

Racial differences seen with hypertrophic cardiomyopathy

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sarcomeric mutations identified by genetic testing (26.1 versus 40.5 percent) compared with white patients. There were no [racial differences](#) noted in implantation of implantable cardioverter-defibrillators, but invasive septal reduction was less common among [black patients](#) (14.6 versus 23 percent). Black patients had less incident atrial fibrillation (35 [17.1 percent] versus 608 [26.9 percent]). There was an association between black race and increased development of NYHA class III or IV heart failure (hazard ratio, 1.45).

"The findings suggest that racial differences in disease expression and adverse clinical outcomes exist between black and [white patients](#) with hypertrophic cardiomyopathy and that these differences may be associated with inequities in clinical care provision," the authors write.

Several authors disclosed financial ties to the medical device and pharmaceutical industries.

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(HealthDay)—Racial differences in disease expression and adverse clinical outcomes exist between black and white patients with hypertrophic cardiomyopathy, according to a study published online Dec. 4 in *JAMA Cardiology*.

Lauren A. Eberly, M.D., from Brigham and Women's Hospital in Boston, and colleagues assessed data from the Sarcomeric Human Cardiomyopathy Registry (1989 through 2018) to evaluate the associations among race, disease expression, care provision, and clinical outcomes among patients with [hypertrophic cardiomyopathy](#).

The researchers identified 2,467 patients with hypertrophic cardiomyopathy (8.3 percent black; 91.7 percent white). Black patients were younger at the time of diagnosis (mean age, 36.5 versus 41.9 years), had a higher prevalence of New York Heart Association (NYHA) class III or IV heart failure at presentation (22.6 versus 15.8 percent), had lower rates of [genetic testing](#) (54.1 versus 62.1 percent), and were less likely to have

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