

心臓検査における性差(LBCT 416-08)

PROMISE:心機能の診断検査は女性と男性とでは異なって機能する

PROMISE: Diagnostic tests for heart disease function differently for women than men

冠動脈疾患の重症度の診断や評価に用いられる検査は女性と男性とで異なって機能する、と第65回American College of Cardiology年次集会で発表された。女性においてCT血管造影(CTA)は機能的負荷検査よりも将来の冠動脈イベントの予知能が高いことが示された。男性において、負荷検査は心疾患の陽性所見頻度がCTAよりも少なかったが、イベント予知能はCTAと負荷試験とでほぼ同等であった。

Full Text

Tests used to diagnose and assess the severity of coronary artery disease appear to function differently for women and men who have stable symptoms, according to research presented at the American College of Cardiology's 65th Annual Scientific Session. The finding adds new insights into the differences between men and women who are newly diagnosed with heart disease.

Analyzing data from the PROMISE study (Prospective Multicenter Imaging Study for Evaluation of Chest Pain), researchers previously found that for both women and men, myocardial infarctions (MI) and other events occurred at the same rate regardless of whether patients were assessed using a computed tomographic angiography (CTA) or a functional stress test.

However, since the frequency of a positive test differed between the two test types, the ability to predict an event based on test findings was not the same for CTA vs. stress testing.

More women had a positive stress test than a CTA, but given the same event rate, this meant that a smaller proportion who had a positive stress test went on to have a coronary event – death, MI or other heart problem leading to hospitalization. As a result, CTA proved to be more predictive than a stress test of a future coronary event among women.

For men, a stress test showed a positive finding for heart disease less often than CTA, but the predictive value of CTA and the stress testing for an event was roughly similar.

"In the main PROMISE study analysis, the rates of coronary events were similar whether patients were tested with CTA or a stress test," said lead author Neha Pagidipati, M.D. of from Duke Clinical Research Institute. "Our analysis delved a little deeper to determine if there were subtle differences between the sexes associated with using these diagnostic tests."

Pagidipati said the differences in women are statistically significant and could help guide test selection and the interpretation of test results, but do not yet provide a basis to recommend that all women undergo CTA instead of functional stress tests. Instead, she said, the findings point strongly to the need for a study specifically designed to answer that question.

In addition to Pagidipati, study authors include Kshipra Hemal, Adrian Coles, Daniel B. Mark, Rowena J. Dolor, Patricia A. Pellikka, Udo Hoffmann, Sheldon E. Litwin, James Udelson, Melissa A. Daubert, Svati H. Shah, Beth Martinez, Kerry L. Lee, and Pamela S. Douglas.

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