

In brief

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NICE NOAC guidance

The National Institute for Health and Care Excellence (NICE) has recently published two recommendations on the use of novel oral anticoagulants (NOACs).

NICE has recommended the NOAC dabigatran as an option for treating and preventing deep-vein thrombosis (DVT) and pulmonary embolism (PE) in adults (available in full at <http://www.nice.org.uk/guidance/ta327>)

A final appraisal determination has also been issued for the NOAC rivaroxaban. It recommends it is an effective treatment option for preventing secondary events after acute coronary syndrome in patients with elevated cardiac biomarkers. Publication of full guidance is expected to follow in the first quarter of 2015.

Two thirds of people would opt for genetic screening

A study has found that two thirds of Britons would have a genetic test to identify risk of disease if it were free on the NHS while a separate survey has found only one third of GPs would welcome wider genetic testing, with 79% of the 300 GPs surveyed fearing this would lead to unnecessary anxiety for patients.

The two surveys were carried out by the pharmaceutical company Astellas as part of their Innovation Debate.

3D printed heart could reduce surgeries in children

New 3D printed heart technology could reduce the number of heart surgeries in children with congenital heart disease, according to data presented recently at EuroEcho-Imaging 2014.

Printed 3D hearts are made with flexible materials that can trace a beating heart, using a computed tomography (CT) or magnetic resonance imaging (MRI) scan to generate muscles and valves which can be beating or static. The models are used to plan surgeries in children with congenital heart diseases such as double outlet right ventricle or tetralogy of Fallot.

The 'Saatchi Bill' – where do you stand?

The Telegraph

Norman Lamb: Why we had to axe Lord Saatchi's Bill and think again

The Medical Innovation Bill proposed by Lord Maurice Saatchi, which would allow doctors to treat terminally ill patients with new and experimental treatments instead of having to stick to standard procedures, has given rise to heated debate across the medical community. Recently vetoed by the Liberal Democrats, who now promise a full examination of the issue, it is even more important for healthcare professionals to voice their opinions. We present one view on the Bill's ambitions and implications in our new 'Opinion' section online, which we hope will stimulate debate. Have your say now in the comments section at the end of the online article, available at <http://bjcardio.co.uk/2015/02/saatchi>

Spontaneous preterm delivery raises CVD risk

A history of spontaneous preterm delivery appears to double a woman's risk of heart disease, stroke and other cardiovascular diseases (CVD), according to a study published in the *European Journal of Preventive Cardiology* (doi: 10.1177/2047487314566758.)

Authors described the strength of the association as "robust" and, as an independent risk factor for CVD, "almost equally strong" as raised blood pressure, elevated lipid levels, overweight, smoking and diabetes mellitus (with similar hazard ratios between 2.0 and 2.5).

The findings emerged from a meta-analysis of cohorts across Europe. The sample sizes of the individual studies ranged from 3,706 to 923,686, with follow-up from 12 to 35 years.

Scotland accepts riociguat to treat inoperable CTEPH

The Scottish Medicines Consortium (SMC) has accepted riociguat as the first specifically licensed treatment for chronic thromboembolic pulmonary hypertension (CTEPH).

The treatment will be restricted to prescribing by specialists in the Scottish Pulmonary Vascular Unit, for adult patients with World Health Organisation functional class II to III, with inoperable CTEPH, persistent or recurrent CTEPH after surgery, and to improve exercise capacity for patients in whom a PDE5 inhibitor is inappropriate, not tolerated, or ineffective.

CVD patients should avoid being outside in rush hour

Cardiovascular disease (CVD) patients should be advised to avoid being outside during rush hour traffic, says a recent paper in the *European Heart Journal* (doi: 10.1093/eurheartj/ehu458).

The authors recommend various actions to reduce exposure to air pollution levels that could be damaging to health, including avoiding streets with high traffic intensity, and considering ventilation systems with filtration for homes in high pollution areas.

Switched to BJC digital yet?

Two more lucky winners in our prize draw, Dr Naguib Hilmy (Whaddon Medical Centre, Bletchley) and Dr Yanish Purmah (City Hospital, Birmingham) switched to digital and have won a portable AliveCor heart monitor for their practice.

Our prize draw is now closed, but any UK healthcare professionals who receive a print copy of the journal can still switch to a digital-only subscription should they wish. If you are not yet registered online, you can do this by going to the BJC website <http://www.bjcardio.co.uk/> and clicking on the 'Register' tab. Enter your details, and add "switch" in the box when prompted.

Users who are already registered on our website can simply log in as usual and click on 'Amend your profile'. Enter "switch" in the box when prompted. Ensure you click 'Update your profile' at the bottom of the page before exiting.