

Broadcast interrupted, bypass completed

How Ross Durant's surgery led to a new understanding of heart disease and diabetes

By David Israelson

THEY HAD TO INTERRUPT THE BROADCAST Ross Durant was recording at the midtown Toronto church where he volunteers, and now he considers himself the luckiest man alive.

"I was having a heart attack. The two co-broadcasters knew exactly what was going on. They got me into a chair, gave me some aspirin, dialed 911 and lo and behold, I was on my way to Toronto General Hospital," says Mr. Durant, now 83.

It was October 21, 2012, when Mr. Durant was admitted to the Peter Munk Cardiac Centre (PMCC). "They said if it was a heart attack, I would be their guest," he says.

What makes Mr. Durant consider himself so lucky is that one of the key physicians attending to him at the PMCC was Dr. Michael Farkouh, a cardiologist whose expertise would turn out to have particular bearing on this case. In addition to having a heart attack, Mr. Durant is diabetic.

Dr. Farkouh is Chair of the PMCC's Centre of Excellence in Multinational Clinical Trials.

He says these types of trials are a massive undertaking, requiring co-ordination among centres around the world, choosing and deploying staff, navigating the funding and grant applications, as well as gathering and analyzing the results.

He and his colleagues had recently completed a large international study of how to best

treat patients with multivessel coronary disease, and how heart patients who are also diabetic respond to different types of treatment – bypass surgery or insertion of stents into blood vessels.

"Our study took place in more than 100 centres, in 19 countries. It demonstrated that bypass surgery was superior in preventing future heart attacks and saving lives than using stents," Dr. Farkouh says. The clinical trial cost US\$25-million.

"We have multiple pathways for funding, and we need all of them." The average clinical trial

costs between \$10-million and \$30-million. The PMCC is part of a network of 10 major trial centres; studies can range from samples as small as 20 patients to as large as 20,000 around the world.

Apparently, Mr. Durant was an ideal case for demonstrating Dr. Farkouh's study findings.

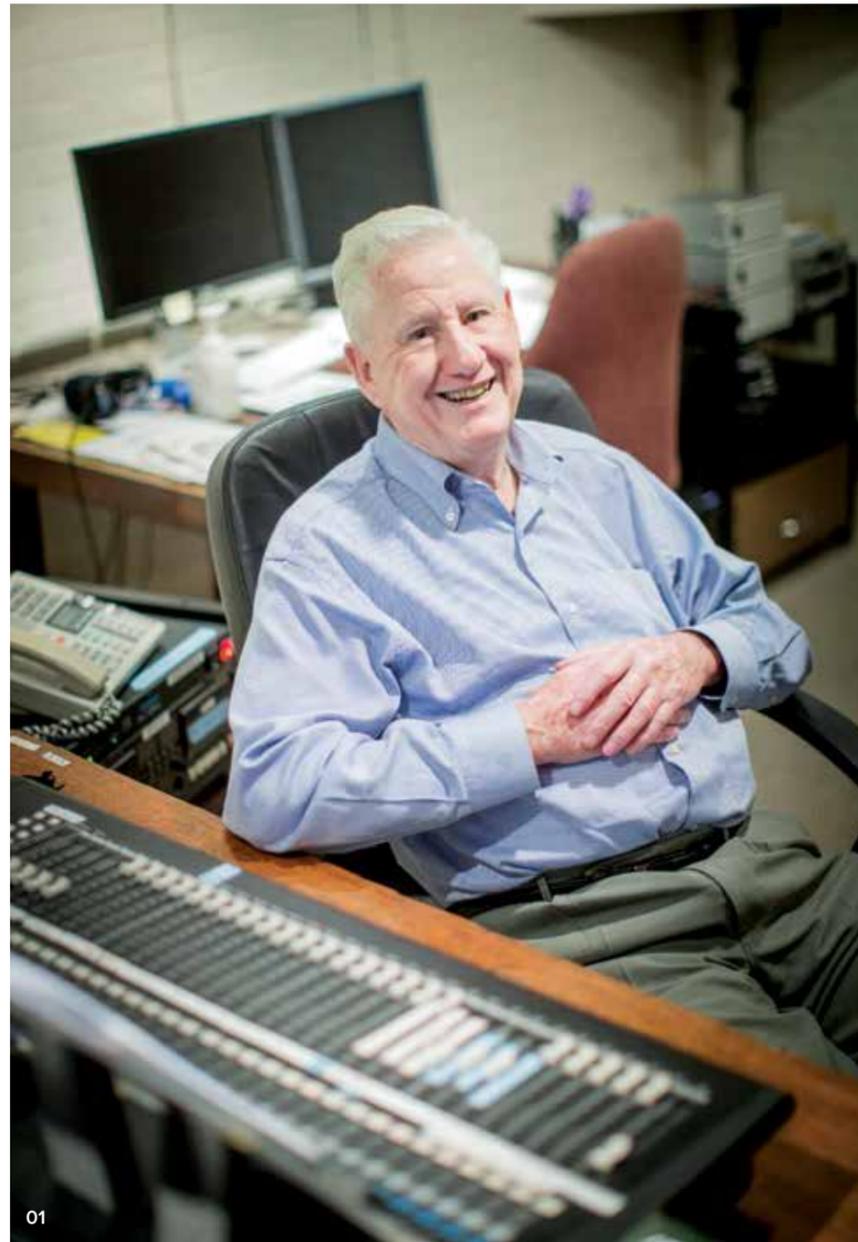
"He was able to explain that there were different types of treatment available for a case like this.

