

前向きな態度は狭心症患者の転帰を改善する (Abstract 18-A-17200-ACC)

RIVER-PCI: 慢性狭心症の見通しを楽観的にとらえていることはその後の転帰が良好なことに繋がる

RIVER-PCI: Optimistic outlook about chronic angina leads to improved outcomes over time

慢性狭心症を対処するに当たって、前向きな態度がその後の転帰を改善するのに役立つ可能性があるとのRIVER-PCIトライアルの結果が、American College of Cardiology's 67th Annual Scientific Sessionにおいて3月10日に発表される。あまり楽観的でない対照群に比べ、最も楽観的な群では、概して狭心症が少なく心筋梗塞、心不全、糖尿病および慢性腎臓病歴を有する割合が低かった。研究者らは、最も楽観的な群は全体的に健康であることを自覚し自重するよう促しているが、それでも彼らは病院へ行ったり血行再建術を施行されたりする割合が30% 低かった。

Full Text

When it comes to coping with chronic angina, a positive outlook may help improve outcomes over time, according to a study to be presented on March 10 at the American College of Cardiology's 67th Annual Scientific Session.

Researchers at the Duke Clinical Research Institute and Columbia University sought to determine whether people with heart-related chest pain who say they are optimistic about their disease and future health would have fewer episodes of heart-related hospital stays or revascularizations.

"Feeling better about your disease process and ability to reengage in usual activities may actually make chronic angina easier to deal with," said Alexander Fanaroff, MD, a fellow in the department of cardiology at Duke University Medical Center and the study's lead author. "Our findings suggest that if we can identify patients who are less optimistic for whatever reason — whether it's because their disease has made them despair for the future, they have uncertainty about their diagnosis, or they have multiple comorbidities — and help them feel more hopeful by focusing on what they can do, we may be able to positively affect outcomes."

While there has been a lot of attention to the association between depression and heart health, this is the first study to assess whether hope and confidence in one's future health might be protective for people with heart disease and chronic angina symptoms.

Chronic angina is among the most common complaints made by patients visiting the emergency department and it can greatly impair someone's quality of life, Fanaroff said. A less optimistic view of their health may also trigger more visits to the doctor's office, contributing to more evaluation and hospital admissions. "People will often cut back on or stop activities they like to do — tennis, playing with grandchildren, job-related tasks — either because of the pain itself or because they worry that the activity prompting the pain is dangerous [to their heart]," he said.

In this study, those who were self-described as more optimistic were 40 percent less likely to be hospitalized with angina or have a revascularization procedure compared with those who were not. While researchers cautioned that the most optimistic group of patients also tended to be healthier overall, they were still 30 percent less likely to go to the hospital or have a revascularization even after accounting for this fact.

The study analyzed data from nearly 2,400 people with chronic angina undergoing percutaneous coronary intervention (PCI) to open at least one blocked coronary artery who were enrolled in RIVER-PCI, a multi-center, randomized, double-blinded, controlled trial. RIVER-PCI tested whether taking ranolazine in addition to usual care could reduce hospitalizations and revascularization procedures related to angina compared with placebo and found no benefit.

As part of this trial, patients completed a questionnaire about their overall quality of life, how frequently they had angina and how much they agreed or disagreed with the statement, "I am optimistic about my future and returning to a normal lifestyle." These same questions were asked again at one, six and 12 months.

For the present study, Fanaroff and his team grouped patients based on how optimistic they were at the start of the RIVER-PCI trial, regardless of what treatment they received, to see whether perceived optimism had any effect on hospitalizations and revascularizations during the median 643 days of follow up.

Of the patients surveyed, 782 (33.2 percent) were most optimistic ("strongly agree"), 1,000 (42.4 percent) were somewhat optimistic ("agree"), 451 (19.1 percent) were undecided, and 123 (5.2 percent) were not optimistic ("disagree" or "strongly disagree"). The level of optimism reported by patients remained fairly stable over time.

Compared with their less optimistic peers, those who were most optimistic reported having less angina overall and were also less likely to have had a history of myocardial infarction, heart failure, diabetes and chronic kidney disease.

The rate of the primary outcome was higher in undecided (32.8 percent) and not optimistic (35 percent) patients compared with the most optimistic patients (24.4 percent); this finding persisted after adjusting for comorbidities and baseline angina frequency.

Still unanswered, researchers noted, is whether patients who were less optimistic felt that way due to the burden of their disease(s) or general uncertainty about the future living with their disease.

Still, there seems to be a link, Fanaroff said. He added that there is no downside to instilling hope and equipping patients with skills for self-care. "As a clinician, it doesn't cost anything to help patients with chronic angina focus on what they can do, letting them know that there are medications and procedures that can help them return to a normal life and continue to do the things they like to do," he said. "Bottom line: there's reason to be optimistic for patients with chronic angina, and it's important that clinicians relay that to them."

Fanaroff said a reasonable next step would be to test strategies that might encourage someone to adopt a more glass-half-full, positive outlook and track outcomes.

ACC2018特集

[News01]

気候変動は心筋梗塞リスクを上昇させる可能性がある

[News02]

炎症性腸疾患はMIリスクを上昇させる

[News03]

前向きな態度は狭心症患者の転帰を改善する

[News04]

アリロクマブは急性冠症候群後の心血管イベントを軽減する

[News05]

着用型自動除細動器は全死亡を減らすが突然死には影響しない

[News06]

心不全患者にとってインフルエンザワクチンは有益である

[News07]

音楽は運動負荷試験中の運動時間を増加させる

[News08]

がん治療は心不全リスクを上昇させる

[News09]

遺伝子型解析はPCI後の薬物選択において有益である

[News10]

3種の低用量内服は高血圧管理に成功した

[News11]

ACSにおけるスタチンのローディングドーズ投与は臨床イベントリスクを減少させない

[News12]

卵円孔閉鎖患者においてデバイスが転帰を改善する

[News13]

タビガトランは非心臓手術後の心筋障害を軽減する

[News14]

短期抗血小板薬2剤併用療法はMIリスクを上昇させる

[News15]

薬剤が第Xa因子阻害効果をリバースする

[News16]

Canakinumabは糖尿病への進行を予防しない

[News17]

MI後のチカグレロル使用の安全性はクロピドグレルと同等である

[News18]

積極的なモニタリングはAFibの診断率を3倍に上昇させる

[News19]

化学療法による心毒性の軽減

[News20]

カルベジロールは乳がん女性の心臓を保護する