Coronary Artery Calcium Scanning and Conflicts of Interest

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kings Bloomberg School of Public Health (Drs Pollack and Bhavsar), and Johns Hopkins Community Physicians (Drs Noronha and Green), Baltimore, Maryland.

**Correspondence:** Dr Pollack, Division of General Internal Medicine, Johns Hopkins University School of Medicine, 2024 E Monument St, Room 2-615, Baltimore, MD 21287 (cpollac2@jhmi.edu).

**Author Contributions:** Study concept and design: Pollack, Noronha, Green, Bhavsar, and Carter. Acquisition of data: Pollack, Noronha, and Green. Analysis and interpretation of data: Pollack. Drafting of the manuscript: Pollack. Critical revision of the manuscript for important intellectual content: Pollack, Noronha, Green, Bhavsar, and Carter. Statistical analysis: Pollack. Obtained funding: Pollack and Carter. Administrative, technical, and material support: Pollack, Noronha, and Green. Study supervision: Noronha, Green, and Carter.

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**Additional Contributions:** Elizabeth A. Platz ScD, MPH, contributed to the study design, survey development, data interpretation, and manuscript revision, and Erin Murphy and Sean Chen assisted with the survey.

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**In my recent Commentary in the Archives on coronary artery calcium scanning,1 there is no disclosure of my conflict of interest with regard to inflammatory biomarkers and cardiovascular disease because the commentary contains no discussion of this topic. However, as requested by Dr Cohen, my disclosure is provided below.**

**Dr. Paul M. Ridker**

**Author Affiliation:** Center for Cardiovascular Disease and Prevention, Brigham and Women's Hospital, Boston, Massachusetts.

**Correspondence:** Dr Ridker, Center for Cardiovascular Disease and Prevention, Brigham and Women's Hospital, 900 Commonwealth Ave E, Boston, MA 02215 (pridker@partners.org).

**Financial Disclosure:** Dr Ridker is listed as a co-inventor on patents held by the Brigham and Women's hospital that relate to the use of inflammatory biomarkers in cardiovascular disease and diabetes that have been licensed to AstraZeneca and Siemens.

**Cardiac Implantable Electronic Devices: Prevention Starts From Ethics**

We read with interest the article by Sohail et al.,1 in which infections related to cardiovascular implantable electronic devices (CIEDs) were associated with substantial admission and long-term mortality. The importance of clinical and technical procedures for infection prevention was stressed in the “Comment” section and the related Commentary.2 However, an additional major issue