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8th Global

Cardiologists & Echocardiography Annual Meeting

July 18-20, 2016 Berlin, Germany

Study of prevalence, clinical presentation and risk factors in patients with coronary slow flow

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Coronary angiography (CAG) is the gold standard for diagnosis of coronary artery disease. Coronary slow flow phenomenon (CSFP) is defined as delayed coronary opacification in the absence of obstructive coronary artery disease. We studied prevalence, clinical presentation and risk factors in 60 patients of coronary slow flow out of total 2018 patients admitted to our tertiary care hospital for a period of 18 months. Statistical Analysis was performed with Epi Info (TM) 3.5.3. We found that CSFP was prevalent in 2.97% of patients, predominantly young male smokers presenting with unstable angina. Traditional risk factors like HTN, DM were not significantly present but positive family history, smoking, increasing low density lipoprotein and triglyceride levels were significant predisposing factors represent coronary slow flow as an early atherosclerosis Elevated hsCRP indicating widespread inflammation and endothelial dysfunction ,resting ECG abnormalities and positive exercise stress tests are more frequent in patients with CSFP. We noticed single vessel involvement more than double and triple vessels, this pattern was different as compared to earlier studies. Significant electrocardiographic changes, positive exercise treadmill test and few patients showing reversible perfusion defect on SPECT imaging strongly indicate that coronary slow flow is not a benign condition and consideration of preventive measures, anti ischaemic treatment and proper follow up is required. Though present study projects coronary slow flow as early atherosclerotic and endothelial disease, further large randomized trials are required to prove the exact pathology and definitive treatment.

Biography

Shaileshkumar Jagdishchandra Patil has done his MBBS and MD internal medicine from reputed institutions in India with academic excellence. Trained in cardiology for 3 years in one of the high volume centre in India, where highest number of pacemaker implantations are done in Asia. Also well trained in thansthoracic and trasesophageal echocardiograph and performed around 5000 femoral and radial angiographies, 1000 angioplasties including complex corornary and peripheral angioplasties, pediatric device implantations and balloon mitral valvuloplasty. He has received 7 national and international publications to his name. He is presently the consultant cardiologist at 250 bed tertiary hospital in Pune, India.

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