Care of the Heart

Cardiologist Michael Fradley, MD, is the medical director of the Penn Medicine Cardio-Oncology Program at the University of Pennsylvania in Philadelphia.

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What is cardio-oncology?

It's a multidisciplinary field aimed at managing cardiovascular risk and disease in cancer patients and survivors. A key goal is to ensure that patients can receive optimal cancer treatment without cardiovascular problems becoming a barrier.

How can treatment raise cardiovascular risk?

Chemotherapy and radiation can damage normal cells, including those of the cardiovascular system, which can lead to complications, such as decreased ability of the heart to pump blood or abnormal heart rhythms. Targeted therapies can impact pathways that affect the cardiovascular system, leading to, for example, blood pressure elevation. Checkpoint inhibitor immunotherapy can in rare cases lead to an inflammatory condition that affects the heart.

How do you counsel patients?

I view myself as the first mate. The oncologist is the captain. I am there to support the oncologist so that he or she can give the best treatment. I focus on risk factor modification, such as optimizing cholesterol or blood pressure. For example, statin medications may be protective even for people who don't have high cholesterol. I also talk to my patients about diet and exercise.

Does a consultation ever change treatment plans?

It can inform decision-making, but I don't dictate oncology care. For example, if you have a history of heart failure, your oncologist may choose a different therapy.

When should someone seek a referral to a cardio-oncologist?

If you are facing a treatment that puts you at risk for cardiovascular problems, be proactive. I want to see you before a problem occurs. You won't get a million tests, but you'll have an opportunity to find out how to be as healthy as possible.

Do you help cancer survivors?

Absolutely! Cancer survivors are at higher risk of developing cardiovascular disease than the

general public. I talk about the ABCDE of risk reduction: A is for awareness of cardiovascular symptoms, B is blood pressure, C is cholesterol (and cigarette avoidance), D is diabetes control (and diet) and E is exercise.

What cardiovascular symptoms should people look out for?

Shortness of breath, especially with activities that don't normally cause you problems; chest pain; a heart rate that is fast for no particular reason. You know your body better than anyone, so if you feel that something is not right, ask for an evaluation.

Is cardio-oncology widely available?

Most major cancer centers and larger academic centers have cardio-oncologists, but it can be more challenging to find one in the community setting. Telehealth has opened some opportunities to connect patients.

What inspires you?

Definitely my patients. It is a true privilege to be able to help a person get through their cancer journey and prevent cardiovascular issues from happening, to move into survivorship and live their life in a healthy way. It inspires me every day to see what my patients can accomplish.

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