

Subject: Good news

June 20, 2015

Gilead Lancaster, MD, FACC (glancast@optonline.net)

Dear BOG,

It is rare to have a 'good news' story in the press these days, so I thought this may be worth sharing with the BOG. In case you do not get the New York Times or you have not had a chance to read it, there is a nice article about lowering mortality rates from MIs through D2B and other initiatives. [Here is the link](http://www.nytimes.com/2015/06/21/health/saving-heart-attack-victims-stat.html?hp&action=click&pgtype=Homepage&module=second-column-region®ion=top-news&WT.nav=top-news&_r=0)- or you can click on the url below.

http://www.nytimes.com/2015/06/21/health/saving-heart-attack-victims-stat.html?hp&action=click&pgtype=Homepage&module=second-column-region®ion=top-news&WT.nav=top-news&_r=0

The only issue I have is that the headline seems to give hospitals most of the credit, while ignoring the cardiologists, ER doctors, nurses, cath lab personnel, paramedics and emergency medical technicians that not only developed and improved guidelines to reduce the time it takes to get treatment but also worked all hours of the day and night to implement them.

Enjoy the weekend and happy Father's Day!

Gil

June 20, 2015

C. Michael Valentine, MD, FACC (cmichaelvalentine@msn.com)

John Brush helped with much of the interview, and was quite disappointed that they omitted many of those that came together to make this happen...especially ACC and the BOG, which made it all possible in an amazingly short time span....thanks to John and Harlan for making it happen...MV

June 20, 2015

Matthew Phillips, MD, FACC (mattphillips1@me.com)

Great article. The comments are really an interesting read. Thanks for posting. Much better than the usual doctors are trolls headline

Happy Father's Day to all.

June 20, 2015

Robert Shor, MD, FACC (rshor@tcg.md)

Agree. This is a testament to what we can achieve when we work together on meaningful projects. Kudos to all--Mike Valentine was a driver of this as well. I look forward to more BOG projects. Have a great weekend and enjoy your family--take time to smell the roses.

Another wonderful article about advances in management of cv disease. A great example of science/technology, medicine and collaboration. This NY Times article on TAVR was forwarded to be by Michael Mack. We all make a difference in the lives of our patients!

Have a great rest of the weekend.

Bob

https://urldefense.proofpoint.com/v2/url?u=http-3A_www.nytimes.com_2015_06_22_health_heart-2Dfailure-2Daortic-2Dvalve-2Ddisease-2Dtavr.html-3F-5Fr-3D0&d=AwMFaQ&c=qhent5IL-8Lans1hhN7NTGhSd0GBLfQfwUvzHj1D5tQ&r=VnVSV8v13jigj7iQKr4j0gaqswwpbtLGqUwMk2m36iQ&m=cEZGj_nvcu410-63YSnrnc1tcFq6frACBt8naxtpCOM&s=fg3Ca--ZsaighcdvrunnhTQsX0r47vcgJMyY6YBgDsU&e=

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B. Hadley Wilson, MD, FACC (Hadley.wilson@carolinashealthcare.org)

A great article for the ACC, the D2B project and cardiologists throughout the country engaged in STEMI care. Many thanks to Harlan Krumholz, John Brush and countless others involved with organizing STEMI systems of care throughout this country. And it's only going to get better as we reduce total ischemia time through improved systems of care like the recently reported STEMI Accelerator program in 16 US metropolitan regions covering nearly 30,000,000 lives and 10% of the population. As Eric's colleagues at Duke-- Jamie Jollis and Chris Granger have said, door to balloon time has mostly been solved throughout the U.S. The next goal is to reduce total ischemia time through major networks of organized STEMI care, and indeed be able to reduce mortality and heart disease as the number one killer.

June 21, 2015

Ken Kutscher, MD, FACC (kenaustinjr@yahoo.com)

I think the next goal will be setting up acute stroke centers for direct clot retrieval. Do we as cardiologists take the lead or let neuroradiologists or surgeons take over. We have the expertise and structure already.