

PRESS CLIPPING

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Healthstats International's adviser Bryan Williams with chairman and chief executive Ting Choon Meng. They are seen with the BPro gadget, a blood pressure monitor the size of a watch, and the A-Pulse Casp software. PHOTO: STEPHANIE YEOW

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Better way to take blood pressure

Officially launched yesterday, the A-Pulse Casp has been validated in 3 clinical studies

■ By JUDITH TAN

RETIREE Harry Koh, 80, who suffers from hypertension, depends on his portable automated blood-pressure device to check his health every day.

But experts say blood pressure reading from the artery in the arm is not indicative of the real risks patients like Mr Koh face.

A new made-in-Singapore invention may soon become the gold standard for doctors to read and diagnose hypertension and prevent diseases such as heart attacks and strokes. Called A-Pulse Casp, it is a software that works with the BPro, a watch-like device that records waveforms from the arteries, allowing non-invasive reading of blood pressure from the aorta. Until now, central aortic systolic pressure (Casp) was measured using an invasive and time-consuming pressure-sensor tip catheter inserted into a blood vessel in the groin.

Developed by local firm HealthStats International, the new software was given the thumbs-up by the United States' Food and Drug Administration in a record 45 days.

The system was officially launched yesterday by Mr S. Iswaran, Senior Minister of State for Trade and Industry. Also present was Professor Bryan Williams, a professor of medicine in the Department of Cardiovascular Sciences at the University of Leicester as well as an adviser to HealthStats.

Prof Williams said monitoring the blood pressure from the aorta is "twice as likely to predict heart attack and stroke" than taking a reading in the traditional method. His studies have shown that Casp directly affects the heart and carotid artery - an artery that supplies oxygenated blood to the head and neck. "Some of the anti-hypertensive drugs targeted to reduce blood pressure may not have the desired results in the aorta. Heart attacks and strokes still occur," he said.

The software was tested and validated in three separate clinical studies involving 12,000 patients.

Cardiologist Peter Yan, who carried out the local trial here, said the subjects who were undergoing the catheterisation were also undergoing the A-Pulse Casp simultaneously. "The readings were almost 100 per cent similar. This is going to change the way blood pressure is treated," Dr Yan said.

The revolutionary process has led two major pharmaceutical firms to use details from HealthStats' clinical trials to reassess and develop more effective hypertensive drugs. However, Prof Williams said he could not reveal their names.

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