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The correlation between speckle tracking echocardiography and coronary artery disease in patients with suspected stable angina pectoris

Shaimaa Moustafa¹, Fathy Swailem¹, Alaa Galal² and Khalid Elrabat¹¹Benha University, Egypt²National Heart Institute, Egypt

Introduction: Myocardial deformation assessed by two dimensional speckle tracking echocardiography (2D-STE) allows accurate evaluation of regional and global left ventricular (LV) function and is sensitive to detect abnormalities induced by ischemia. Objective: To examine the value of speckle tracking echocardiography to detect the presence, extent and severity of coronary artery affection in patients with suspected stable angina pectoris.

Methods: 200 candidates with suspected stable angina pectoris and normal resting conventional echocardiography were subjected to 2D-STE and coronary angiography. Global longitudinal peak systolic (GLPSS) and the most affected segment was calculated and were correlated to the results of coronary angiography for each patient.

Results: There was a statistically significant difference in the mean of global longitudinal peak systolic strain between normal coronaries and different degrees of CAD (-20.11 ± 0.8 for normal, -18.34 ± 2.52 for single vessel, -16.14 ± 2.85 for two vessel, -14.81 ± 2.12 for three vessel, -13.01 ± 2.92 for left main disease). Global longitudinal peak systolic strain showed high sensitivity for the diagnosis of single vessel CAD (90%, specificity 95.1%, cutoff value: -18.44, AUC: 0.954); two vessels disease (90%, sensitivity 88.9%, cutoff value -17.35, AUC: 0.906) and for three vessels CAD (cutoff value -15.33, sensitivity 63% & specificity 72.2% AUC 0.681) GLPSS also showed statistical significance for localization of the affected vessel for LAD, LCX and RCA ($P= 0.001$) and significant correlation with syntax score ($P= 0.001$) .

Conclusion: 2D-STE has good sensitivity and specificity to assess the presence, extent and severity of CAD.

Biography

Shaimaa Moustafa is an Assistant Professor of Cardiology Department of Cardiology, Benha Faculty of Medicine, Benha University, Egypt.

shaimaamustafa2011@gmail.com