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Abstract:

We have recently received funding to provide research training to a high school student and a nursing student. The integrating theme of the research proposed is that depression must be disaggregated into its constituent subtypes to understand why it is a prognostic risk for major adverse cardiac events and/or all cause mortality (MACE/ACM) in patients after an Acute Coronary Syndrome (ACS). We propose that studying depression intermediary phenotypes will advance the field by: a) improving prognostic risk prediction; b) identifying specific targets for candidate genes underlying the risk conferred by depression; and c) identifying targets for treatments designed to ultimately improve cardiac and mortality outcome. It is also essential to gain an understanding of the mechanisms through which the depression intermediary phenotypes act to confer excess MACE/ACM risk.