



MEXICO CITY

JUNE 22 - 24, 2017

GLOBAL EXPERTS, LOCAL LEARNING



CASE PRESENTATION

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Past President Argentine Society of Cardiology
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Buenos Aires



F.C. Male 59 y old

T2DBM treated with metphormin

No other medication.

Asyptomatic until the onset of his current disease Works in a restaurant as a waiter

Two months ago effort dyspnea that began in Functional Class II and progressed to III

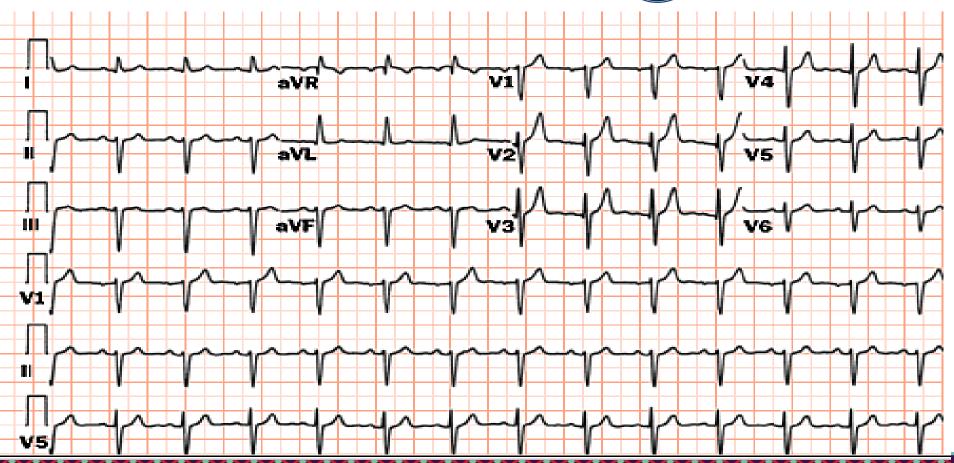


Visit ER: asymptomatic at rest, BP 120/80, HR85 bpm, regular Peripheral oedema Rales in both lungs. S3

Treated with Furosemide and Nitroglycerin IV

Admitted in Cardiology asymptomatic, began ACE inhibitors and espironolactone

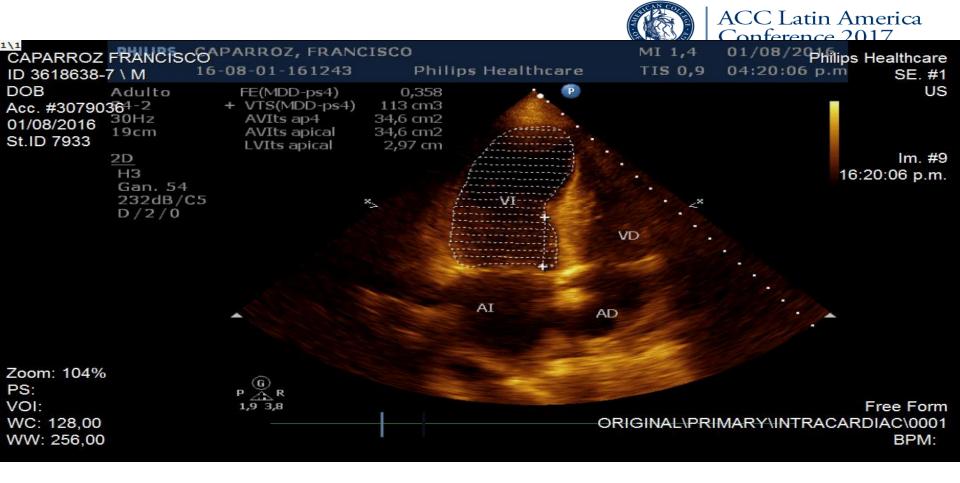




Echocardiography LV 53/42. Fey 35% septal, septo apical and lateroapical akinesia



