

Comparison of quantitative troponin I with lv strain in acute MI patients

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Abstract

Objective: to compare the quantitative troponin I with left ventricle strain in acute myocardial infarction patients as assessed by echocardiography. Acute myocardial infarction is an irreversible damage due to a lack of oxygen may lead to impairment in systolic and diastolic function. According to the study a total of 50 consecutive patients of acute myocardial infarction were included. On 50 patients 39 were males and 11 were females. Cardiac troponin testing is central to the diagnosis of acute myocardial infarction. We evaluated a sensitive troponin I assay for the early diagnosis and risk stratification of myocardial infarction. The echocardiographic assessment of regional myocardial function plays a critical role in the diagnosis and management of ischemic heart disease and in most laboratories relies on the visual detection of endocardial wall motion abnormalities and assessment of left ventricular (LV) ejection fraction. troponin I concentration were measured and myocardial strain rate was calculated by global longitudinal strain method by echocardiography. patients with previous myocardial infarction were excluded. Result: there was correlation between the strain rate imaging and myocardial changes in acute myocardial infarction patients (i.e.,) lower the strain rate imaging higher the myocardial changes.

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Biography

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