

Experts Join Forces to Improve Care for People with Type 2 Diabetes, Cardiovascular Disease

CardioMetabolic Health Alliance to address high-risk groups and the need for more effective, coordinated care

BOSTON, October 4, 2012 – An estimated 47 million people in the U.S. are living with cardiometabolic disorders, putting them at an increased risk of developing heart disease or type 2 diabetes. To underscore the importance of prevention, members from the American College of Cardiology (ACC), the National Minority Quality Forum (the Forum), and the American Association of Clinical Endocrinologists (AACE) will meet for the first time at the Cardiometabolic Health Congress in Boston (October 10-13) to discuss ways to improve cardiometabolic risk factor control in diverse populations and to provide more effective and coordinated care for people with cardiometabolic disorders. Cardiometabolic disorders represent a cluster of interrelated risk factors including high blood pressure, elevated fasting blood sugar, dyslipidemia, abdominal obesity (waist circumference) and elevated triglycerides.

“Prevention is an underutilized strategy,” said ACC President William Zoghbi, M.D., FACC. “Cardiovascular risk assessment and intervention among people with type 2 diabetes has never been more imperative than it is right now. Type 2 diabetes affects almost one in 10 U.S. adults and approximately 230 million people worldwide.”

The main cause for morbidity and mortality in this high-risk population is coronary artery disease (CAD). There is a two- to four-fold increased risk for CAD and its complications compared with the non-diabetic population, accounting for up to 75 percent of diabetes-related deaths.

Members of the CardioMetabolic Health Alliance (CMHA), with collaboration from the Association of Black Cardiologists (ABC), will have access to multiple databases including the combined power of ACC’s clinical outcomes registries, PINNACLE and National Cardiovascular Data Registry (NCDR); and the Forum’s National Health Index, a healthcare database comprised of over 800 million patient records linking medical, demographic, environmental, claims, clinical-laboratory, and other data elements into a centralized data warehouse, linked by zip code. NCDR provides the tools to quantify and understand disease interaction, including simultaneous cardiovascular and diabetes disease progression, among real world populations. The Forum’s National Health Index database is a versatile, comprehensive, web-based resource that offers the unique opportunity to visualize disease and health status in any community.

Analysis of these data will reveal the following important information:

- predictable patterns of cardiovascular events by zip code in the U.S. and how these patterns can be changed;
- how cardiometabolic disease correlates with increased hospitalization for acute cardiac events; and
- how these findings can be used to design predictive models and quality improvement interventions targeted for providers and patients at high risk for an acute cardiovascular episode.

“This newly formed alliance will be essential to understanding and positively impacting those affected by cardiometabolic disorders that may lead to heart disease or type 2 diabetes,” said Gary A. Puckrein, Ph.D., Forum President and CEO. “We have an array of evidence-based interventions available to reduce the risk of developing type 2 diabetes and to reduce associated risks of CAD among those with type 2 diabetes.”

The founding sponsor of this initiative is Boehringer Ingelheim Pharmaceuticals, Inc.

About the CardioMetabolic Health Alliance

The CMHA is a multi-disciplinary alliance of experts dedicated to raising awareness of cardiometabolic disorders, developing new research opportunities, supporting national or local quality improvement activities, investigating and advancing health policy issues and addressing barriers confronting minority patients. The alliance members include:

- The American College of Cardiology (www.acc.org), a leader in the formulation of health policy, standards and guidelines, and is a staunch supporter of cardiovascular research. The ACC is represented by Laurence Sperling, M.D., FACC, FACP, FAHA, Professor of Medicine (Cardiology), Director of Center for Heart Disease Prevention, Emory University School of Medicine, Chair of the ACC Cardiometabolic Workgroup and Chair of CMHA.
- The National Minority Quality Forum (www.nmqf.org), a non-profit healthcare research and educational organization dedicated to the elimination of health disparities. The Forum is represented by Gary A. Puckrein, Ph.D., President and CEO.
- The American Association of Clinical Endocrinologists (www.aace.com), the largest association of clinical endocrinologists in the world, concentrating on the treatment of patients with endocrine and metabolic disorders including diabetes, thyroid disorders, osteoporosis, growth hormone deficiency, cholesterol disorders, hypertension and obesity.

Additional information about the CMHA is available at www.CardioMetabolicHA.org.

About Cardiometabolic Disorders

Cardiometabolic disorders represent a cluster of interrelated risk factors — primarily high blood pressure, elevated fasting blood sugar, dyslipidemia, abdominal obesity (waist circumference), and elevated triglycerides — that together can progress to the development of atherosclerotic cardiovascular disease and type 2 diabetes. Reducing cardiometabolic risk factors through early assessment and targeted interventions is critical to prevent progression. In view of an expected increase in cardiovascular disease and diabetes, early identification of cardiometabolic risk factors and aggressive treatment of lifestyle modifications are urgently needed.

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