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Opinion

# Cardio-Vascular Risk Factors the Role of the Monocyte

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The monocyte count may well be a good indicator of a person's cardiovascular risk.

Monocytes become macrophages which become foam cells. Foam cells form atherosclerosis.

As a patient is put on statin therapy the monocyte count declines.

The decrease in monocytes is an indication that the patient is responding to statin therapy.

Vitamin D is also thought to be beneficial as it decreases calcium levels and thus also decreases calcium levels which are directly incorporated into the

development of atherosclerosis and increase the cardiovascular risk and the chance of coronary thrombosis or myocardial infarction!

The monocyte count is thought to be a greater and more sensitive indicator of coronary thrombosis than a highly sensitive C reactive protein.

The troponin T is a good indicator of recent myocardial infarction as are the cardiac enzymes; viz. cpk, ldh and sgot. Recent infarction on ecg is shown by st segment elevation, but t-wave inversion and pathological q waves may also be of value.

A muga scan or radionuclide-isotope scan will show the area of the heart or myocardium that has been infarcted.

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