN (Outpatient Cardiac Rehabilitation Nurse Specialist) spoke on "Coronary Risk Factors and Angina" at a recent meeting of the OEA Manor residents in Omaha.

Thomas Hee, MD made a poster presentation of his abstract, "Effects of Exercise Induced Ischemia on Signal Averaged Electrocardiogram" at the North American Society of Pacing and Electrophysiology's IXth World Symposium in Washington, D.C. on May 31st. The abstract was co-authored by **Alan Kaneshige, MD, Tim Ryan, RN** (Electrophysiology Lab Supervisor), **Vince Huebert, RN** (Electrophysiology Lab Clinical Nurse), and **Syed Mohiuddin, MD.** **Tim Ryan** also attended the meeting.

Daniel Hilleman, PharmD (Administrative Director of Clinical Research) and **Nancy Hurley, RN, BSN** (Cardiac Drug Evaluation Nurse Specialist) attended a GUSTO initiation meeting in Bloomington, Minn. The GUSTO (Global Utilization of Streptokinase and tPA for Occluded Arteries) study is sponsored by the Duke University Medical Center.

Dr. Hilleman presented a lecture on "Procardia-XL Conversion From Immediate Release Calcium Channel Blockers" at the American College of Physicians recent meeting in New Orleans. He lectured on "Food-Drug Interactions" at the annual meeting of the South Dakota Society of Hospital Pharmacists, in Sioux Falls, S.D. on April 26th.

Dr. Hilleman attended a symposium on smoking cessation at the annual meeting of the American Psychiatric Association in New Orleans, May 12-15th.

Claire Hunter, MD and **Lois Stengel** attended a recent investigators' meeting for a new study: "Effect of Acadesine on Adverse Cardiac Outcomes in Patients Undergoing Coronary Artery Bypass Graft (CABG) Surgery" in San Diego, Calif. They also attended an investigators' meeting on "A Study of the Effects of Acadesine on Cardiac Ischemic Events and Hemodynamics in Patients Undergoing Aortocoronary Bypass Grafting" in San Diego. **Dr. Hunter** was on the faculty for a program, "The Beat Goes On: New Frontiers in Cardiac Transplantation", sponsored by the Critical Care Education Committee of Saint Joseph Hospital, on May 17th at the Omaha Marriott Hotel.

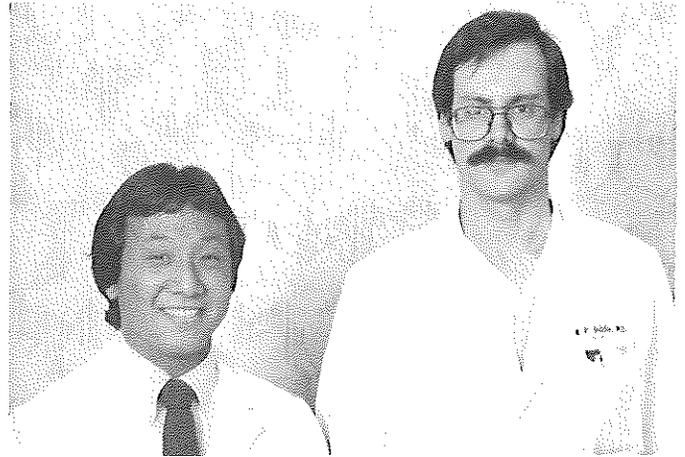
Joseph Lynch, MD spoke on two topics, "Thrombolytic Therapy for Myocardial Infarction-Update," and "Hypertension Treatment-Update" at Creighton's annual Family Medicine Update at Okoboji, Ia. on May 24-26.

Syed Mohiuddin, MD recently spoke on "Current Concepts in the Treatment of Hypertension" to the hospital medical staffs in Asbury, Kans., Falls City, Neb. and Harlan, Iowa. He presented the program,

Fellows Finish Training

Paul Biddle, MD, and Alan Kaneshige, MD, are the first physicians to complete Creighton's 3-year Cardiology Fellow program. Dr. Biddle will continue his training at Duke University's interventional cardiology program for one year. Dr. Kaneshige will enter a clinical and research fellowship program at the Mayo Clinic in non-invasive imaging of transthoracic and transesophageal echocardiography.

Both Dr. Biddle and Dr. Kaneshige plan to return to the Cardiac Center in July of 1992. They have been given the academic rank of Assistant Professor of Medicine in Creighton's School of Medicine.



Alan Kaneshige, MD, left, and Paul Biddle, MD

Women, Hormones and Heart Disease

Continued from Page 2.

Systolic hypertension, is an important and independent predictor of CHD both in men and women; but as low as 10mmHg rise in systolic pressure may cause the rate of CHD to increase by 30% in women. The higher risks of hypertension with oral contraceptives have also been well-documented.

