MEDICAL GRAND ROUNDS

UNIVERSITY OF TEXAS

SOUTHWESTERN MEDICAL SCHOOL

HYPERTROPHIC CARDIOMYOPATHY (IHSS)

APRIL 14, 1988

Lawrence S. Cohen, M.D.

HYPERTROPHIC CARDIOMYOPATHY

1. Introduction
2. Pathology
3. Clinical Symptoms
4. Physical Examination
5. Electrocardiogram
6. Chest Film
7. Echocardiography
8. Hemodynamic Studies
9. Natural History
10. Management
11. Yale Experience 1970-1988

The Dynamics of Left Ventricular
Outflow Tract Obstruction

Augmented Obstruction

+Inotropy

+LV Volume

+Aortic Diastolic
Pressure

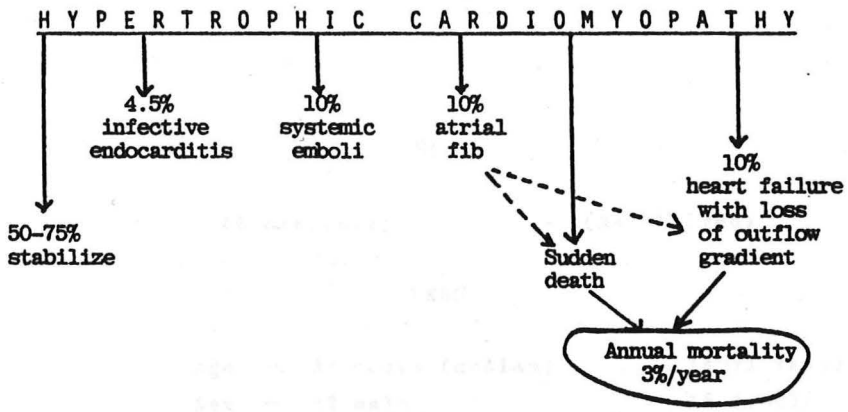
The Dynamics of Left Ventricular
Outflow Tract Obstruction

Decreased Obstruction

↓ Inotropy

↑ LV Volume

↑ Aortic Diastolic
Pressure


HYPERTROPHIC CARDIOMYOPATHY
50–75% stabilize
4.5% infective endocarditis
10% systemic emboli
10% atrial fib
Sudden death
10% heart failure with loss of outflow gradient
Annual mortality 3%/year

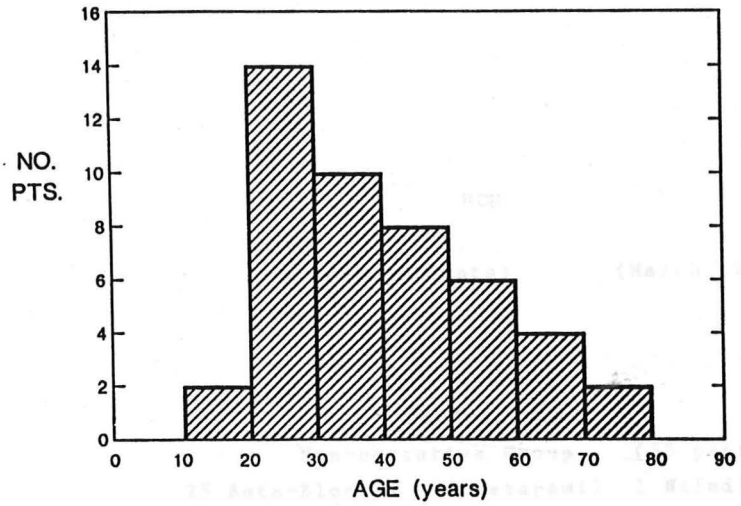
HCM

(46 patients) (March 1988)

YNHH

Age -	37 years (median)	14-71 range
Sex -	32 male	14 female
Fam/Non Fam	14/32	
Followup	11 years (average)	1-18 range

HYPERTROPHIC CARDIOMYOPATHY - YNHH
March 1988



HCM

(46 patients) (March 1988)

YNHH

Medications

Non-operative Group (35 patients)

25 Beta-Blocker 4 Verapamil 1 Nifedipine - 5 no meds

HCM

(46 patients)	(March 1988)
Operation/no operation	11/35
Followup operation	11 years (average)
	1 - 21 range

HCM

(46 patients) (March 1988)

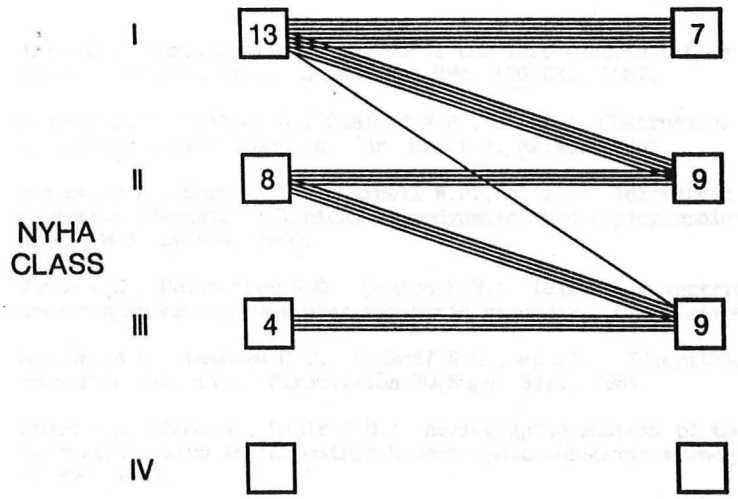
YNHH

Complications:

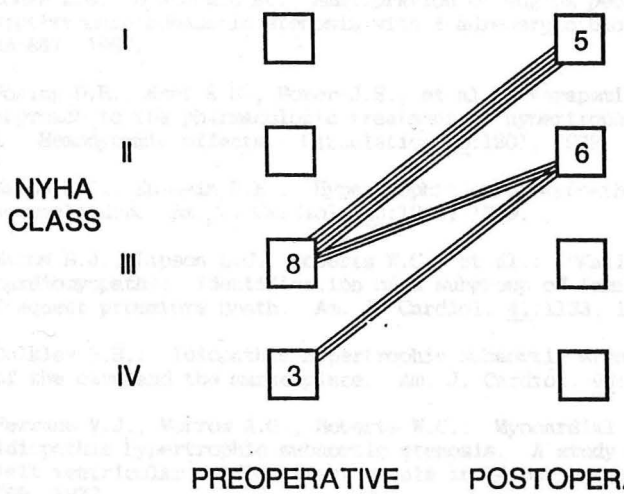
Subacute bacterial endocarditis	3
Hemolytic anemia	1
Pacemaker (post-op)	1
LBBB (post-op)	6
Alive/Dead*	43/3

*2 Sudden death
1 Pancreatic carcinoma

HYPERTROPHIC CARDIOMYOPATHY - YNHH
MEDICAL FOLLOW-UP (at least 3 years)
March 1988



HYPERTROPHIC CARDIOMYOPATHY - YNHH
March 1988



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