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DOES THE PRESENCE OF DIABETES INFLUENCE REFERRAL FOR CARDIAC CATHETERIZATION AND REVASCULARIZATION AFTER SINGLE-PHOTON EMISSION COMPUTED TOMOGRAPHY (SPECT) **MYOCARDIAL PERFUSION IMAGING (MPI)?**

ACC Moderated Poster Contributions McCormick Place South, Hall A Saturday, March 24, 2012, 9:30 a.m.-10:30 a.m.

Session Title: Myocardial Perfusion Imaging in the Diabetic Population Abstract Category: 23. Imaging: Nuclear Presentation Number: 1103-183

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Background: Diabetic patients are known to have higher cardiovascular event rates than non-diabetics. However, data regarding the referral pattern for cardiac catheterization (CC) or coronary revascularization after SPECT MPI in diabetic and non-diabetic patients with no known CAD are limited.

Methods: 13,208 patients without any prior coronary artery disease (CAD) referred for SPECT MPI from 1996-2010 were identified. All studies were interpreted using ASNC 17-segment model and Summed stress scores (SSS) were categorized as: normal (SSS 0-3), mild (SSS 4-8) and moderate-severe (SSS≥9) defects. Significant CAD by cardiac catheterization was defined as >70% stenosis of any vessel or ≥50% left main stenosis.

Results: Out of 13,208 patients, 1148 (8.69%) underwent CC within 90 days of study and 358 (2.71%) patients required revascularization therapy. Overall, the referral trends for CC were similar among DM and non-DM patients across all perfusion categories. Referral for revascularization was also similar between DM and non-DM, in relation to imaging results.

Conclusion: Referral for cardiac catheterization and revascularization for diabetic patients with suspected CAD was no different from non-diabetic patients. Referral was based on severity of perfusion abnormalities on SPECT MPI and independent of the diabetic status of the patient.

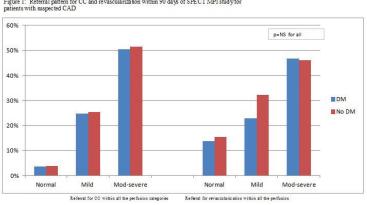


Figure 1: Referral pattern for CC and revascularization within 90 days of SPE CT MPI study for patients with suspected CAD