ACC Latin America





The patient did well, oedema and pulmonary rales disappeared. Lost 5 Kgm in 6 days

What's next:

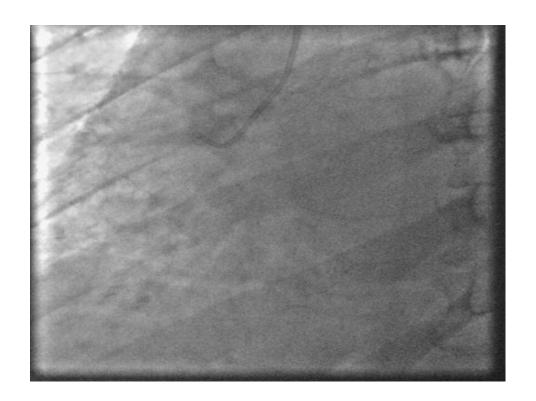
Stress scintigraphy?

Stress echo?

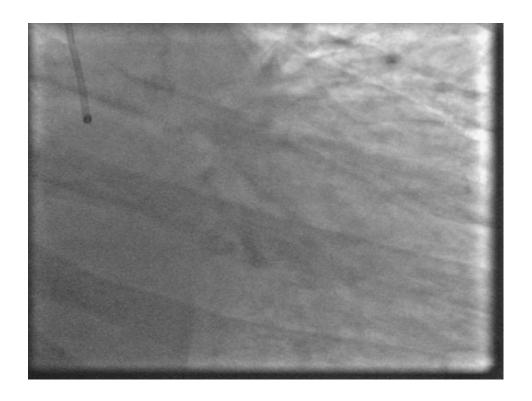
MRI?

Coronary angiography?

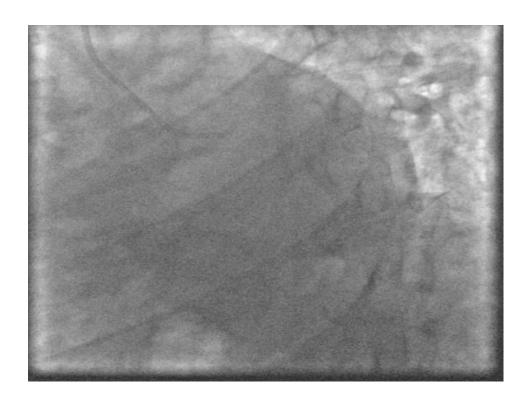














CABG was performed LIMA to LAD, SVG to circumphlex, RCA an 1st diagonal branch No posoperative complications
Treated with beta blockers, aspirin, ACE inhibitors, metphormin and high dose statins

