

4 Relevante Originalarbeiten

4.1 Funktionelle Bedeutung von Kandidatengenen:

Laule M, Stangl V, Stangl K. QT-Zeit-Verlängerung. Wann wird sie relevant? Arzneimitteltherapie 2003;21(11):342-8.

4.2 Thrombozyten

Laule M, Cascorbi I, Stangl V, Bielecke C, Werneck KD, Mrozikiewicz PM, Felix SB, Roots I, Baumann G, Stangl K. A1/A2 polymorphism of glycoprotein IIIa and association with excess procedural risk for coronary catheter interventions: a case-controlled study. Lancet 1999;353(9154):708-12.

Meisel C, Cascorbi I, Herrmann A, Roots I, Laule M, Stangl V, Stangl K. The platelet glycoprotein Ia C807T polymorphism as risk factor for coronary catheter interventions. Blood. 2000;96(5):2002-3.

Meisel C, Afshar-Kharghan V, Cascorbi I, Laule M, Stangl V, Felix SB, Baumann G, Lopez JA, Roots I, Stangl K. Role of Kozak sequence polymorphism of platelet glycoprotein Ibalpha as a risk factor for coronary artery disease and catheter interventions. J Am Coll Cardiol 2001;38(4):1023-7.

4.3 Plasmatische Gerinnung

Mrozikiewicz PM, Cascorbi I, Ziemer S, Laule M, Meisel C, Stangl V, Rutsch W, Werneck K, Baumann G, Roots I, Stangl K. Reduced procedural risk for coronary catheter interventions in carriers of the coagulation factor VII-Gln353 gene. J Am Coll Cardiol 2000;36(5):1520-5.

4.4 Gefäßregulation

Stangl K, Cascorbi I, Stangl V, Laule M, Mrozikiewicz PM, Schwarz M, Felix SB, Theres H, Baumann G, Roots I. A1166C polymorphism of the angiotensin II type 1 receptor gene and risk of adverse events after coronary catheter interventions. Am Heart J 2000;140(1):170-5.

Stangl K, Cascorbi I, Laule M, Klein T, Stangl V, Rost S, Wernecke KD, Felix S, Bindereif A, Baumann G, Roots I. High CA repeat numbers in intron 13 of the endothelial nitric oxide synthase gene and increased risk of coronary artery disease. Pharmacogenetics 2000;10(2):133-40.

Laule M, Meisel C, Prauka I, Cascorbi I, Malzahn U, Felix SB, Baumann G, Roots I, Stangl K, Stangl V. Interaction of CA repeat polymorphism of the endothelial nitric oxide synthase and hyperhomocysteinemia in acute coronary syndromes: evidence of gender-specific differences. J Mol Med 2003;81(5):305-9.

Meisel C, Cascorbi I, Gerloff T, Stangl V, Laule M, Muller JM, Wernecke KD, Baumann G, Roots I, Stangl K. Identification of six methylenetetrahydrofolate reductase (MTHFR) genotypes resulting from common polymorphisms: impact on plasma homocysteine levels and development of coronary artery disease. Atherosclerosis 2001;154(3):651-8.

Stangl K, Cascorbi I, Stangl V, Laule M, Dschietzig T, Richter C, Felix SB, Roots I, Baumann G. Hyperhomocysteinaemia and adverse events complicating coronary catheter interventions. Int J Cardiol 2000;76(2-3):211-7.

Meisel C, Laule M, Cascorbi I, Stangl V, Roots I, Stangl K. The G protein subunit beta3 and early complications after coronary catheter interventions. Atherosclerosis 2000;153(2):523-4.

Cascorbi I, Laule M, Mrozikiewicz PM, Mrozikiewicz A, Andel C, Baumann G, Roots I, Stangl K. Mutations in the human paraoxonase 1 gene: frequencies, allelic linkages, and association with coronary artery disease. Pharmacogenetics 1999;9(6):755-61.

Stangl K, Cascorbi I, Laule M, Stangl V, Meisel C, Wernecke KD, Ziemer S, Baumann G, Roots I, Hauner H. The beta3-adrenergic receptor Trp64Arg mutation is not associated with coronary artery disease. Metabolism 2001;50(2):184-8.

Stangl K, Cascorbi I, Laule M, Stangl V, Vogt M, Ziemer S, Roots I, Wernecke K, Baumann G, Hauner H. Elevated serum leptin in patients with coronary artery disease: no association with the Trp64Arg polymorphism of the β_3 -adrenergic receptor. Int J Obes Relat Metab Disord 2000;24(3):369-75.