

## عنوان مقاله:

Risk stratification of diabetic patients with unusual cardiac symptoms using a myocardial perfusion scan

## محل انتشار:

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## خلاصه مقاله:

Background: Autonomic nervous system dysfunction in diabetic patients can result in an atypical presentation of cardiovascular disease that can be missed. We aimed to use single-photon emission computed tomography (SPECT) to assess cardiovascular disease (CAD) in diabetic patients with atypical pain to determine whether the pain above reflects the CAD. Methods: Diabetic patients with atypical cardiac symptoms were referred to the SPECT department. Demographic data such as age, gender, diabetes status, and other underlying diseases were gathered. A myocardial perfusion scan was then performed. The results were recorded to evaluate the risk of myocardial ischemia and the degree of coronary artery involvement in a non-invasive manner. Results: The study included ۲۲۲ (۱۷۷ female) subjects with mean ages of  $63.01 \pm 11.62$  and  $59.41 \pm 9.19$  in positive and negative SPECT, respectively. The most common symptoms were atypical chest pain (۵۱.۸%), followed by shortness of breath (۵۰.۵%), nausea, and syncope (۰.۹%). Cardiac parameters, such as the summed stress score (SSS), summed rest score (SRS), total perfusion deficit in stress (TPD-s), total perfusion deficit in rest (TPD-r), were significantly higher in the group with coronary artery involvement ( $P < 0.001$ ). However, ejection fraction (EF), end-diastolic volume (EDV), and end-systolic volumes (ESV) parameters were not ( $P = 0.328$ ,  $0.351$ , and  $0.443$ , respectively). Conclusions: The mere presence of diabetes does not necessitate any additional diagnostic tests beyond those required for the general population, and it is possible to follow a diagnostic course similar to that of the general population.

