

Atherosclerosis: Is it Time for a New Name?

To the Editor:

Atherosclerosis, the leading cause of cardiovascular death in Western countries, is an inflammatory disease.¹ Evidence linking inflammation to atherosclerosis stems from studies focusing on the acute and chronic phases of coronary heart disease. Elevated acute-phase reactants and cytokine production, activation of CD4 and CD8 circulating lymphocytes, the presence of infiltrating macrophages, expression of interferon- γ , and neoangiogenesis all support the notion that atherosclerosis shares similar pathophysiological mechanisms with other inflammatory/autoimmune diseases.² Moreover, the earliest type of atherosclerotic lesion (the fatty streak) is also an inflammatory lesion, consisting of macrophages and T-lymphocytes. In addition, circulating markers of inflammation such as C-reactive protein recently have been found to be potential predictors of future cardiovascular and cerebrovascular events in patients with the disease.^{3,4} The study reported by Muhlestein et al⁵ in the October 17, 2000, issue of *Circulation* shows that high-sensitivity C-reactive protein can also be predictive for mortality in patients with coronary artery disease.

In the light of these recent pathophysiological findings, we think that time has come to reexamine the name for atherosclerosis and that a new name adapted to a more realistic scientific

language is required. In fact, arteriosclerosis is now seen as a protective rather than a detrimental mechanism in the evolution of the disease. Therefore, the undersigned authors propose the name of inflammatory and sclerosing arterial disease (ISAD), opening the possibility for other plausible nominations based on the knowledge of the inflammatory mechanisms of this disease.

José A. Páramo, MD
Oscar Beloqui, MD
Javier Diez, MD, PhD

Hematology, Cardiovascular Division and Internal Medicine
University Clinic
31080 Pamplona, Spain

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