



The Differences In Co-Morbidities Between Systolic HF (Heart Failure) And Diastolic HF In A Cohort Of 345 HF Patients In A University Hospital (Uk)

Abstract

Objectives:To examine the difference in the prevalence of comorbidities, risk factors and NYHA status between systolic HF and HF with preserved systolic function (HFPEF)

Methods:

The study was conducted on 389 patients with heart failure. The analysis was based on the Echocardiography results. Diastolic HF defined as those with normal EF (ejection fraction) as opposed to those with reduced EF (systolic HF) using cut off point of 50%.

44 patients had both systolic and diastolic dysfunction hence excluded

Results:

The average age was 72 years, 58.6% males and 41.4% females.

46.3% had diastolic HF who were mostly females, overweight, older in age with higher rate of DM, hypertension, valvular lesions, anaemia and restrictive cardiomyopathy than patients with systolic heart failure.

In contrast, patients with systolic failure were mostly males with had higher rate of IHD, atrial fibrillation, dilated cardiomyopathy and renal failure.

There was no difference between the two groups in term of COPD, cognitive impairment and NYHA functional status

Conclusion:

The presence of certain co-morbidities can predict the ECHO outcome in term of EF.They also aid in choosing the appropriate treatment to optimise symptoms control and improve the mortality and quality of life.