

Circulation

JOURNAL OF THE AMERICAN HEART ASSOCIATION



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Circulation 2011, 123:e9

doi: 10.1161/CIRCULATIONAHA.110.984971

Circulation is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75214

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Response to Letter Regarding Article, “Peripartum Cardiomyopathy as a Part of Familial Dilated Cardiomyopathy”

We thank Dr Baruteau et al for their comments. They raise an important issue, and recommend cardiological screening in all first-degree relatives of patients with peripartum cardiomyopathy (PPCM), not only when it concerns PPCM without recovery.

Our findings strongly suggested that a subset of PPCM is part of the spectrum of familial dilated cardiomyopathy.¹ The article by Morales et al² in the same issue of *Circulation* underscores this. Taking these new data into account, we consider the genetic susceptibility of PPCM properly addressed in the recent statement from the Heart Failure Association of the European Society of Cardiology Working Group on PPCM.³

In our article, we discussed a major limitation of our study: that we had not performed cardiological screening of family members of those PPCM patients who had recovered left ventricular function. We emphasized the importance of studying these cases in the future because they also can be part of familial cardiomyopathy. This is corroborated by the case report by Baruteau et al on the occurrence of PPCM in two sisters with full recovery.⁴ Besides, apparent recovery is not always true recovery, because it has been reported that patients have died during extended follow-up despite recovery of left ventricular function at 6 months' assessment.⁵ Thus, we fully agree with Baruteau et al that it is justifiable to offer cardiological screening to first-degree relatives of recovered PPCM patients.

Disclosures

None.

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