CLINICAL PROFILE OF PREMENOPAUSAL WOMEN WITH CORONARY HEART DISEASE

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Objective To study the clinical profile of premenopausal women with coronary heart disease.

Methods 116 premenopausal women with chest pain were classified into coronary heart disease group and control group by coronary angiography. Risk factors, clinical symptoms and the coronary angiographic characteristics were investigated retrospectively.

Results The risk factors of premenopausal women with coronary heart disease were hypertension, diabetes and hyperlipidemia. Typical angina pectoris was an important character. The typical change of ECG in premenopausal women with coronary heart disease was elevation or depression of ST, but not T wave. The sensitivity and specificity of Exercise stress testing or SPECT for premenopausal women with coronary heart disease were 67.7% and 52.2%, 40.9% and 59%, respectively. Single vessel coronary lesion was found more frequently in Premenopausal Women with coronary heart disease, and the left anterior disending artery was the most frequently involved vessel.

Conclusion Hypertension, Diabetes and/or hyperlipidemia are major risk factors in premenopausal women with coronary heart disease. Women with typical angina pectoris and ST changes should be cautioned coronary heart disease. Nonvasive testing is a poor diagnosis method for young women with coronary heart disease, but can be used as exclusive marker.

RELATIONSHIP BETWEEN RETINAL VASCULOPATHY AND CORONARY DISEASE

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Background and objective Studies showed that atherosclerosis is a systemic disease. Parameters representing peripheral artery atherosclerosis, such as decreased ankle-brachial index (ABI), and increased carotid artery intima-media thickness (CIMT), are well correlated with coronary artery disease. However, these are indirect indicators provided by ultrasound examination. Eyes are good windows, through which we can observe vascular anatomy and function in vivo directly and clearly. Our study was to explore the correlation of retinal vascular diameter and arteriole-to-venule ratio (AVR) on the retinal photographs to extent and severity of coronary artery disease (CAD) angiographically.

Methods From January 2007 to February 2008, the patients admitted in CCU and Department of Cardiovascular Disease of Beijing Chuiyangliu Hospital with diagnosed or suspected of CAD were selected to accept coronary angiography using standard Judikin’s technique. According to Gensini score, the degree and extent of coronary atherosclerosis were visually evaluated and scored by 2 expert cardiologists. The calibres of individual retinal arteriole and venule coursing through a zone located at 1 to 1.5 disc diameter from the optic disc margin were measured on the digital retinal photographs using a computer-assisted method by two trained oculists who had no knowledge of the patients’ condition of coronary artery angiogram, and the arteriole-to-venule ratio was calculated.

Results 1. 114 patients were enrolled, including 61 men and 53 women, aged from 54 to 82 years (60.16±10.34 y). The diagnosis of CAD was confirmed in 55 patients (CAD group) and the other 29 patients with negative results (control group) angiographically. There were no significant differences between two groups in terms of baseline clinical characteristics. 2. The result of coronary artery angiography: 85 patients (74.57%) were diagnosed as CAD, and the other 29 patients (25.43%) were excluded from CAD. In CAD group,