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**Antibacterial Envelope to Prevent Cardiac Implantable Device Infection.**
[Adjunctive use of an antibacterial envelope resulted in a significantly lower incidence of major CIED infections than standard-of-care infection-prevention strategies alone, without a higher incidence of complications.]
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**Anticoagulation therapy in heart failure and sinus rhythm: a systematic review and meta-analysis.**
[Our meta-analysis provides evidence to oppose the hypothesis that thrombosis or embolism plays an important role in the morbidity and mortality associated with HFrEF, with the exception of stroke-related morbidity.]
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**Antithrombotic Therapy after Acute Coronary Syndrome or PCI in Atrial Fibrillation.**
[In patients with atrial fibrillation and a recent acute coronary syndrome or PCI treated with a P2Y12 inhibitor, an antithrombotic regimen that included apixaban, without aspirin, resulted in less bleeding and fewer hospitalizations without significant differences in the incidence of ischemic events than regimens that included a vitamin K antagonist, aspirin, or both.]
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**Coronary Angiography after Cardiac Arrest without ST-Segment Elevation.**
[Among patients who had been successfully resuscitated after out-of-hospital cardiac arrest and had no signs of STEMI, a strategy of immediate angiography was not found to be better than a strategy of delayed angiography with respect to overall survival at 90 days.]
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**Cost-effectiveness of cardiac rehabilitation: a systematic review.**
Shields GE. *Heart* 2018;104(17):1403-1410.
[This systematic review of studies evaluates the cost-effectiveness of CR in the modern era, providing a fresh evidence base for policy-makers. Evidence suggests that CR is cost-effective, especially with exercise as a component. However, research is needed to determine...*
the most cost-effective design of CR.]

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**Does digoxin cause more harm than good?**

[Digoxin has shown positive outcomes for reducing hospital admissions for patients with heart failure and/or atrial fibrillation. However, clinicians should be aware of the narrow therapeutic index, which results in a high incidence of digoxin toxicity. The adverse effects of digoxin use should be considered during prehospital assessment, inclusive of pro-arrhythmic and thromboembolic complications. Whether digoxin may result in harm depends on a number of factors.]

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**Early or Delayed Cardioversion in Recent-Onset Atrial Fibrillation.**
Pluymaekers NAHA. *New England Journal of Medicine* 2019;:

[In patients presenting to the emergency department with recent-onset, symptomatic atrial fibrillation, a wait-and-see approach was noninferior to early cardioversion in achieving a return to sinus rhythm at 4 weeks.]

**Interventions to support return to work for people with coronary heart disease.**
Hegewald J. *Cochrane Database of Systematic Reviews* 2019;3:CD010748.

[People with coronary heart disease (CHD) often require prolonged absences from work to convalesce after acute disease events like myocardial infarctions (MI) or revascularisation procedures such as coronary artery bypass grafting (CABG) or percutaneous coronary intervention (PCI). Reduced functional capacity and anxiety due to CHD may further delay or prevent return to work.]

**Light smoking confers up to half the amount of the cardiovascular risk associated with smoking a pack of cigarettes a day.**
Huxley R R. *Evidence-Based Medicine* 2019;24(2):77.

[In a nutshell, the difference between heavy and light smokers, in terms of vascular risk, is much smaller than previously recognised, with the risk of having a coronary event or stroke increasing within virtually the first few puffs of a cigarette.]

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**Mediterranean-style diet for the primary and secondary prevention of cardiovascular disease.**
Rees K. *Cochrane Database of Systematic Reviews* 2019;3:CD009825.

[The Seven Countries study in the 1960s showed that populations in the Mediterranean region experienced lower coronary heart disease (CHD) mortality probably as a result of different dietary patterns. Later observational studies have confirmed the benefits of adherence to a Mediterranean dietary pattern on cardiovascular disease (CVD) risk factors but clinical trial evidence is more limited.]

**Metformin prescription and aortic aneurysm: systematic review and meta-analysis.**
[According to the available epidemiological evidence, metformin prescription could limit the expansion of AAA among patients with this disease, and may be involved with a lower incidence of aortic aneurysm and aortic aneurysm events. Randomised controlled trials are needed to confirm whether metformin could reduce the enlargement of AAA in patients with or without diabetes.]

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**Primary care management of chest pain after coronary artery bypass surgery.**

**Prospective external validation of the Predicting Out-of-Office Blood Pressure (PROOF-BP) strategy for triaging ambulatory monitoring in the diagnosis and management of hypertension: observational cohort study.**
*BMJ* 2019;365:l1541.

**Stress related disorders and risk of cardiovascular disease: population based, sibling controlled cohort study.**
Song H. *BMJ* 2019;365:l1255.

**There may be a role for addition of rivaroxaban to aspirin in patients with stable coronary artery disease.**
Banerjee A. *Evidence-Based Medicine* 2019;24(2):78-79.
[There appears to be a role for addition of rivaroxaban to aspirin in patients with stable CAD, and the fact that the benefit was consistent whether myocardial infarction was recent or many years previously suggests that rivaroxaban may be useful over long periods of treatment. Rivaroxaban does not have a role as an alternative to aspirin in this context. However the absolute risk reduction was small therefore efforts may be better focused on improving adherence to existing evidence-based drugs.]

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**Venous Thromboembolism After Shoulder Arthroplasty and Arthroscopy.**
[VTE after shoulder surgery has been a topic of increasing interest over the past decade, and the purpose of this review is to examine the recent literature on pathophysiology, risk factors, incidence, diagnosis, sequelae, prevention, treatment, and current recommendations regarding VTE after shoulder surgery.]

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**Guidelines**

The following new guidance has recently been published:

**Transcatheter aortic valve implantation in patients with aortic stenosis and low surgical risk.**
UpToDate;2019.
https://www.uptodate.com/contents/choice-of-therapy-for-symptomatic-severe-aortic-
For most patients with symptomatic severe aortic stenosis who are at low surgical risk, we recommend transfemoral transcatheater aortic valve implantation (TAVI) rather than surgical aortic valve replacement (SAVR) (Grade 1B). Exceptions for which SAVR is preferred include adverse left ventricular outflow tract or aortic root anatomy.

Reports

The following report(s) may be of interest:

**One gram a day of omega-3 supplements does not reduce the risk of cancer or cardiovascular disease.**
NIHR Dissemination Centre; 2019.
https://discover.dc.nihr.ac.uk/content/signal-000752/fish-oil-supplements-do-not-cut-cancer-or-heart-disease-risk-at-one-gram-a-day

[NIHR Signal. A trial of omega-3 fatty acid supplements showed they have little or no effect on the risk of cancer or cardiovascular disease in the general population. The finding contradicts the widespread belief that these supplements at usual doses protect the heart.]

**Statins 'do not work' for half of people prescribed them, study reports.**
NHS Behind the Headlines; 2019.
https://www.nhs.uk/news/medication/statins-do-not-work-half-people-prescribed-them-study-reports/

[A new study assessed GP records for more than 160,000 patients in the UK who'd had a cholesterol check in the 2 years after they started statins. Half of patients did not have an adequate response to statins: their cholesterol levels had reduced by less than 40%. But this does not mean statins do not work. We do not have enough information about the people who did not respond to statins, such as whether they took the medicine as prescribed.]
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