

Budúcnosť ergometrie

Je pravdepodobné, že záujem o ergometrickú diagnostiku ischémie myokardu bude v ekonomicky vyspelých krajinách naďalej klesať na úkor vzostupu záujmu o CTCA. Je možné, že pokles sa zastaví na úrovni pretrvávajúceho plateau. Odlišná situácia bude v low-income krajinách, kde bude ergometria naďalej zohrávať významnejšiu úlohu (3). Je otázne, či by mohla ergometria pro futuro zažiť renesanciu ako súčasť tzv. hybridnej diagnostiky KACH. CTCA (\pm FFR [frakčná prietoková rezerva]) dokáže identifikovať len epikardiálnu KACH. Mnoho symptomatických pacientov má však ischémiu bez obštrukčnej epikardiálnej KACH. Týchto pacientov možno identifikovať len funkčným testom a nie pomocou CTCA, resp. stimuláciou hyperémie pri FFR. U nich by mohla byť vhodná hybridná diagnostika: kalciové skóre na detekciu koronárnej aterosklerózy + ergometria na diagnostiku ischémie. Ide o koncept anatomickej a funkčnej diagnostiky KACH (3). V literatúre sa pre tento koncept používa aj termín „calcium treadmill test“. Výhodou vyšetrenia samotného kalciového skóre je veľmi nízka radiačná záťaž (< 2 mSv). Kalciové skóre < 100 je asociované s veľmi nízkou pravde-

podobnosťou indukovateľnej ischémie. Naproti tomu kalciové skóre ≥ 400 výrazne zvyšuje pravdepodobnosť ischémie myokardu (26). Hybridná metodika „calcium treadmill test“ by mohla slúžiť ako filter pred náročnejšou a zatažujúcejšou anatomickou diagnostikou (CTCA, resp. priamo koronárna angiografia) (3).

Podľa aktuálne platných odporúčaní ESC možno predpokladať, že si ergometria udrží svoju pozíciu v rozhodovacom procese pri manažmente asymptomatických chlopňových chýb.

Záver

Význam ergometrie na diagnostiku ischémie myokardu v ére expanzie zobrazovacích metodík zásadne poklesol. ESC odporúča na diagnostiku obštrukčnej KACH preferovať zobrazovacie metodiky oproti ergometrii (4). Ergometriu možno zvážiť ako alternatívny test na potvrdenie, resp. vylúčenie KACH, ak nie sú dostupné neinvazívne alebo invazívne zobrazovacie metodiky (aj to len v triede IIb). Ergometria má naďalej významnú pozíciu pri manažmente asymptomatických chlopňových chýb.

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