

Heart attack patients without obstructive coronary artery disease at high risk of residual angina

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Patients without obstructive coronary artery disease (CAD) are just as at risk of angina as those with obstructive CAD, according to new research published today in the *European Heart Journal - Quality of Care and Clinical Outcomes*.

According to researchers in America, patients are at a substantial risk of incurring residual angina following their heart attack, even when they do not have obstructive CAD. They analysed data from 5539 patients and 31 hospitals to discover that patients without obstructive CAD were just as likely to have angina in the 12 months following their heart attack as those with obstructive CAD. Those patients were also just as likely to be re-hospitalized in the year following their heart attack as those who had coronary artery disease. Dr Anna Grodzinsky, a Saint Luke's Mid America Heart Institute Cardiovascular Fellow in Kansas City, Missouri and lead author of the article, commented that: "our findings highlight the importance of aggressive medical therapy and follow-up in patients with MI and no obstructive CAD, in order to potentially reduce their burden of angina, improve the quality of life, and prevent re-hospitalizations."

Dr. Grodzinsky went on to say that: "non-invasive strategies to reduce angina burden could have a significant impact of their health and quality of life. Angina is a potentially modifiable condition and therefore patient symptoms could be improved, as well as healthcare costs." With one in

four patients (without obstructive CAD) found to report angina in the year following their initial heart attack, the article suggests that angina symptoms should be aggressively managed with the goal of improved outcomes.

This is the first study to focus on the burden of residual angina after an initial [heart attack](#) and re-hospitalizations in [patients](#) without versus with obstructive [coronary artery disease](#).

More information: 'Angina frequency after acute myocardial infarction in patients without obstructive coronary artery disease' Anna Grodzinsky, Suzanne V. Arnold, Kensey Gosch, John A. Spertus, JoAnne M. Foody, John Beltrame, Thomas M. Maddox, Simita Parashar, and Mikhail Kosiborod.

European Heart Journal - Quality of Care and Clinical Outcomes, [DOI: 10.1093/ehjqcco/qcv014](#)

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