6 months later asymptomatic in Functional Class 1

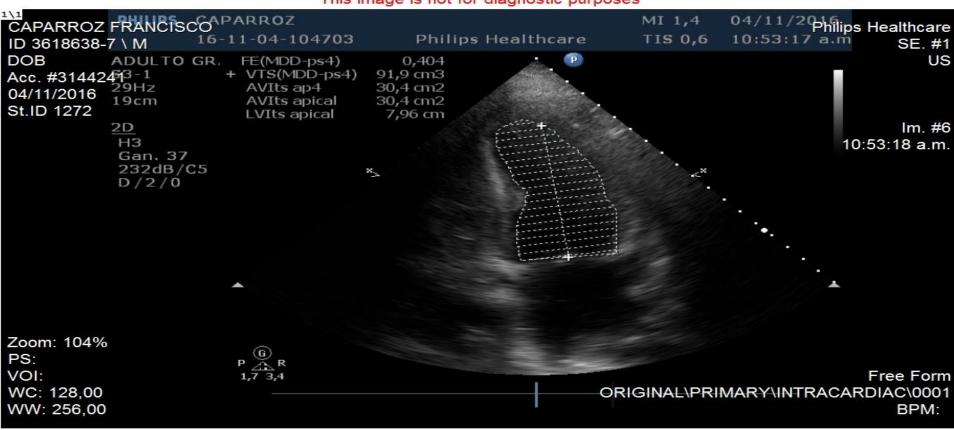
Echo EF 40,5 %



ACC Latin America Conference 2017



This image is not for diagnostic purposes





CASE DISCUSSION

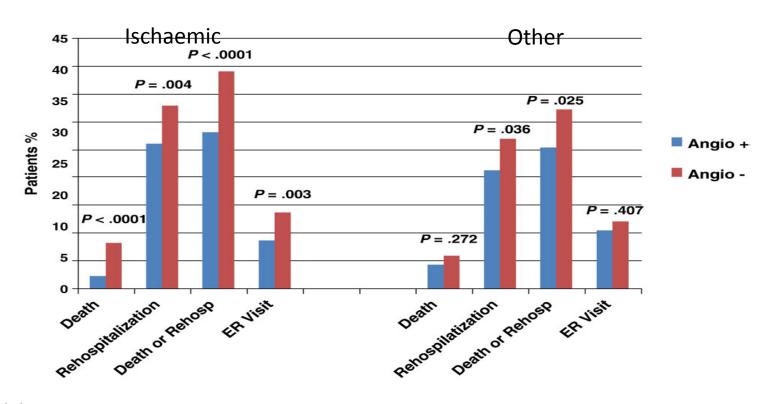


Heart Failure in Latin America-Etiology

					Etiology									
First Author (Ref. #)	Country	Year	N	Mean Age (yrs)	IDC	CD	lsch	SH	Valv	Alco	Perip	Myo	EMF	Tox
Outpatient														
Freitas et al. (16)	Brazil	2005	1,220	45	37	20	17	14	5	4	2	1	<1%	<1%
Bocchi et al. (4)	Brazil	2008	350	50 and 52	10-17	21-16	22-28	22-18	3	8-4	NA	_	_	NA
Mendez et al. (31)	Mexico	2007	72	61	44	_	47	_	_	_	_	_	_	_
Silva et al. (38)	Brazil	2007	96	52	28.2	8.6	28.2	20.6	6.5	2.1	3.2	_	_	_
Ferrante et al. (37)	Argentina	2005	1,518	65	NA	NA	44.4	NA	_	NA	NA	_	_	_
Doval et al. (7)	Argentina	1994	516	50 and 52	19.5-23.0	10.5-8.1	38.3-39.6	NA	_	NA	NA	_	_	_
DHF							1 1							
Mangini et al. (17)	Brazil	2008	212	60	8	15	30	21	15	NA	NA	NA	NA	NA
Latado et al. (18)	Brazil	2006	299	69	3	9.7	49.2	25.8	11.7	_	_	0.7	_	_
Tavares et al. (25)	Brazil	2004	203	50 and 52	NA	NA	62-68	NA	NA	NA	NA	NA	NA	NA
Fairman et al. (19)	Argentina	2009	736	74	NA	4	21	76	20	NA	NA	NA	NA	NA
Perna et al. (6)	Argentina	1992-2004	2,974	65-70	1.3-138	1.3-8.4	27-38	18.2-32.3	16-22	1.0-5.4	_	_	_	_
Castro et al. (11)	Chile	2004	372	69	7.4	_	31.6	35	14.8	2.2	NA	NA	NA	NA
Boochi et al. (20)	Brazil	2008	182	55	NA	21	34	NA	NA	NA	NA	NA	NA	NA
Barretto et al. (8)	Brazil	1998	903	53	25.8	6.2	32.6	7	22	NA	NA	NA	NA	NA
Rohde et al. (9)	Brazil	2005	143	73	NA	0.6	39	25	10	NA	NA	NA	NA	NA
McSwain et al. (28)	Antigua-Barbuda	1999	293	69	5	_	33	41	12	2	NA	NA	NA	NA
Thierer et al. (21)	Argentina	2002	400	68	5	4.3	28	21.8	17	NA	NA	NA	NA	NA
Rizzo et al. (22)	Argentina	2004	615	70	3.7	8.4	27.4	18.2	16.4	NA	NA	NA	NA	NA
Thierer et al. (23)	Argentina	2006	2.201	68	9.3	6	40.5	23.7	12	_	_	_	_	_



