DEVELOPMENT OF PROGNOSTIC INDEX FOR CORRELATION OF THE FINDINGS FOR AMBULATORY PRESSURE MONITORING AND HOLTER MONITORING: RATIONALE, ALGORITHM AND PROTOCOL OF PREDICT STUDY Paper No: 355 Paper. Reference: P 198. Poster July 14, 2017: 3.30 pm-4.00pm

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Introduction

- The evidence for the value of the association of the findings of simultaneous 24 hour Holter electrocardiography (ECG) monitoring with Ambulatory Blood Pressure Monitoring (ABPM) is limited
- Sympathetic overactivity during night is a well recognized factor of hypertension development in adults
- · However, the deleterious effect of nocturnal autonomic activation in elderly remains controversial.

Objectives

• To develop a prognostic index based on a cost effective cardiovascular screening based on the correlation of circadian variability of BP with the 24-hour ECG monitoring for rate and rhythm of heart

Methods

- This proof of concept study in 500 patients at our tertiary care centre is developed as a mixed-methods approach in three steps
- · First, patients reporting would be screened for hypertension
- Second, known hypertensives and the newly detected hypertensives as standard of care approach would undergo a simultaneous monitoring of 24-hour BP with Holter
- · Third, these patients would undergo ABPM at home and followed up for five years to develop a prognostic index.
- The specific sub-groups that would contribute to the weighted score include hypertensives with cerebrovascular accident, accelerated hypertension, sleep apnea

Results

- The nocturnal BP monitoring is the rationale for determining the four sub-groups- normal dippers, non-dippers, extreme
 and reverse dippers. The primary outcome measures include the correlates for ST-T wave abnormalities, tachycardia and
 the patterns from recovery from stroke, improvement in cognitive scores, heart rate turbulence, association between the
 left ventricular mass and the dipping pattern
- The secondary outcomes measures would be based on the follow up for the outcomes for the hospitalisation for heart failure and cardiac death

Conclusions

- This would be the first study in Indian hypertensive patients for the development of a reliable prognostic index based on the triad of cardiovascular risk profile, the variability of the 24-hour BP and cardiac arrhythmic patterns
- The prognostic index based on the characteristic of the patient would be a guide for an efficient hospital initiatedimprovised home care follow up model for the effective management of hypertension







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