

Smaller Heart Assist Devices May Help Women

BY DAMIAN McNAMARA
Miami Bureau

BOCA RATON, FLA. — A new and smaller left ventricular assist device now in clinical trials is appropriate for most women and provides similar outcomes, compared with a larger device already used for patients with heart failure, according to a poster presentation at the annual meeting of the Heart Failure Society of America.

The large size of the original HeartMate XVE Left Ventricular Assist System (Thoratec Corp., Pleasanton, Calif.), which is currently approved as a bridge-to-transplant as well as a destination therapy, precluded its use in many women, Dr. Leway Chen said. Only about 9%-16% of women with heart failure received a HeartMate XVE in published studies, according to Dr. Chen, director of the heart failure and transplantation program at Strong Memorial Hospital, University of Rochester (N.Y.). Dr.

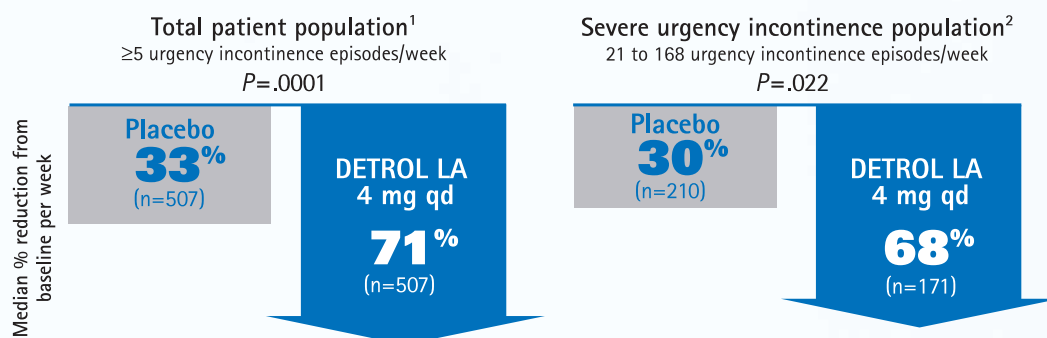
Chen also is an investigator for Thoratec.

In this study, Dr. Chen and his associates assessed 34 patients—including 15 women—with advanced New York Heart Association class IV heart failure at 10 medical centers. All received the HeartMate II, a continuous-flow left ventricular assist device with one-third the mass of a typical implanted electric pulsatile device. Median age was 49 years for women and 55 years for men. There was one transient ischemic attack and one stroke in a patient who fully

recovered prior to implantation among the women; neither of these events occurred in men.

There were no device failures but minor malfunctions occurred in both groups. “The adverse event numbers are too small to make a conclusion,” he said. Six women received a transplant and five had ongoing therapy after a median of 96 days with the device. Three men received a transplant and 10 continued therapy with the device after a median of 117 days. ■

DETROL LA is the #1 prescribed brand for OAB*— with BIG REDUCTIONS in OAB symptoms^{1,2}



Van Kerrebroeck et al. *Urology*. 2001;57:414-421.¹
A 12-week, placebo-controlled Registration Study.
(See full study description on next page.)

Landis et al. *J Urol*. 2004;171:752-756.²
A post hoc analysis of the Registration Study.
(See full study description on next page.)

DETROL LA is indicated for the treatment of overactive bladder with symptoms of urge incontinence, urgency, and frequency. DETROL LA is contraindicated in patients with urinary retention, gastric retention, or uncontrolled narrow-angle glaucoma and in patients who have demonstrated hypersensitivity to the drug or its ingredients. Patients with the following conditions should be treated with caution: renal impairment, bladder outflow obstruction, gastrointestinal obstructive disorders, controlled narrow-angle glaucoma, and significantly reduced hepatic function. Dry mouth was the most frequently reported adverse event (DETROL LA 23% vs placebo 8%); others (≥4%) included headache (DETROL LA 6% vs placebo 4%), constipation (DETROL LA 6% vs placebo 4%), and abdominal pain (DETROL LA 4% vs placebo 2%).

* Source: IMS NPA, based on total US prescriptions of antimuscarinics for OAB from September 1998 to September 2005.

¹ Source: IMS Midas Global Sales Audit, Verispan longitudinal data, based on total prescriptions of DETROL and DETROL LA for OAB from April 1998 to August 2005.

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