

## Exploring Atypical Biomarkers for Early Cardiovascular Disease Detection: A Path to Precision Cardiovascular Care

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### Description

Worldwide, Cardiovascular Diseases (CVDs) continue to rank first in terms of mortality and morbidity. For bettering patient outcomes and lessening the strain on healthcare systems, the capacity to identify certain illnesses in their early stages offers great potential. Traditional risk factors including diabetes, hyperlipidemia, and hypertension have proved crucial in identifying at-risk people. However, a sizable percentage of cardiovascular incidents happen in people who don't have these typical risk factors. This has motivated academics and medical professionals to consider unusual directions, giving rise to the idea of atypical biomarkers for early CVD identification.

### The problem with unusual biomarkers

Although traditional indicators like blood pressure and cholesterol levels are still crucial for risk assessment, their prognostication reliability is not certain. Atypical biomarkers include a broad spectrum of signs, such as recently developed molecular, genetic, and proteomic markers that might add to our understanding of cardiovascular risk. These indicators frequently go beyond the conventional knowledge of CVD pathogenesis, showing the intricate interactions between biological processes, environmental variables, and genetic susceptibility.

### Exploring atypical biomarkers

**microRNAs (miRNAs):** These small non-coding RNAs have garnered attention for their role in regulating gene expression. Recent studies suggest that specific miRNA profiles can predict cardiovascular events even in seemingly low-risk individuals. These miRNA signatures reflect subtle molecular changes that precede overt disease symptoms.

**Circulating Endothelial Cells (CECs):** CECs, shed from damaged endothelium, have emerged as potential markers of endothelial dysfunction—a proof of early atherosclerosis. Their quantification could offer insights into the incipient stages of arterial damage and allow for more targeted interventions.

**Metabolomics signatures:** Metabolomics, the study of small-molecule metabolites, can reveal altered metabolic pathways associated with CVD. Harnessing these signatures may enable the identification of metabolic disturbances that precede clinical manifestations, aiding in personalized preventive strategies.

**Epigenetic modifications:** Epigenetic changes, such as DNA methylation and histone modifications, influence gene expression

patterns. These modifications may serve as early indicators of cardiovascular risk, reflecting the cumulative impact of genetic and environmental factors over time.

**Gut microbiota composition:** Mounting evidence links gut microbiota composition to CVD risk. The intricate crosstalk between microbial metabolites and host physiology underscores the potential for innovative biomarkers that integrate microbiome data with traditional risk factors.

### Clinical challenges and implications

Several challenges must be overcome in order to incorporate atypical biomarkers into common clinical practice. Priority should be placed on standardization, validation, and repeatability. Given the complex nature of these markers' relationships, the interpretation of these markers requires a change from absolute thresholds to probable risk evaluations.

### Potential applications

**Personalized risk assessment:** Atypical biomarkers hold the potential to refine risk stratification and personalized interventions for individuals who might be overlooked using traditional risk assessment tools. This approach aligns with the concept of precision medicine, allowing for targeted therapeutic strategies.

**Identifying subclinical disease:** Detection of atypical biomarkers could enable the identification of subclinical disease states, enabling early interventions before irreversible damage occurs. This paradigm shift could prevent disease progression and improve long-term outcomes.

**Monitoring treatment response:** Atypical biomarkers could also serve as tools to monitor treatment response and guide therapy adjustments. Their dynamic nature might provide insights into the effectiveness of interventions, aiding in therapeutic decision-making.

### Conclusion

The search for atypical biomarkers for early cardiovascular disease detection represents a captivating frontier in medical research. These markers offer an outlook into the complex biological processes that underlie CVD, extending our understanding beyond conventional risk factors. As we go deep the reason that is responsible for early onset of cardiovascular disease, we must approach this endeavor with a combination of curiosity, rigorous scientific inquiry, and an interest to go deep in the research for new discoveries.