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CorNotes

CVI SEMINAR SERIES

The next CVI seminar will be held on **Thursday, February 16, 2006 at 4:00 pm** in **The Van Kampen Conference Center, Building 110, Room 6274**. Our speaker is:

Brenda Russell, Ph.D.
Professor of Physiology & Biophysics, Medicine, and Bioengineering
The University of Illinois at Chicago
Chicago, IL

The title Dr. Russell's talk is:

"Stem Cell Niche:
Microtopography for Cardiac Cells"

For further information about the CVI Seminar Series, contact Dr. Leanne Cribbs at x72817.

CVI JOURNAL CLUB

February 9…….Dr. Cribbs

For further information, contact Dr. Ken Byron at x72819.

RECENT PUBLICATIONS FROM THE CVI

Azegami K, Wilber DJ, Arruda M, Lin AC, Denman RA. Spatial resolution of pacemapping and activation mapping in patients with idiopathic right ventricular outflow tract tachycardia. *J Cardiovasc Electrophysiol*. 2005;16(8):823-9.

Cooper HA, Sacco J, Solomon AJ, Leman R, Wilber D. Maximum ventricular rate predicts the ability to achieve and maintain normal sinus rhythm in patients with atrial fibrillation. *Am J Cardiol*. 2005;95(5):597-602.

Curtis AB, Seales AA, Safford R, Slater W, Tullo N, Vidaillet H, Wilber DJ, Slee A. Clinical factors associated with abandonment of a rate-control or rhythm-control strategy for the management of atrial fibrillation in the AFFIRM study. *Am Heart J*. 2005;149(2):304-8.

Joshi S, Wilber DJ. Ablation of idiopathic right ventricular tachycardia: current perspectives. *J Cardiovasc Electrophysiol*. 2005;16 Suppl 1:S52-8, 2005.

Moss AJ, Brown MW, Cannom DS, Daubert JP, Estes M, Foster E, Greenberg HM, Hall WJ, Higgins SL, Klein H, Pfeffer M, Wilber D, Zareba W. Multicenter automatic defibrillator implantation trial-cardiac resynchronization therapy (MADIT-CRT): design and clinical protocol. *Ann Noninvasive Electrocardiol*. 2005;10 Suppl 4:34-43.

Varma N. Right bundle branch block and second-degree atrioventricular block: what is the mechanism? *Heart Rhythm*. 2005 Mar;2(3):325-7.

Varma N, Stambler B, Chun S. Daily atrial fibrillation burden and simultaneous ventricular responses may be measured and detected early by implanted devices designed for wireless data transmission. *Pacing Clin Electrophysiol*. 2005 Jan;28 Suppl 1:S133-6.

Yang Y, Varma N, Keung EC, Scheinman MM. Re-entry within the cavo-tricuspid isthmus: an isthmus dependent circuit. *Pacing Clin Electrophysiol*. 2005;(8):808-18.

Zareba W, Moss AJ, Jackson Hall WJ, Wilber DJ, Ruskin JN, McNitt S, Brown M, Wang H; MADIT II Investigators. Clinical course and implantable cardioverter defibrillator therapy in postinfarction women with severe left ventricular dysfunction. *J Cardiovasc Electrophysiol*. 2005;16:1265-70.

CREST Clinical Trial

Dr. Fred Leya of the section of Interventional Cardiology has teamed up with Dr. Jose Biller of Neurology to conduct the CREST Clinical Trial. Guidant Corporation is funding this trial through an NIH grant.

This study is designed to determine whether carotid angioplasty with stenting is as effective as carotid endarterectomy in the prevention of stroke in patients with carotid artherosclerosis. The first few patients will receive carotid stenting. The remainder will be randomized to carotid stenting or carotid endarterectomy.

Participants must be (1) between 18 years and 79 years old; (2) have a discrete lesion located in the internal carotid artery (with or without involvement of the contiguous common carotid artery); and (3) be symptomatic (with carotid stenosis 50% or more), as evidenced by transient ischemic attack, amaurosis fugax, minor or non-disabling stroke (in the hemisphere supplied by the target vessel), within 180 days of the treatment date OR be asymptomatic patients with carotid stenosis 70% or more.

For more information or to alert the Interventional Cardiology team of potential participants, please contact the project's coordinator, Katie Small, at 708-327-2761.