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Echocardiography role in syncope Patients

Ali Raza Ghani, MD
Abington Jefferson Health

Irfan Ahsan, MD
Abington Jefferson Health

Wajahat Humayun, MD
Abington Jefferson Health

Usman Sarwar, MD
Abington Jefferson Health

Margot I. Boigon, MD
Abington Jefferson Health

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Authors

Ali Raza Ghani, MD; Irfan Ahsan, MD; Wajahat Humayun, MD; Usman Sarwar, MD; Margot I. Boigon, MD; and Mary Maglak, PhD



Echocardiography role in syncope Patients

Ali Raza Ghani MD, Irfan Ahsan MD, Wajahat Humayun MD, Usman Sarwar, MD Margot I Boigon MD, Mary Maglak PhD
Department of Internal Medicine Abington Jefferson Health.

INTRODUCTION

Syncope is a symptom complex comprising of a brief loss of consciousness associated with an inability to maintain postural tone, because of a transitory decrease in cerebral blood flow, that resolves completely and necessitates no resuscitation.

It accounts for 3% of emergency department (ED) visits and 1% to 6% of all hospital admissions². The prevalence of syncope is about 42%, considering a lifetime of 70 years.

METHODS

We did a retrospective chart review of 138 patients admitted to observation floor with diagnosis of syncope.

POPULATION DEMOGRAPHICS AND RISK FACTORS

Variable	%
Male (%)	42
Females	58
Age > 65	80
Risk factors	%
HTN	63
DM	15
Prior MI	10
Prior PCI	8.69
CKD	10.8
CVA	7.98
PVD	4.34
Anemia	5.07
Prior syncope	6.52
EKG normal	89.85
Physical examination normal	83
LV EF < 50%	5.1
Length of Hospital Stay	
<12 hours	11.59
12-24 hours	29.71
24-48 hours	52.89
> 48 hours	5.7
Valvular Heart disease (AS)	9.4
Orthostasis +ve	12.3

DISCUSSION

Echocardiography (ECHO) is widely used as a screening tool to rule out structural or valvular heart disease in patients presenting with syncope.

Out of 17 % of patients who had abnormal findings on physical exam, echocardiography was a useful in 9 % people for detection of valvular heart disease and 5% had low EF < 50%.

Length of stay and health care costs was increased in patients admitted over the weekends waiting for ECHO.

CONCLUSION

Echocardiography is a useful tool is differentiating high risk syncope patients and detecting valvular heart diseases only in patients with abnormal exam or concerning EKG findings.

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