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## IN BRIEF

### STROKE

#### Closure of patent foramen ovale does not prevent stroke

Results of the multicenter, randomized, open-label CLOSURE I trial—first released at a session of late-breaking clinical trials at the 2010 AHA Scientific Sessions—have now been published in *New England Journal of Medicine*. Compared with medical therapy alone, percutaneous closure of a patent foramen ovale did not significantly reduce the incidence of stroke or transient ischemic attack (adjusted HR 0.78, 95% CI 0.45–1.35,  $P=0.37$ ) in the 909 patients who had previously experienced such an event.

**Original article** Furlan, A. J. *et al.* Closure or medical therapy for cryptogenic stroke with patent foramen ovale. *N. Engl. J. Med.* 366, 991–999 (2012)

### STROKE

#### Dabigatran is a cost-effective first-line therapy in AF

An economic analysis performed in the UK has indicated that dabigatran etexilate is likely to be a cost-effective first-line treatment for the prevention of stroke and systemic embolism in patients with atrial fibrillation. For patients aged <80 years, incremental cost-effectiveness ratios for dabigatran were £4,831 per quality-adjusted life year (QALY) gained compared with warfarin and £3,457 per QALY gained compared with aspirin. In patients aged ≥80 years, the incremental cost-effectiveness ratio for dabigatran was £7,090 per QALY gained when compared with warfarin.

**Original article** Kansal, A. R. *et al.* Cost-effectiveness of dabigatran etexilate for the prevention of stroke and systemic embolism in UK patients with atrial fibrillation. *Heart* 98, 573–578 (2012)

### RISK FACTORS

#### Sugar-sweetened drinks linked to increased risk of CHD

An analysis of a prospective cohort study of 42,883 men (22 years follow-up) has demonstrated that sugar-sweetened, but not artificially sweetened, drinks are associated with increased risk of fatal and nonfatal coronary heart disease (CHD). The conclusions were made on the basis of 'usual' (average) consumption. Risk of CHD was found to increase by ~20% for every sugar-sweetened drink consumed per day. Consumption of sugar-sweetened drinks was also linked to increased levels of inflammatory factors and triglycerides, and decreased levels of HDL, lipoprotein(a), and leptin.

**Original article** de Koning, L. *et al.* Sweetened beverage consumption, incident coronary heart disease and biomarkers of risk in men. *Circulation* doi: 10.1161/CIRCULATIONAHA.111.067017

### RISK FACTORS

#### Red meat consumption linked to increased CVD mortality

Results from a prospective analysis of dietary data for 37,698 men (22 years follow-up) and 83,644 women (28 years follow-up) has been published in *Archives of Internal Medicine*. Assessed individuals were free from cardiovascular disease (CVD) at baseline and regularly provided information on average intake. CVD-related mortality increased by ~20% for every serving of red meat consumed per day (HR 1.18, 95% CI 1.13–1.23 for unprocessed red meat; HR 1.21, 95% CI 1.13–1.31 for processed red meat).

**Original article** Pan, A. *et al.* Red meat consumption and mortality: results from 2 prospective cohort studies. *Arch. Intern. Med.* doi:10.1001/archinternmed.2011.2287