IN BRIEF

In brief

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ESC backs regulations for medical devices

The European Society of Cardiology has said in a position paper that it welcomes the European Commission's (EC) proposals for a new Regulation to govern the evaluation and approval of medical devices in Europe as an important step towards improving patient safety. The EC proposal document is available at http://ec.europa.eu/health/medical-devices/documents/revision/index_en.htm

New risk analysis scoring system

A new risk scoring system, based on the SMART study, allows doctors to determine more accurately the risk of cardiovascular disease patients developing a new event, such as heart attack or stroke.

Researchers from the University Medical Center (UMC) Utrecht, The Netherlands, developed the 'SMART risk score' by using data from 5,800 patients in the SMART (Secondary Manifestations of ARTerial disease) study.

Clinical details include gender, medical history, smoking behaviour, blood pressure and laboratory results. By using the model, doctors can now for the first time accurately predict a patient's risk of a recurring vascular or cardiovascular event within the next 10 years. The results are published in *Heart* (doi: 10.1136/heartinl-2013-303640).

Professor Yolanda van der Graaf, an epidemiologist at UMC Utrecht explains: "Patients and doctors do not gain anything from knowing what the average risk is. They want to know what their own individual risk is of disease recurrence".

Sit less and move around more

Individuals at high risk of developing type 2 diabetes would benefit from being told to sit less and move around more often, rather than simply exercising regularly, according to research published in *Diabetologia* (doi: 10.1007/s00125-013-2845-9). Dr Joseph Henson and colleagues from the University of Leicester suggest that reducing sitting time by 90 minutes in total per day could lead to important health benefits.

Currently, at risk patients are advised to engage in moderate-to-vigorous physical activity for at least 150 minutes per week. But the new study suggests that patients should in fact be advised to reduce their sedentary time.

"Diabetes and cardiovascular prevention programmes concentrating solely on moderate-to-vigorous physical activity may overlook an area that is of fundamental importance to cardiometabolic health," says Dr Henson who thinks there should be a paradigm shift in advice given to individuals at high risk of type 2 diabetes, who should be encouraged to think about the balance of sedentary behaviour and physical activity throughout the day.

New insulin available

Insulin degludec (Tresiba®), a new once-daily basal insulin for adult patients with type 1 and type 2 diabetes, is now available in the UK. According to the manufacturers Novo Nordisk UK, it is the first insulin to offer people with diabetes flexibility in the timing of insulin administration, on occasions when

day is not possible.

administration at the same time of

First UK chair in cardiorenal medicine



Congratulations to Professor David Goldsmith (pictured above), Consultant Nephrologist at Guy's King's and St Thomas' Medical School, King's College London, who has recently been appointed to the first Chair in Cardiorenal Medicine in the UK. The appointment reflects the growing academic overlap between heart and kidney disease.

Professor Goldsmith has major interests in hypertension, cardiovascular disease and inflammation and calcification syndromes in renal patients. He is a founder member and active participant in the Cardiorenal Forum, which is holding their 8th Annual Scientific meeting on 4th October, this year (see www.cardiorenalforum.com).

Speaking to the *BJC*, Professor Goldsmith said, "I am delighted to have an opportunity to play a role in highlighting ever-increasing links between renal medicine, cardiology, diabetology and other clinical disciplines. I believe this reflects a growing trend towards doctors talking to each other across these different specialties in order to improve patient care and outcomes."

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