Guideline adherence and survival in aortic stenosis

Guideline adherence for serial evaluations in aortic stenosis is associated with increased survival rate and improved clinical outcomes, according to new research published in JAMA Cardiology. The findings support the need for close monitoring of patients with asymptomatic severe aortic stenosis and help to validate current guidelines for serial evaluations.

Current practice guidelines recommend exams every six to 12 months for patients with asymptomatic severe aortic stenosis and normal left ventricular function, yet the benefit of this close monitoring is unknown.

The new study, led by Mario Goessl, MD, PhD, of the Minneapolis Heart Institute Foundation, Minneapolis, examined the association of guideline adherence with clinical outcomes in 300 patients with asymptomatic severe aortic stenosis. Rates of survival and adverse clinical events, including heart attack, stroke, and heart failure hospitalization, were compared between patients who adhered to guidance on exams and those who did not. Among the requirements of an exam were a cardiopulmonary physical examination and echocardiogram. Guideline adherence was defined as an exam every 12 (±6) months until aortic valve replacement or death during the follow-up period (median, 4.5 years).

Dr. Goessl's team reported these key findings:

- Aortic valve replacement was performed more frequently (54 percent vs. 19 percent) and the median time for this performance was earlier (2.2 years vs. 3.5 years) in patients with guideline adherence.
- All-cause death was higher for nonadherent patients, and these patients also had a higher rate of hospital admission for heart failure decompensation in follow-up.
- Four-year survival that is free from death and heart failure hospitalisation was higher for adherent patients than for nonadherent patients (39 percent vs. 23 percent).

“To our knowledge, the present investigation is the first to demonstrate a survival benefit associated with adherence to guideline recommendations for serial clinical evaluations in patients with asymptomatic severe aortic stenosis. By helping to validate current guideline recommendations for closely monitoring patients with asymptomatic severe aortic stenosis, our findings support the efforts to improve guideline adherence, with the ultimate goal of improving clinical outcomes for these patients,” the research team said.

Source: JAMA Cardiology
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