

Long-term outcomes in patients with advanced coronary artery disease are better than expected

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Death rates associated with patients with refractory angina, or chronic chest pain, are lower than previously considered; therefore, physicians should focus on relieving the chest pain symptoms and improving the quality of life in these patients according to an article published online this week in the *European Heart Journal*.

[Refractory angina](#) patients endure ongoing chest pain despite optimal medical management and for them, standard revascularization techniques, such as surgery or [stenting](#), is no longer an option. Traditionally, these are the patients with the most advanced [coronary artery disease](#), frequently referred to as "no-option patients."

"Importantly, this study describes the first long-term results from the largest and most contemporary follow-up of patients in a dedicated refractory angina clinic," says the study's first author Timothy D. Henry, MD, director of research at the Minneapolis Heart Institute Foundation. "Our results demonstrate that long-term mortality in patients with refractory angina is surprisingly low, below 4 percent per year."

The OPTions In Myocardial Ischemic Syndrome Therapy (OPTIMIST) program at the Minneapolis Heart Institute® at Abbott Northwestern Hospital in Minneapolis was created for refractory angina patients in 1996 to develop new treatment options for this challenging patient population. This study reflects the long-term survival and predictors of

mortality.

The study population consisted of 1,200 consecutive patients with either refractory [myocardial ischemia](#) and/or refractory angina, who were not candidates for traditional revascularization and referred for [alternative treatment](#) strategies from 1996 to present.

Overall, 241 patients of the 1,200 died during a median follow-up of 5.1 years. After an analysis, the researchers determined mortality was 3.9 percent at one year and 28.4 percent at nine years.

"Currently, data on the incidence and prevalence of refractory angina are scarce and mainly derived from registries," explains Henry.

In addition to the low overall mortality, the results indicated non-cardiac death in nearly 30 percent of patients and a low incidence of sudden cardiac death.

Improved secondary prevention strategies, evidence-based medical therapy and more advanced revascularization techniques all likely contributed to lower mortality, concluded Henry and his colleagues in the paper.

"Widespread and improved adherence to medical medications combined with aggressive lifestyle changes, such as diet, exercise and smoking cessation, has contributed to lower overall mortality in patients with coronary artery disease, and this includes the highest-risk patients with refractory angina," Henry notes.

Based on the findings, more than 70 percent of patients with refractory angina can expect to survive nine years from the time of diagnosis. Given these results, the researchers emphasized that therapeutic options for this growing population should therefore focus on chest pain relief

and improved quality of life.

Provided by Minneapolis Heart Institute Foundation

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