ATMOSPHERE: A multicenter, randomized, double-blind, parallel group, active-controlled study to evaluate the efficacy and safety of both aliskiren monotherapy and aliskiren/enalapril combination therapy compared to enalapril monotherapy, on morbidity and mortality in patients with chronic heart failure (NYHA Class II - IV)

Principal Investigator: Arthur L. Riba, MD, FACC

Patient Population: The study population will consist of patients with chronic heart failure (NYHA Class II - IV), aged 18 years or older with left ventricular ejection fraction (LVEF) ≤ 35%, and elevated BNP.

Primary Trial Contact: Jeanne Gugudis, RN, BSN, 313.593.8581

IMPROVE-IT: A Multicenter, Double-Blind, Randomized Study to Establish the Clinical Benefit and Safety of Vytorin (Ezetimibe/Simvastatin Tablet) vs Simvastatin Monotherapy in High-Risk Subjects Presenting With Acute Coronary Syndrome (IMPproved Reduction of Outcomes: Vytorin Efficacy International Trial)

Principal Investigator: Arthur L. Riba, MD, FACC

Diagnosis and Criteria for Inclusion: The high-risk ACS population will comprise both subjects with NSTE-ACS (unstable angina or NSTEMI) with or without MI and subjects with STEMI according to defined protocol conditions.

Primary Trial Contact: Jeanne Gugudis, RN, BSN, 313.593.8581

PROTECT II: A prospective, multi-center, randomized controlled trial of the IMPELLA® RECOVER® LP 2.5 System versus Intra Aortic Balloon Pump (IABP) in Patients Undergoing Non Emergent High Risk PCI

Principal Investigator: Samir A. Dabbous, MD, FACC

Patient Population: The study population will consist of high risk subjects indicated for nonemergent percutaneous treatment of at least one de novo or restenotic lesion in a native coronary vessel or bypass graft.

Primary Trial Contact: Lynne Meharg, RN, BSN, 313.982.5376


Principal Investigator: Robert M. Mentzer, Jr., MD

Patient Population: High-risk adult subjects undergoing non-emergency CABG surgery with cardiopulmonary bypass and cardioplegia who are at an increased risk of adverse postoperative ischemic events.

Primary Trial Contact: Lynne Meharg, RN, BSN, 313.982.5376

TOPCAT: Treatment Of Preserved Cardiac function heart failure with an Aldosterone antagonist

Principal Investigator: Arthur L. Riba, MD, FACC

Patient Population: Male or female age 50 years or older; Heart failure defined as one symptom and one sign present in the last 12 months; Left ventricular ejection fraction 45% (per local reading); Controlled systolic blood pressure; 

Systolic blood pressure ≤ 130 mm Hg with or without antihypertensive medication; Time since diagnosis of heart failure > 3 months; Diabetes mellitus or impaired glucose tolerance 

Primary Trial Contact: Arthur L. Riba, MD, FACC
pressure (SBP), defined as: SBP < 140 mm Hg or SBP from 140-160 mm Hg if subject is being treated with 3 or more medications; Serum potassium < 5.0 mmol/L prior to randomization; At least one hospitalization in the last 12 months for which heart failure was a major component of the hospitalization OR elevated BNP or N-terminal pro-BNP within the last 30 days

**Primary Trial Contact:** Jeanne Gugudis, RN, BSN, 313.593.8581

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**VIRGO:** Variation in Recovery: Role of Gender on Outcomes of Young Acute Myocardial (AMI) Infarction Patients

**Principal Investigator:** Arthur L. Riba, MD, FACC

**Patient Population:** Patients who are ≤55 years old with an elevated Troponin (I or T) or CK-MB level within 24 hours of admission.

**Primary Trial Contact:** Jeanne Gugudis, RN, BSN, 313.593.8581

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**VOYAGER I:** Patient Discharge Using the AB Portable Driver System

**Principal Investigator:** M. Salik A. Jahania, MD

**Patient Population:** The AB Portable Driver System is intended as an extension of patient care to the outpatient environment for those acute heart failure patients in cardiogenic shock who are being supported by the AB5000 Circulatory Support System and who are able to ambulate but require continued cardiac support for maximizing their chance for native heart recovery.

**Primary Trial Contact:** Lynne Mehard, RN, BSN, 313.982.5376

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