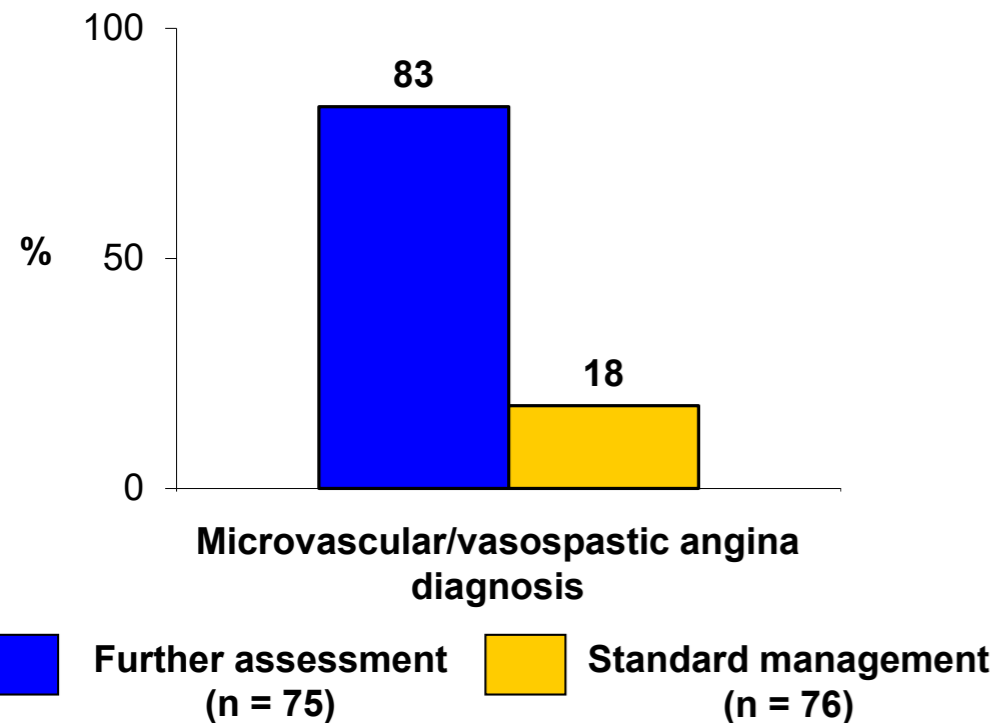


Trial description: Patients with no evidence of anatomical or functional epicardial disease were randomized to further assessment for microvascular/vasospastic angina or standard care after the initial angiogram. Patients were followed for 6 months.

(p = 0.01)



RESULTS

- Primary endpoint, change in SAQ summary score at 6 months, was 11.7 units higher in the arm that underwent active assessment compared with control (95% CI 5.0-18.4, p = 0.001)
- Microvascular/vasospastic angina diagnosis: 83% vs. 18%, p < 0.001

CONCLUSIONS

- A tiered approach for assessment for microvascular and/or vasospastic angina among patients with stable angina and no evidence of significant epicardial disease is superior to usual care