It's not necessarily an easy decision because a bypass is much more invasive than a stent procedure. It involves cracking

open the patient's chest to reach the heart, and the recovery period is longer. There is also a higher risk of stroke.

"We share the decision-making process with the patients and we allow them to make the decisions," Dr. Farkouh says.

Mr. Durant was confident he would be in good care regardless of the treatment route he chose. "To me, the people I met at the Peter Munk Cardiac Centre are the tops in their field. They're really outstanding. They're friendly, you don't feel intimidated and they do their best to communicate with you,"



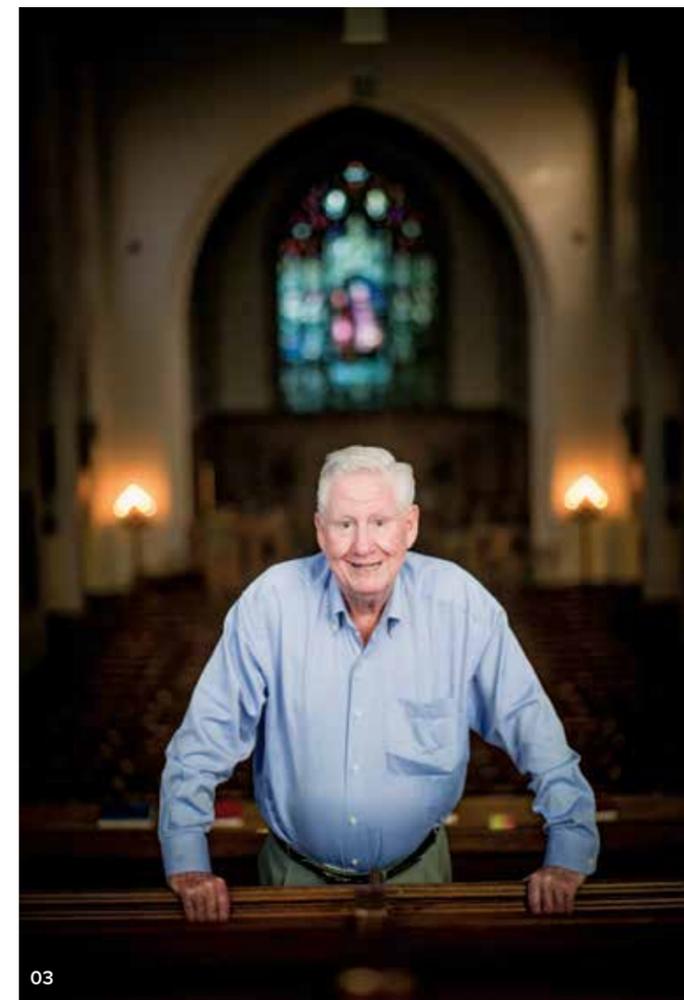
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he says.

The PMCC's extensive research and trials activity is one of the factors that makes the centre outstanding, Dr. Farkouh says.

Dr. Farkouh's team is the engine for about 50 total trials going on right now, with the PMCC leading seven or eight of them internationally.

"The research cluster allows us to think outside the box and study new medicines or strategies to treat patients with diabetes and others with or at risk for heart disease," says PMCC Cardiologist Dr. Jacob Udell, who refers to Dr. Farkouh as his mentor.

"New approaches are necessary in order to further reduce the personal and societal burden of heart disease, still the leading killer of Canadians," he says.

"At the PMCC Trials Unit, we're leading a novel trial with international colleagues that, if

01 Ross Durant was in the midst of a broadcast when he had a heart attack.

02 PMCC cardiologist Jacob Udell, above right, calls Dr. Michael Farkouh his mentor.

03 Following his successful surgery, Ross Durant says he now walks three miles in 45 minutes.

successful, will essentially result in a once-a-year vaccine against heart disease. Now wouldn't that be something?"

Dr. Udell adds, "we're also working on personalized medicine strategies for patients undergoing angioplasty and testing new diabetes medicines for cardiovascular protection."

"We try to help people who have questions," Dr. Farkouh says. But it's more than mere curiosity that leads the PMCC Trials Unit to questions such as the relationship between diabetes and heart disease. "I believe that most good questions start with the patients," Dr. Farkouh says.

"That's where the highest priority is. We all think about saving lives."

The Trials Unit benefits because "many questions that are still unanswered are posed to us; we're a national referral centre," Dr. Farkouh adds.

"We see some of the cases that others don't see and because of that maybe the questions we ask might be different."

For Mr. Durant, the biggest difference is the new lease on life he enjoys.

"I have changed my diet and I changed my style of living a bit," he says. "I am 83, right? I now walk three miles in approximately 45 minutes, and I do that every day, except when the weather is too hot." ▽