

June 2010



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Most Consumers Willing to Share Personal Data

Privacy and safety must be respected, however

Consumers are generally willing to share information from their personal health records so long as they have the power to select the conditions, according to a study published in the June issue of the *Journal of Medical Internet Research*.

Access to personal health records could benefit public health research greatly in part by fostering improved understanding of health outcomes, barriers to care and adherence, follow-up, and follow-through. The recently established Health Information Technology for Economic and Clinical Health (HITECH) Act has as its goal harnessing digital technology to “prevent and treat illnesses and to improve health” and to aid in the collection and analysis of health information. However, little was known about individuals’ attitudes toward sharing. The

authors of the current study thus surveyed a group of people in an urban area of the northeastern United States.

Using self-report survey, qualitative questionnaire, semi-structured focus group, and one-on-one interview, the authors asked 181 early adopters of a personally controlled health record about their willingness and interest

Participants used the health record and also sat in on a demonstration session in which they interacted with a live system that was not populated with their own data.

in sharing personal information. Participants used the health record and also sat in on a demonstration session in which they interacted with a live system that was not populated with their own data. There were three subject groups: an employee and student

population, a community-based health maintenance organization population, and a retiree and health advocacy mailing list population. Most participants reported their health as good to excellent, high levels of educa-

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tion, moderately high levels of income, female gender, and white race.

Analyses revealed high levels of willingness to share personal health information for disease monitoring, evaluation, and needs assessment, but also a strong concern for privacy and safety issues. Ninety percent of subjects reported that strict anonymity would increase the likelihood that they would share; 71 percent said guaranteeing privacy but not anonymity would encourage them to share; and 79 percent said a way to view who accessed their information would increase their willingness. Restricting the use of their information to health research and to trusted intermediaries were also expressed as im-

portant prerequisites to sharing. Greater preference for an “opt-in” versus “opt-out” default mode was observed.

The authors concluded that more research in diverse populations is necessary, but that “allowing users to select their preferred conditions for sharing may be vital to supporting sharing and fostering trust as may be safety monitoring mechanisms.”

Source: Weitzman ER, Kaci L, Mandl KD. 2010. Sharing medical data for health research: the early personal health record experience. *Journal of Medical Internet Research* 12(2):e14.

Fibrates Decrease Rate of Coronary Events

Patients at high risk for cardiovascular events and those with combined dyslipidemia may benefit

Fibrates can reduce the risk of major cardiovascular events predominantly by prevention of coronary events, according to the results of a study published recently on *The Lancet* website.

Research in the past few decades has clarified the role lipids play in cardiovascular disease, say the authors. Pharmacotherapy targeting LDL cholesterol has shown to be an effective intervention with statins substantially reducing the risks of coronary heart disease, stroke, and mortality. However, a high residual risk of coronary and other cardiovascular events persists, drawing attention to the need for additional effective preventive therapies. Fibrates, agonists of the peroxisome proliferator receptors selective for the alpha receptors, have been studied for more than 40 years. Although fibrates have been shown to increase HDL cholesterol and decrease

triglyceride concentrations, their effects on vascular disease were unclear. The authors thus undertook this systematic review and meta-analysis to investigate the effects of fibrates on major clinical outcomes.

The researchers systematically searched Medline, Embase, and the Cochrane Library for trials published between 1950 and March 2010, including prospective randomized controlled trials assessing the effects of fibrates on cardiovascular outcomes compared with placebo. The search yielded 18 trials with a total of 45,058 participants, including 2,870 major cardiovascular events, 4,552 coronary events, and 3,880 deaths. Fibrate therapy produced a 10 percent relative risk reduction for major cardiovascular events and a 13 percent relative risk reduction for coronary events. The authors found no benefit regarding stroke, all-cause

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mortality, cardiovascular mortality, sudden death, or non-vascular mortality, however.

The authors conclude that “fibrate therapy reduces the risk of cardiovascular disease by preventing coronary events. The magnitude of the effect is moderate, but in high-risk individuals and in those with combined dislipidæmia, clinically meaningful reductions in risk could be achieved. With modern

fibrates being safe and well tolerated, these agents seem to have a role in cardiac protection.”

Source: Jun M, Foote C, Lv J, et al. 2010. Effects of fibrates on cardiovascular outcomes: a systematic review and meta-analysis. Published on May 11, 2010 on *The Lancet* website.

Hot Topic Highlights

Cardiology Domain recently posted the following Hot Topics to your website:

High BMI Associated with Atrial Fibrillation in Women

A study published in the *Journal of the American College of Cardiology* found that elevated body mass index (BMI, a measure of body composition) was associated with short- and long-term increase in the risk for developing a heart rhythm disorder called atrial fibrillation (AF). The study of 34,309 women found that overweight women were 22 percent more likely to develop AF and obese women were 65 percent more likely to develop AF.

Source:

Tedrow UB, Conen D, Ridker PM, et al. 2010. The long- and short-term impact of elevated body mass index on the risk of new atrial fibrillation. *Journal of the American College of Cardiology* 55(21):2319-2327.

Nuts May Be the Key to Lowering Cholesterol

In a study published in the *Archives of Internal Medicine*, researchers found that eating more nuts can help to improve your cholesterol. Researchers analyzed 25 studies totaling 583 men and women with normal and high cholesterol levels who were not taking cholesterol-lowering medications. They found that consuming an average of 2.4 ounces of nuts per day reduced total cholesterol by 5.1 percent; lowered LDL cholesterol levels

by 7.4 percent; improved the LDL-to-HDL cholesterol ratio by 8.3 percent; and decreased levels of another lipid called triglycerides by 10.2 percent among participants with high levels (150 milligrams per deciliter or more).

Source:

Sabaté J, Oda K, Ros E. 2010. Nut consumption and blood lipid levels. *Archives of Internal Medicine* 170(9):821-827.

Smoking Causes Arteries To Age Faster

The results from a study published recently in the *Journal of the American College of Cardiology* found that the arteries of smokers age twice as fast as non-smokers. The study of 2,054 people found that artery stiffening was almost double for heavy smokers compared to non-smokers, even when the researchers accounted for other cardiovascular disease risk factors, such as age, blood pressure, and cholesterol levels.

Source:

Tomiyama H, Hashimoto H, Tanaka H, et al. 2010. Continuous smoking and progression of arterial stiffening: a prospective study. *Journal of the American College of Cardiology* 55(18):1979-1987.