



Dear Practitioner,

We are pleased to share with you highlights from the European Society of Cardiology (ESC) Congress 2015 held in London, United Kingdom.

The featured article provides a topline summary of the 5 new guidelines released by the ESC during the Congress. These guidelines cover pericardial diseases, ventricular arrhythmias and sudden cardiac death, pulmonary hypertension, infective endocarditis, and non-ST segment elevation acute coronary syndromes (ACS).

Several presentations on the optimal patient populations and duration for dual antiplatelet therapy (DAPT) were featured at the congress, including a meta-analysis of 6 trials that demonstrated that DAPT continued for more than 1 year among stabilized high-risk patients with previous myocardial infarction (MI), decreased the composite risk of cardiovascular (CV) death, MI, or stroke, as well as stroke and cardiovascular death alone. There was an increased risk of major bleeding in the DAPT group, but there was no significant difference in fatal bleeding or intracranial hemorrhage between the 2 groups. A new analysis of the DAPT Study revealed that cancer-related death accounted for the majority of the difference in mortality, suggesting that fatal bleeding is rare with extended DAPT and may be avoided with careful patient selection.

Several other late-breaking trials are featured in this issue, including 2 new analyses of the IMPROVE-IT study. A pre-specified subgroup analysis showed that the cholesterol-lowering drug ezetimibe, when added to simvastatin, provides greater improvement in CV outcomes among patients with diabetes compared with those without diabetes in a population with ACS. The second analysis concluded that the rate of new-onset diabetes was not increased among patients treated with ezetimibe.

In addition to the results of the top late-breaking clinical trials, you will also find information on selected areas of cardiovascular medicine including atrial fibrillation, interventional cardiology, and the clinical challenges associated with the use of anticoagulants.

We hope that you find the articles and practical perspectives that are contained in the pages of this issue of *ESC Congress 2015 in Review* helpful in integrating this new information into your clinical practice. For more information, please visit [mdce.sagepub.com](http://mdce.sagepub.com).

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