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Gender Differences in Acute Coronary Syndromes Care and Outcomes

(60 minutes)

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UP TO 1 AMA PRA CATEGORY 1 CREDIT™

This activity is designed for cardiologists, emergency medicine physicians, primary care physicians, and other healthcare professionals interested in the treatment of acute coronary syndromes.



Gender plays an important role in a patient's risk of developing disease, as well as in the complications that are most likely to occur. Data also show that gender may affect what treatment options are most appropriate. While men with acute coronary syndromes (ACS) appear to benefit from early treatment using invasive options, women often do not. Current American College of Cardiology/American Heart Association guidelines for unstable angina/non-ST-segment elevation myocardial infarction (UA/NSTEMI) recommend a conservative strategy for women with low-risk features. They also stress the use of risk stratification as an integral prerequisite to decision making, not only in the intensive initial assessment of patients but also during continuous clinical assessment. In this video program, Dr. Christopher Cannon addresses the treatment of women with ACS, specifically with regard to early risk stratification and assessment, the role of cardiac biomarkers, and the efficacy and safety of GP IIb/IIIa inhibitor therapy.

LEARNING OBJECTIVES

After taking part in this CME activity, participants should be better able to:

- Select an initial treatment strategy (invasive vs conservative) for women with non-ST-segment elevation myocardial infarction based on current ACC/AHA guideline recommendations and results of recent clinical trials
- Describe the clinical outcomes of acute coronary syndromes (ACS) in women compared with men
- Acknowledge differences in the quality of care provided to men versus women with ACS
- Take steps to ensure that the same level of care is provided to male and female patients with ACS

CME CREDIT DESIGNATIONS

ACCME The Network for Continuing Medical Education (NCME) is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

AMA NCME designates this educational activity for a maximum of 1 *AMA PRA Category 1 Credit™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.

AAFP Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending.

AOA This activity is eligible for up to 1.0 hour of credit in Category 2-A of the American Osteopathic Association.

SUGGESTED RESOURCES

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- Wang TJ, Larson MG, Levy D, et al. Impact of age and sex on plasma natriuretic peptide levels in healthy adults. *Am J Cardiol*. 2002;90(3):254-258.
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