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Clinton Heart Disease Reveals Misconceptions about Testing
*Colorado Heart & Body Imaging says "Clinton Syndrome" reveals limitations
of stress tests and promise of EBT heart scans*

DENVER – Sudden, severe cardiac disease or death among apparently healthy entertainers, government officials and highly trained athletes predictably leaves the public feeling vulnerable to the nation's top medical killer, coronary heart disease.

Dr. James Ehrlich, medical director of Colorado Heart & Body Imaging in Denver, said many of the nation's leading cardiac imaging experts are now examining the lessons learned from former President Bill Clinton's recent heart problems.

"Widespread managed care indifference and non-coverage of extensively validated preventive procedures continues to contribute to the typical (late) initial signs of heart disease among most U.S. citizens—sudden death or an irreversible heart attack," said Ehrlich. "In the matter of Mr. Clinton, questions have arisen regarding his cholesterol management and compliance with lipid-lowering medications, the failure of stress testing to detect coronary disease and the astounding fact that his initial symptom was severe and life-threatening, requiring immediate bypass surgery."

Emerging from the "Clinton Syndrome" is an alarming pattern of physician and media misconception about the roles and limitations of various tests to diagnose cardiac disease. Sadly, according to Ehrlich and other prominent physicians, the public's interest in prevention and early detection technology is being met with a prevalent dismissive attitude from some cardiologists who have little experience in coronary prevention.

Many physicians wonder why an accurate early detection imaging procedure (electron beam tomography or EBT) was not made available to Clinton years ago.

- more -

Clinton Heart Disease Reveals Misconceptions about Testing

Page 2

Dr. Harvey Hecht, Director of Preventive Cardiology at NY's Beth Israel Hospital, asserted, "There is no doubt that President Clinton would have been identified as high risk 10 years ago—if he had undergone calcium scanning—and the odds are great that bypass surgery could have been avoided."

Dr. Jeffrey Boone, a consultant in preventive cardiology at Colorado Heart & Body Imaging in Denver put it this way: "Clinton's medical team could have known long ago of the presence of his atherosclerotic plaque, determined its causation and easily stabilized the plaque with targeted medications. The EBT heart scan is now available for all for a fairly modest price and should have been part of the Presidential physical exam for at least the past decade!"

Stress tests cannot detect early disease, so few cardiologists are surprised that Clinton passed treadmill examinations over the years. As stated by Cedar-Sinai's Dr. Daniel Berman, a leading nuclear stress testing expert, "There are noninvasive tests that can effectively define the presence of coronary artery disease even before a blockage has occurred, such as EBT that detects plaque in the coronary artery wall. In a recent article in the Journal of the American College of Cardiology, we found that 56 percent of patients who had normal SPECT scans (an accurate nuclear stress test) had a coronary calcium scan that revealed enough disease to be predictive of high long-term risk for heart attack or death. We can thereby identify patients early for aggressive therapy with diet, exercise, and medications."

Office-based estimation of coronary risk is being increasingly challenged. Ohio State Clinical Professor John Rumberger stated, "whereas Framingham models and other formulas work generally well for large populations, physicians need to identify individual risk to either offer reassurance or to apply effective targeted strategies to prevent coronary disease. EBT imaging is an ideal starting point so we can precisely quantify risk."

- more -

Clinton Heart Disease Reveals Misconceptions about Testing

Page 3

The results of coronary calcium scanning hold the additional promise of improved patient compliance with recommended lifestyle modification and medications...an issue for millions, including Clinton, who was not convinced of the long-term value of such therapy.

Compelling research from a group led by UCLA cardiologist Matthew Budoff prompted this statement: “Undergoing EBT calcium scanning has been demonstrated to dramatically improve compliance with lifestyle (diet and exercise), as well as with cholesterol lowering drugs. In a study of over 1000 patients followed for 3.6 years, patients with high calcium scores (>75th percentile) were 9 times more likely to continue their therapy.”

On a positive note, Ehrlich said the Clinton situation has rekindled overall interest in noninvasive preventive coronary imaging to assist in the early identification of true ‘high-risk’ individuals years or decades before conventional cardiac testing will be abnormal.

“Media reports (e.g., NBC’s Robert Bazell) stating that CT is ‘unreliable’ and involves ‘huge’ radiation doses are simply irresponsible. EBT coronary imaging is highly accurate and exposes patients to only a modest fraction of background annual radiation exposure.”

Plaque imaging experts anticipate that the upcoming American Heart Association statement will result in greater reimbursement and physician understanding of coronary imaging.

About Colorado Heart & Body Imaging

Founded in 1997, Colorado Heart & Body Imaging operates two world-class, comprehensive, preventive screening centers in Denver, Colo. at 2490 West 26th Avenue #110-A and 201 Columbine Street in Cherry Creek North. The centers offer lung, heart, colon, total body and bone density imaging for early detection of coronary disease and cancer as well as non-imaging based services and consultation. CHBI uses FDA-approved electron beam tomography (EBT), with its extraordinarily fast acquisition speeds. Unlike slower and higher radiation helical (spiral) mechanical equipment, EBT’s usefulness for coronary imaging and cardiac risk assessment has been validated extensively in cardiology literature. Formal cardiology relationships have been developed with Aurora-Denver Cardiology. Colorado Imaging Associates continues its professional radiologic services for the centers. For more information, contact Colorado Heart & Body Imaging at 303.433.8800 or visit www.coloradoheart.com.

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