Total cholesterol is less important in women, particularly, when it is within a range of 200-260 mg. Low HDL may be a better prognosticator in women, compared to higher LDL levels. There is some experimental

evidence that estrogen inhibits the LDL uptake by the arterial wall. Higher triglyceride levels which are associated with low HDL may also be more significant in women, particularly in older women.

In summary, although the age of onset for CHD may be different in men and women, the risk factors, mortality and morbidity are quite similar. Therefore, earlier recognition and proper selection of treatment modalities are equally important for the members of both sexes.

Cardiac Center Sets the Pace

Continued from Page 4.

"Circadian Variation and Triggers of Onset of Acute Cardiovascular Disease" to the Platte-Loup Valley Medical Society on April 30th in Columbus, Neb. He was the Program Director and a faculty member for a CME program: "Antiarrhythmia Therapy-Trends for the 1990's" at Omaha's Marriott Hotel on May 4th. He spoke on "Development of Resistance to Antiarrhythmics: Fact or Fiction?" Drs. Tom Hee and Nazih Kadri were also faculty members for this program. Dr. Hee's topic was "Proarrhythmia". Dr. Kadri spoke on "New Concepts in Pathogenesis of Ventricular Arrhythmias."

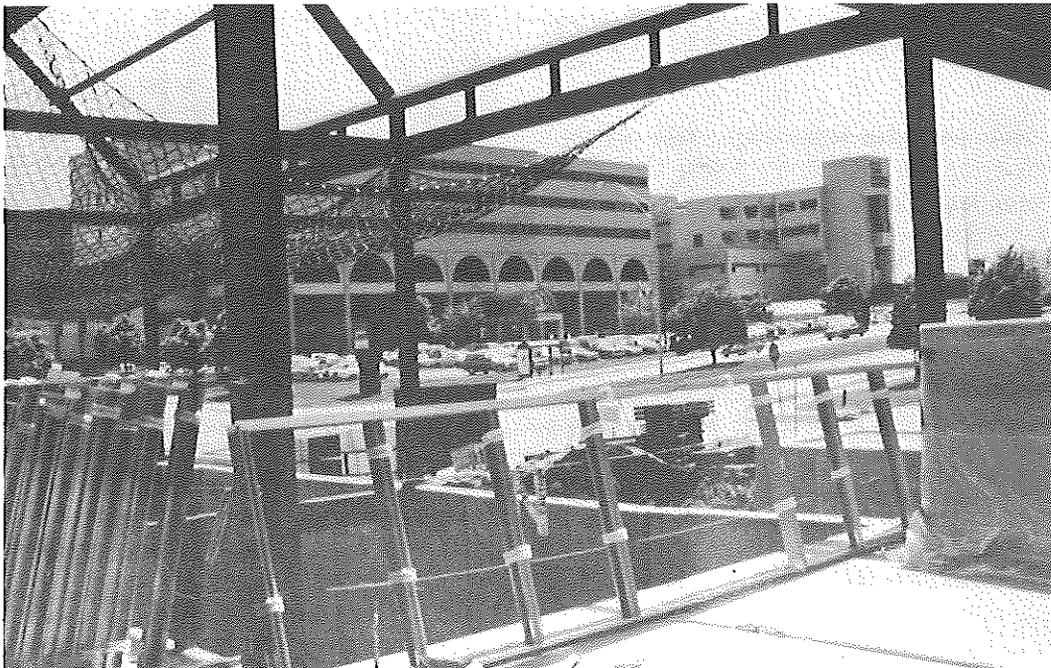
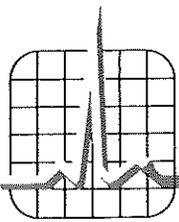
Dr. Mohiuddin also spoke to the Iowa Southwest Medical Society on May 14th in Missouri Valley. The title of his talk was "Management of Cardiac Arrhythmias Current Concepts". He addressed the Department of Family Practice, GRAND ROUNDS, at Offutt AFB on May 16th. His topic was "Acute

Coronary Syndromes With Special Reference to Unstable Angina."

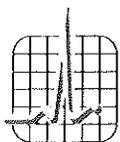
Lois Stengel attended the annual meeting of the Associates of Clinical Pharmacology in San Diego April 29-May 1st.

Anne Stoysich, PharmD (Clinical Research Pharmacist) attended the recent Pittsburgh Conference on Analytical Chemistry and Applied Spectroscopy, in Chicago.

Dr. Stoysich co-authored an article, "Influence of Mexiletine on the Pharmacokinetics of Theophylline in Healthy Volunteers" for the Journal of Clinical Pharmacology, 1991;31:354-357. Co-authors are Syed Mohiuddin, MD, Christopher J. Destache, PharmD, Henry C. Nipper, PharmD, and Daniel E. Hilleman, PharmD.



Creighton's new Ambulatory Clinic Building moves along toward completion. It will house Cardiology's Cardiovascular Disease Prevention and Rehabilitation Center. View is from 30th & Webster Streets toward Saint Joseph Hospital.



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