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IN BRIEF

RISK FACTORS

Smoking cessation in patients with ACS

Smoking is a recognized risk factor for acute coronary syndrome (ACS), but more than two-thirds of patients continue to smoke after being hospitalized for an ACS. Varenicline is an $\alpha_4\beta_2$ nicotinic acetylcholine receptor partial agonist that reduces cravings and withdrawal symptoms during smoking abstinence. In the multicentre, randomized EVITA trial, 302 patients hospitalized with ACS and who smoked ≥10 cigarettes per day were randomly assigned to receive varenicline or placebo for 12 weeks. Patients who received varenicline were significantly more likely to abstain from smoking or to reduce their cigarette consumption than those who received placebo. "These findings suggest that varenicline, initiated in-hospital following ACS, and in conjunction with low-intensity counselling, is efficacious for smoking cessation," conclude the investigators. "Future studies are needed to establish safety in these patients."

ORIGINAL ARTICLE Eisenberg, M. J. *et al.* Varenicline for smoking cessation in hospitalized patients with acute coronary syndrome. *Circulation* doi:10.1161/CIRCULATIONAHA.115.019634

HEART FAILURE

Soluble guanylate cyclase stimulation in HFrEF

Vericiguat is a soluble guanylate cyclase stimulator that might be useful in the treatment of patients with worsening heart failure with reduced ejection fraction (HFrEF). To determine the optimal dose and tolerability of this drug, the SOCRATES-REDUCED investigators performed a phase II study in 351 patients with HFrEF. Patients were randomly allocated to receive 1.25 mg, 2.5 mg, 5.0 mg, or 10.0 mg of vericiguat or placebo for 12 weeks, and the change in the level of N-terminal pro-B-type natriuretic peptide (NT-proBNP) from baseline to follow-up was recorded. No significant difference was found between the pooled vericiguat group and placebo; however, the drug was well tolerated, and exploratory analyses suggested a dose–response relationship between vericiguat and reduction in NT-proBNP level. The investigators believe that "further clinical trials of vericiguat based on the dose–response relationship in this study are needed to determine the potential role of this drug for patients with worsening chronic heart failure".

ORIGINAL ARTICLE Gheorghiade, M. *et al.* Effect of vericiguat, a soluble guanylate cyclase stimulator, on natriuretic peptide levels in patients with worsening chronic heart failure and reduced ejection fraction: the SOCRATES-REDUCED randomized trial. *JAMA* doi:10.1001/jama.2015.15734

PREVENTION

Peer-group intervention lowers cardiovascular risk

Peer-group intervention can be successfully used to implement lifestyle changes and lower cardiovascular risk. In the Fifty-Fifty Program, 543 adults aged 25–50 years with at least one cardiovascular risk factor (hypertension, being overweight, smoking, or physical inactivity) were randomly assigned to receive peer-group-based intervention or to self-management for 12 months. The intervention consisted of monthly meetings involving role-play, brainstorming, and activities to address emotions, diet, and exercise. Peer-group intervention was associated with an improvement in a composite risk-factor score measuring blood pressure, exercise, weight, alimentation, and tobacco use. Long-term follow-up is ongoing.

ORIGINAL ARTICLE Gómez, E. A. *et al.* Comprehensive lifestyle peer-group-based intervention on cardiovascular risk factors: the randomized controlled Fifty-Fifty Program. *J. Am. Coll. Cardiol.* doi:10.1016/j.jacc.2015.10.033

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