

CorNotes

CVI SEMINAR SERIES

The next CVI seminar will be held on **Thursday, November 17, 2005 at 4:00 pm** in **The Van Kampen Conference Center, Building 110, Room 6274**. Our seminar speaker is:

Metin Avkiran, PhD, DSc
Professor of Molecular Cardiology
Cardiovascular Division
King's College London, UK

The title of Dr. Avkiran's seminar is:

"Novel Roles of Protein Kinase D in Myocardium"

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

CVI JOURNAL CLUB

November 10.....Dr. Marchese
 December 8.....Dr. Martin

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

RECENT PUBLICATIONS FROM THE CVI

Kramer, H., Jacobs, D.R., Jr., Bild, D., Post, W., Saad, M.F., Detrano, R., Tracy, R., Cooper, R., Liu, K. Urine albumin excretion and subclinical cardiovascular disease - The multi-ethnic study of atherosclerosis. *Hypertension* 46(1):38-43, 2005.

Li, X.D., Zima, A.V., Sheikh, F., Blatter, L.A., Chen, J. Endothelin-1-induced arrhythmogenic Ca^{2+} signaling is abolished in atrial myocytes of inositol-1,4,5-trisphosphate(IP_3)-receptor type 2-deficient mice. *Circ. Res.* 96(12):1274-1281, 2005.

Heidkamp, M.C., Scully, B.T., Vijayan, K., Engman, S.J., Szotek, E.L., Samarel, A.M. PYK2 regulates SERCA2 gene expression in neonatal rat ventricular myocytes. *Am. J. Physiol. Cell Physiol.* 289(2):C471-C482, 2005.

MADIT-CRT Trial

Dr. David Wilber, Director of the Cardiovascular Institute and the section of Electrophysiology, is the principal investigator conducting the MADIT-CRT clinical trial in cooperation with the University of Rochester on behalf of Guidant Corporation.

This trial is designed to determine if combined ICD-Cardiac Resynchronization Therapy (CRT-D) will reduce the risk of mortality and heart failure events by approximately 25% in subjects who are in NYHA Functional Class II with non-ischemic or ischemic cardiomyopathy and subjects who are in NYHA Functional Class I with ischemic cardiomyopathy, left ventricular dysfunction ($EF \leq 0.30$), and prolonged intraventricular conduction (QRS duration ≥ 130 ms).

The primary goal is to determine whether CRT-D in high-risk coronary subjects will significantly reduce the combined endpoint of all-cause mortality or heart failure events when compared to ICD-only therapy, whichever comes first.

The trial will also be used (1) to evaluate the effects of CRT-D, relative to ICD-only, on the changes from baseline to one year in ECHO-determined left ventricular internal volume at end systole with CRT therapy turned off during the one-year echocardiogram; (2) to evaluate the effects of CRT-D, relative to ICD-only, on the changes from baseline to one year in ECHO-determined left ventricular internal volume at end diastole with CRT therapy turned off during the one-year echocardiogram; and (3) to evaluate the effects of CRT-D, relative to ICD-only, on the subject-specific rates of multiple heart failure events over the full study period.

For more information or to alert the Electrophysiology team of potential participants, please contact the project's coordinator, Jean DelPriore, at 708.216.2644.

