Gene Analysis Boosts Sidelined Heart Drug
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In a new sign of personalized medicine's promise, a heart drug that was sidetracked due to lackluster results has been found to significantly reduce death and hospitalization for people who have a certain genetic mutation.

The development reflects the ability to use genetic profiles to predict how patients will respond to treatments, which enables doctors to prescribe medicines that are more likely to be effective and less likely to trigger adverse side effects.

Researchers said Monday that heart-failure patients with a favorable genetic variation who were given the drug bucindolol were 38% less likely to die from any cause than those given a placebo, when followed for an average of two years. Those given bucindolol were also 48% less likely to die of heart-related causes and 44% less likely to be hospitalized for heart failure.

Those patients amounted to 47% of the 1,040 who were analyzed for the study. Another 40% with a different genetic variant saw a marginal benefit from the drug, while 10% didn't get any help from it and may have been harmed.

"The importance of this is that you can potentially better target patients with genetically guided therapy" to achieve a treatment advantage, said Christopher O'Connor, director of the Heart Center at Duke University in Durham, N.C., lead author of the study. He presented the data at the Heart Failure Society of America meeting in Toronto.

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