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The use of stress echocardiography in the treatment of heart failure.

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Abstract : (600 Word Limit)

The relationship between high left ventricular (LV) filling pressure and cardiac output is crucial to understanding hemodynamics in heart failure (HF). The link between LV filling pressure and cardiac output in some patients responds abnormally to stress. During stress, cardiac output can be raised without appreciably raising filling pressure in patients with intact diastolic function. As long as the Frank-Starling mechanism is working properly in HF patients, cardiac output can increase while filling pressure rises. Hemodynamic stress causes a significant increase in filling pressure and pulmonary venous hypertension in patients with decompensated HF.

Between January and June 2008, 395 AS patients (7014 years old, 57 percent men) with an aortic valve area of 1.3 cm2 were analysed (excluding severe other valve disease and an LV ejection fraction of 50 percent). Data from the clinical and echocardiographic examinations were gathered. Velocity Vector Imaging was used to examine LV-GLS. (a) moderate–severe (n=93; aortic valve area, 1.1–1.3 cm2), (b) standard severe (n=161; aortic valve area, 1 cm2; mean gradient 40 mm Hg), and (c) paradoxical severe (n=141; aortic valve area, 1 cm2 and mean gradient 40 mm Hg). The total Euroscore was 73. After risk adjustment, Cox proportional hazards models were used to investigate the link between LV-GLS and all-cause mortality. LV-GLS was 14.8 percent on average (interquartile range: 17.2 percent to 12.1%). There were 92 fatalities (23 percent) at 4.41.4 years.

Important Of Research : (200 Word Limit)

LV-GLS independently predicts mortality in moderate–severe and severe AS patients with preserved LV ejection fraction, providing incremental prognostic utility, in addition to standard clinical and echocardiographic parameters. Additionally, incremental utility of symptom assessment, Euroscore calculation, and LV-GLS measurement to predict mortality was studied, as shown in Figure 3. The χ 2 for the model that incorporated 3 variables (NYHA class, Euroscore, and LV-GLS) to predict mortality was significantly higher than the model that incorporated only NYHA class and Euroscore.

Biography:

We sought to assess the utility of left ventricular global longitudinal strain (LV-GLS) in predicting mortality in moderate to severe and paradoxical severe aortic stenosis (AS) patients with preserved ejection fraction. All of the patients had a complete echocardiography performed with commercially available equipment (Philips Medical Systems, NA, Bothell, WA; General Electric Medical Systems,



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Milwaukee, WI; and Siemens Medical Solutions USA, Inc, Malvern, PA). Measurements and recordings were taken in accordance with established procedures.

Info of Institute /Universities/Lab: (200 Word Limit)

Tokushima University is organized into seven graduate schools: School of Human and Natural Environment Sciences, School of Medical Sciences, School of Oral Sciences, School of Pharmaceutical Sciences, School of Nutrition and Bioscience, School of Health Sciences and School of Advanced Technology and Science. As for undergraduate faculties, there are Faculty of Integrated Arts and Sciences, Faculty of Medicine, Faculty of Dentistry, Faculty of Pharmaceutical Sciences and Faculty of Engineering.One unique feature is the large number of affiliated institutes and research centers representing a wide range of interests and Sciences and Faculty of Sciences and Scien



Recent Publications :(15 to 20 Word Limit)

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