

CALCIUM SCORING

A simple test can save your life.

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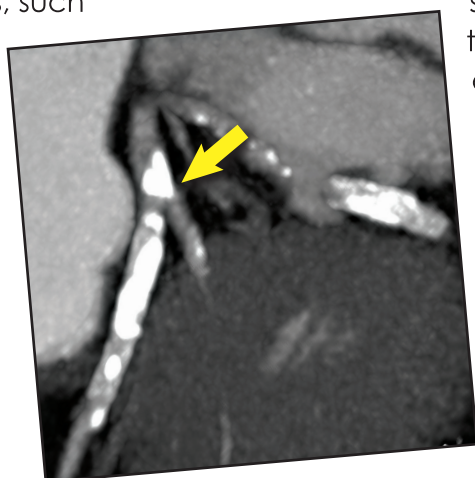
As you may recall, Tim Russert, a high profile journalist, died suddenly of a heart attack at the young age of 58. Russert was known to have coronary artery disease but was not having any symptoms, such as chest pain or shortness of breath, in the weeks prior to his death. In late April, he had a normal stress test. Russert was being treated with medications for high blood pressure and high cholesterol.

He apparently was on an exercise program and was trying to lose weight. He had a calcium scan in 1998, which revealed a calcium score of 210, which meant at that time he was at moderate risk for a future heart attack. His score in 1998 probably caused his doctors to prescribe medications and lifestyle changes, such as diet and exercise. The questions being asked are: Did the treatments not work? Could his death have been prevented? What can we learn from Tim and his death?

Heart Disease is an extremely complex disease. There have been numerous advances in the screening and treatment of coronary artery disease since 1998. The advent and advances of the multi-slice computed tomography scanner is literally changing the face of medicine.

What exactly is a heart scan? A coronary calcium scan, often just called a heart scan, produces pictures of the inside of the arteries of your heart. It is a non-invasive test, meaning

it does not require the insertion of needles or any penetration of the skin nor is any sedation necessary. It is quick and painless. The heart scan can



show if there is any calcified plaque in the coronary arteries. Plaque is a build-up of fatty deposits

which hardens, thus the common phrase, hardening of the arteries. This build-up can occur over time causing narrowing of the arteries and restriction of the blood flow to the heart. This often results in chest pain or discomfort and may lead to a heart attack.

Should you consider a heart scan? The goal of calcium scanning is to detect Coronary Artery Disease (CAD) at an early stage so that treatments to control the progression of the disease can be implemented. People with major risk factors for CAD should consider having a heart scan. The major risk factors are: a family history of heart disease,

high cholesterol, diabetes, high blood pressure, cigarette smoking, being physically inactive and being overweight. Doesn't this just about include everyone? The American Heart Association indicates that heart scans may be helpful to individuals at intermediate risk of coronary heart disease. In addition to the above recommendations. The Society for Cardiac Computed Tomography now suggests that a calcium score should be repeated every few years in intermediate to high risk patients to help gauge how effective the treatments being utilized are in that particular patient.



Tim Russert's chair is now empty on his TV show, "Meet the Press". Will your chair be empty at your family's table this Thanksgiving or Christmas? Let us

all pledge to do more to prevent deaths from heart disease!

The Heart and Vascular Center at the Medical Center of South Arkansas uses the latest

state of the art "light speed" 64

Slice Computed Tomography scanner to evaluate appropriate patients and have experts in diagnosing and treating heart disease on staff. If you have any questions please contact your family doctor or the Heart and Vascular Institute at Medical Center of South Arkansas.

