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Rutgers researchers aim to set blood transfusion standards for heart attack patients

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A Rutgers physician who has championed the movement to use less blood in transfusions has been awarded more than \$16.1 million by the National Institutes of Health National Heart, Lung, and Blood Institute (NHLBI) to lead a nation-wide clinical trial to evaluate whether a restrictive or a liberal blood transfusion is most beneficial to patients who have had a heart attack. Jeffrey L. Carson, MD, the Richard C. Reynolds Professor of Medicine at Rutgers Robert Wood Johnson Medical School and provost at Rutgers Biomedical Health Sciences in New Brunswick, is aiming to establish evidence that can be used to set transfusion standards for patients who have had a heart attack, to improve their survival rates and reduce the risk of recurrence.

"Outcomes appear to be different for patients who have been treated with a transfusion following a heart attack or significant coronary event," said Dr. Carson, an internist. "It's important to establish evidence-based standards to improve patient safety and survival rates."

Preliminary evidence from several small studies, including a pilot study overseen by Carson, have shown that patients who have had a heart attack and have anemia, which restricts the body's ability to carry oxygen, may have an increased risk of mortality with a restrictive transfusion approach.

Carson will oversee the Myocardial Ischemia and Transfusion (MINT) clinical trial that will be conducted in up to 80 centers in the United States and Canada. The trial will include 3,500 patients who will be randomly allocated to be treated either according to a liberal or restrictive transfusion strategy. The study will evaluate the differences in outcomes between the two transfusion approaches. Patients who qualify will be recommended for the trial by participating physicians.

Carson, who is the study chair and principal investigator, clinical coordinating center, will work with Maria Mori Brooks, PhD, professor and vice chair of education, epidemiology; co-director, Epidemiology Data Center and professor, biostatistics at the University of Pittsburgh Graduate School of Public Health, who is the principal investigator of the data coordinating center for the study.

A steering committee will assist Carson, comprised of authorities from participating clinical sites, among them are Centre Hospitalier de l'Universite de Montreal, Duke Clinical Research Institute, Saint Louis University, University of Pittsburgh Medical Center, Rhode Island Hospital, Westchester Medical Center, Ottawa Hospital Research Institute, and University of Toronto Medical School, among the participating clinical sites.

For more than a decade, Carson has researched blood transfusion strategies. Transfusions are a common medical procedure to supplement blood or parts of blood that is lost due to disease, injury or surgery. Carson's work focuses on transfusions to correct low levels of hemoglobin which utilizes red blood cells to carry oxygen throughout the body. He found through analysis of multiple studies that a restrictive transfusion threshold, meaning that patients receive a transfusion when their hemoglobin concentration is lower than 8 g/dL rather than the standard, liberal threshold of 10 g/dL, is safe for most patients. His work led to the creation of national guidelines that recommend a restrictive transfusion strategy for most patients.

Source:

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