



AMIS Plus Newsletter Nr. 24 – December 2007

Dear Current & Potential AMIS Plus Participants & Sponsors

It's the end of another year and we would like to cordially thank all of you who have played a part in the maintenance and further development of AMIS Plus.

A warm welcome to the hospitals of **Nyon, Morges and La Chaux-de-Fonds** who will soon join AMIS Plus!

• New universal definition of myocardial infarction

The task force jointly sponsored by the European Society of Cardiology, American College of Cardiology, American Heart Association and the World Heart Foundation has published an "expert consensus document" concerning redefining and expanding on the definition of myocardial infarction. The key for the new diagnosis of myocardial infarction is an elevation in levels of troponin or other biomarkers exceeding the 99th percentile of the upper reference limit, combined with the clinical syndrome, ECG signs, or imaging evidence of new myocardial ischemia. This report appeared in October in EHJ, Volume 28, Issue 20 and on November 27, 2007 in JACC. The change in the definition of myocardial infarction will have a substantial impact on the identification, prevention, and treatment of cardiovascular disease.

The AMIS Plus Steering Committee is working on introducing this new definition and will keep you informed. Concrete recommendations will be provided in the next newsletter. The diagnosis is being recalculated. As the key definition of MI is based on troponin T, we ask you to take particular care when measuring and reporting this biomarker.

• AMIS Plus Highlights box



Health care partners are confronted with a duty to deliver optimal care, in an environment with increasing cost constraints and a growing impact of evidence based medicine. In the Swiss hospitals, RCT's and guidelines have a profound impact on discharge medication after an ACS. This is apparent for "mature" drug regimens (i.e. moderate increase for aspirin and beta blockers) but is most marked for successful new treatments (i.e. statins and thienopyridines). The number of patients not given reperfusion therapy is decreasing and PCI is now the most frequently used mode of therapy. These trends can only be assessed by registries.

In abstract book: First meeting of the European Society of Cardiology, Working Group on Acute Cardiac Care: Acute Cardiac Care 2004 Rome, October 17-20, 2004, p57.

Best Abstract Award for Excellence in Scientific Research

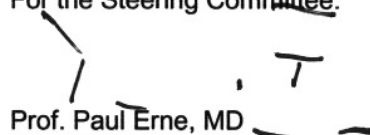
• New AMIS Plus publication

Please find attached the newest AMIS plus manuscript "*Gender differences in management and outcomes in patients with acute coronary syndromes: results on 20 290 patients from the AMIS Plus Registry*" published in Heart 2007;93:1369-1375.

The Steering Committee and the Data Center Team wish you all a Merry Christmas and a Happy New Year!

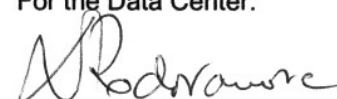
Sincerely yours

For the Steering Committee:



Prof. Paul Erne, MD
President

For the Data Center:



Dragana Radovanovic, MD
Head of the Data Center