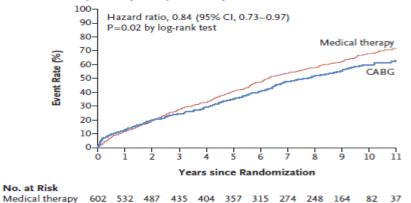
OPTIMIZE-HF 48612p, 8,7% with CCG



Flaherty Am Heart J 2009;157:1018-25.

STICHES 10 year follow-up

A Death from Any Cause (Primary Outcome)



460 432 392 356 312 286 205

404 357 315 274 248

432 392 356 312 286 205

B Death from Cardiovascular Causes

610 532 487

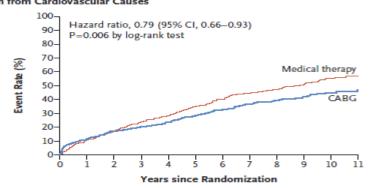
602 532 487

460

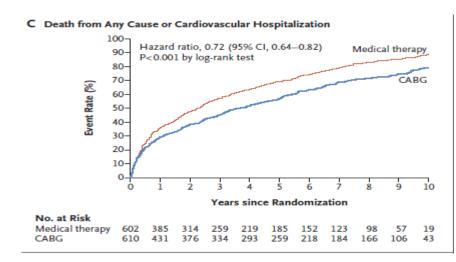
CABG

No. at Risk Medical therapy

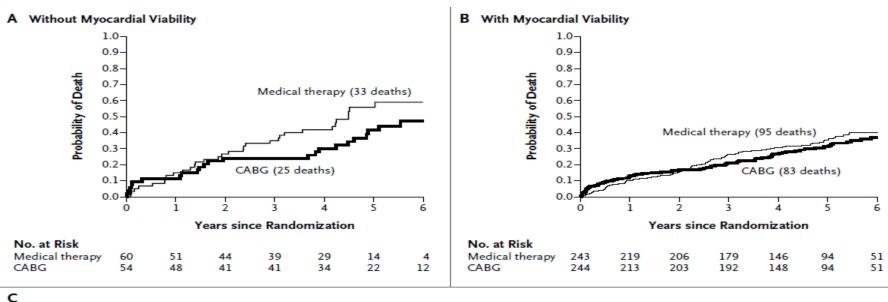
CABG

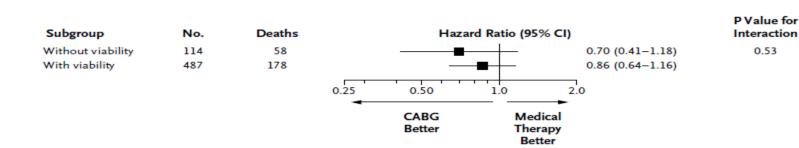






Myocardial viability and mortality





N Engl J Med 2011. DOI: 10.1056/NEJMoa1100358.



FREEDOM

Outcome		rs after nization		s after nization	Patients v	P Value*	
	PCI	CABG	PCI	CABG	PCI	CABG	
		number	(percent)	nur			
Primary composite†	121 (13.0)	108 (11.9)	200 (26.6)	146 (18.7)	205	147	0.005‡
Death from any cause	62 (6.7)	57 (6.3)	114 (16.3)	83 (10.9)	118	86	0.049
Myocardial infarction	62 (6.7)	42 (4.7)	98 (13.9)	48 (6.0)	99	48	< 0.001
Stroke	14 (1.5)	24 (2.7)	20 (2.4)	37 (5.2)	22	37	0.03§
Cardiovascular death	9 (0.9)	12 (1.3)	73 (10.9)	52 (6.8)	75	55	0.12

N Engl J Med 2012. DOI: 10.1056/NEJMoa1211585