Italian study finds high consumption of vegetables had the greatest impact on survival, followed by oily fish intake

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ne advantage of staging the world's biggest cardiology conference in Rome is that you are surrounded by the Mediterranean diet. It's so easy to eat more than the recommended daily portions of fruit and vegetables. Olive oil lubricates many dishes here in Italy, while oily fish features prominently on menus.

For those of us with existing cardiovascular disease there was some really good news in research presented at this year's European Society of Cardiology (ESC) conference. A study tracked the food intake of 1,200 Italians with heart disease who live in the Molise region and tracked their death rates over a seven-year period. Adherence to the Mediterranean die was assessed under a nine-point scoring system.

Presenting his team's results, Prof Giovanni de Gaetano, head of the Department of Epidemiology and Prevention at the IRCCS Neuromed Institute, said: "We found that among those with a higher adherence to the Mediterranean diet, death from any cause was reduced by 37 per cent in comparison to those who poorly adhered to this dietary regime."

High consumption of vegetables had the greatest impact on survival, followed by oily fish intake, amount of fruit eaten and consumption of mono-unsaturated fat – the type found in olive oil.

Until now research has focused on the benefits of the Mediterranean diet on healthy people, while preventive cardiology research has tended to focus on the benefits of treatment aimed at lowering blood pressure and reducing cholesterol.

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A previous study of 92 trials involving 200,000 patients found that people with heart disease were 18 per cent less likely to die early if they took statins. This emphasises the magnitude of the potential benefit of the Mediterranean diet for people who have survived a previous heart attack or stroke. And the benefits also apply to those who have undergone cardiac stenting or coronary artery bypass surgery.

There is one caveat however. While the study is well designed it is an observational piece of research; this means it cannot prove causation but rather emphasises the association between strict adherence to a southern European diet and longer survival in those with pre-existing cardiac disease. However experts consider it likely the dietary benefits are due to the anti-inflammatory effects of the fruit, vegetables, olive oil and nuts.

The ESC congress also heralded the end of the road for one of medicine's oldest drugs. Warfarin was introduced in 1948 as a poison against rats and mice. In the early 1950s, warfarin was found to be effective and relatively safe for preventing thrombosis (clots) in humans and received regulatory approval as a medication in 1954.

One of the biggest risk factors for developing a stroke is a heart rhythm abnormality called atrial fibrillation. In this condition, clots are flicked off by the heart to the brain. For years, the standard treatment for these patients was the drug warfarin which significantly reduces the risk of a stroke. But warfarin, the blood-thinning drug used to break up clots, is notoriously fickle drug.

A person who slowly metabolises warfarin could quickly develop dangerous blood levels of the drug, causing severe bleeding. Because of this, it is standard practice to check the blood's clotting ability on a regular basis in patients taking i

New guidelines for the treatment of atrial fibrillation announced by the ESC in Rome recommend the first line use of a newer class of drug – the non vitamin K oral anticoagulants (NOACs) – in people whose stroke risk score is elevated. The recommendation is based on a solid body of evidence that NOACs have a better safety profile than warfarin.

Patients who undergo an electrical correction of atrial fibrillation (cardioversion) and who require anticoagulants in advance may benefit from taking the NOAC edoxaban, according to new research presented at the congress. Edoxaban and its sister drugs dabigatran, rivaroxaban and apixaban are now set to largely replace the venerable warfarin in doctors anti-stroke armamentarium.

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