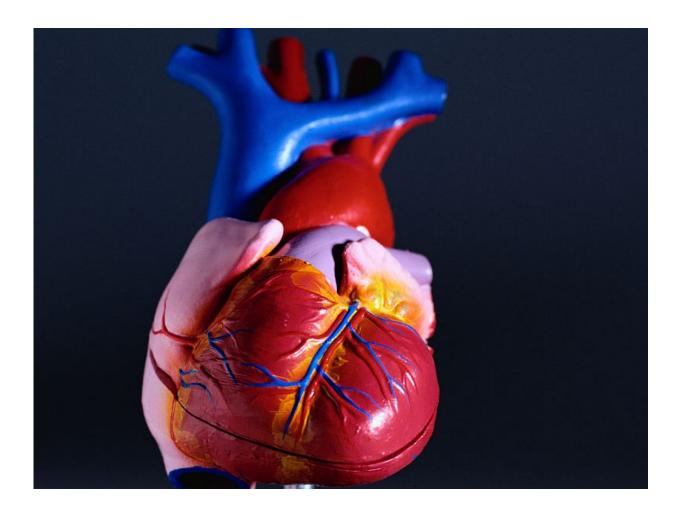


CPX testing predicts mortality in heart failure with reduced EF

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(HealthDay)—Variables measured during a cardiopulmonary exercise



(CPX) test can predict and discriminate mortality in patients with heart failure with reduced ejection fraction (HFrEF), according to a study published in the Feb. 23 issue of the *Journal of the American College of Cardiology*.

Steven J. Keteyian, Ph.D., from the Henry Ford Hospital in Detroit, and colleagues report on the strength of the association among variables measured during a CPX test and all-cause mortality in patients with HFrEF. Ten CPX test variables were measured at baseline among 2,100 patients enrolled in the Heart Failure-A Controlled Trial Investigating Outcomes of Exercise Training.

The researchers identified 357 deaths over a median follow-up of 32 months. With the exception of respiratory exchange ratio, all CPX variables correlated with all-cause mortality (P₂) and exercise duration were able to predict and discriminate mortality equally (c-index, 0.69). Among men and women, respectively, the strongest predictor of mortality was peak Vo₂ and exercise duration. Percent ppVo₂, exercise duration, and peak Vo₂ were similarly able to predict and discriminate mortality, in multivariable analyses. A 10 percent one-year mortality rate corresponded to peak Vo₂ of 10.9 ml/kg⁻¹/min⁻¹ in men versus 5.3 ml/kg⁻¹/min⁻¹ in women.

"Peak Vo₂, exercise duration, and percent $ppVo_2$ carried the strongest ability to predict and discriminate the likelihood of death in <u>patients</u> with HFrEF," the authors write. "The prognosis associated with a given peak Vo₂ differed by sex."

One author disclosed financial ties to Merck Research Laboratories.

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