

# PHARMACOLOGIC CARDIAC STRESS SPECT STILL VALUABLE FOR PROGNOSIS IN CHRONIC CORONARY SYNDROME

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## OBJECTIVES

Pharmacologic Cardiac stress-SPECT (PS-SPECT) has been a very commonly used test for non-invasive evaluation of ischemic heart disease (IHD) in patients unable to exercise. New techniques like cardiac CT scan and stress CMR are replacing its use in many clinical scenarios and scientific publications. However, it is still the only available test for non-invasive evaluation of some patients in many hospitals. The objective of the study was to look at the prognostic value of PS-SPECT nowadays.

## METHODS

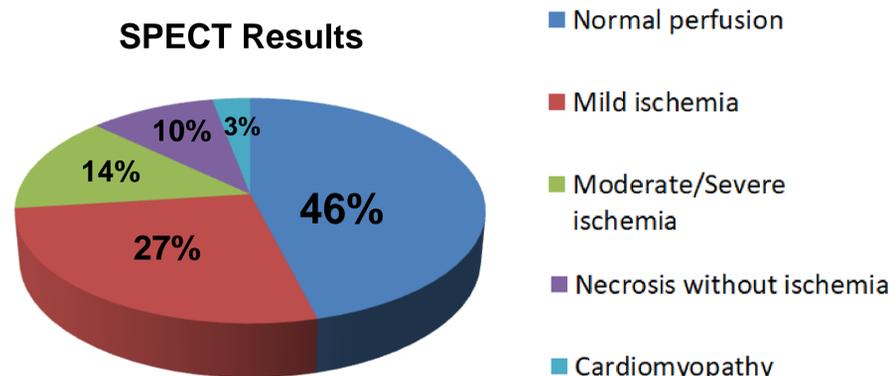
Retrospective study of 1.214 patients referred for PS-SPECT between 2010 and 2016 who completed a median follow-up of 3 years.

Baseline characteristics		Chronic IHD	38%
Age (years)	74±10	Peripheral artery disease	44%
Women	56%	Dipyridamole	89%
Diabetes	51%	Dobutamine	7%
Hypertension	86%	Dipyridamole + low intensity exercise	4%
Hypercholesterolemia	60%		

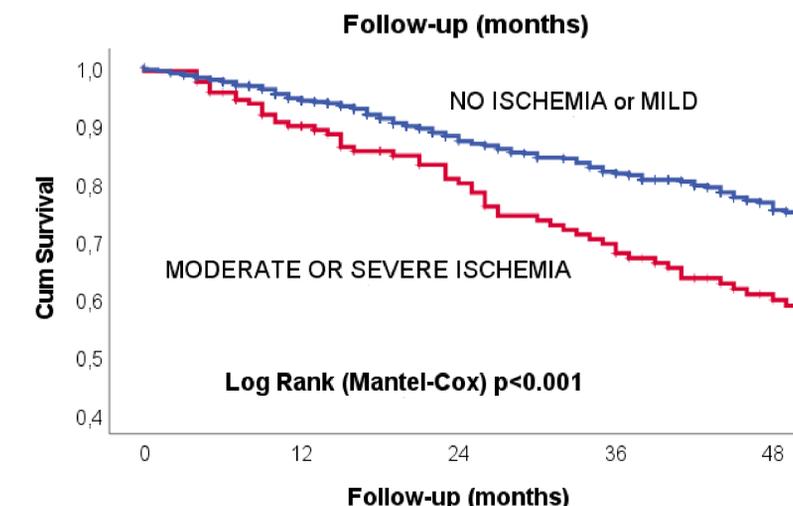
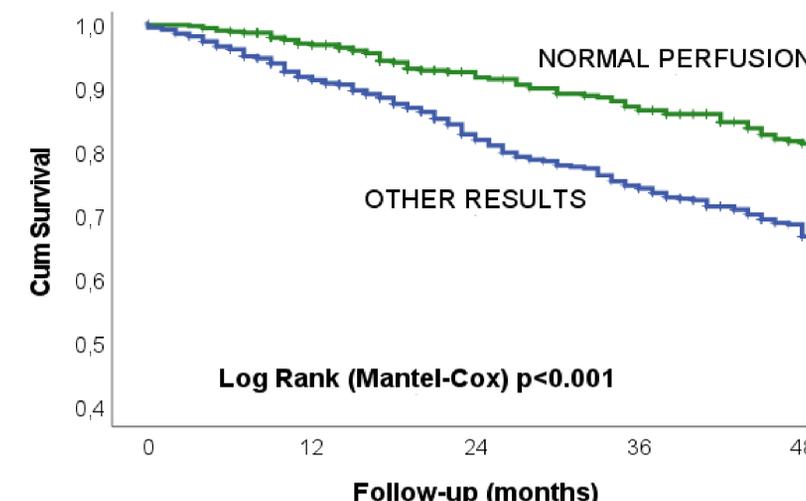
Declaration of interest: Nothing to declare

## RESULTS

SPECT results showed that 41% of the patients had ischemia, defined as moderate or severe (MS-ISC). 46% of patients had normal perfusion (NP). Global mortality was high at 1 year (5,5%) and at long-term follow-up (26,5%) but significantly lower for patients with NP and significantly higher in patients with MS-ISC.



Follow up	Global population	Normal perfusion	Moderate or severe ischemia	p
Global mortality at 1 year	5,5%	3%	8,6%	p<0,001
Global mortality at long-term follow-up	26,5%	19,6%	42,6%	p<0,001



## CONCLUSIONS

PS-SPECT is still a valuable prognostic tool for evaluation of patients with suspected IHD unable to exercise. Even in a high-risk population presence of moderate or severe myocardial ischemia identifies a group of patients with the highest risk and normal perfusion identifies patients at significant lower risk.