

European Respiratory Society Annual Congress 2012

Abstract Number: 4430

Publication Number: P935

Abstract Group: 4.3. Pulmonary Circulation and Pulmonary Vascular Disease

Keyword 1: Elderly **Keyword 2:** Comorbidities **Keyword 3:** No keyword

Title: Assessment of pulmonary hypertension in patients over 70

Dr. Christopher 26893 Valerio cjvalerio@doctors.net.uk MD ¹, Dr. Benjamin 26917 Schreiber benjamin.schreiber@nhs.net MD ¹, Dr. Clive 26918 Handler clive.handler@nhs.net MD ¹, Prof. Christopher 26919 Denton c.denton@ucl.ac.uk MD ² and Dr. John 26920 Coghlan germy.coghlan@nhs.net MD ¹. ¹ Pulmonary Hypertension, Royal Free Hospital, London, United Kingdom and ² Rheumatology, Royal Free Hospital & UCL Medical School, London, United Kingdom .

Body: Background Recent registry data suggests that the average age of patients with PAH is rising. Pulmonary hypertension affects elderly people and there is increasing prevalence of cardiac and respiratory disease with age. Methods We report the findings for 120 consecutive patients aged over 70 referred to a tertiary service during 2008-09 for invasive haemodynamic studies to confirm or exclude a diagnosis of pulmonary hypertension. Results Four patients died within 30 days of referral and before being assessed, 15 patients did not undergo cardiac catheterisation. 50% of those assessed had an associated connective tissue disease. 36 patients had resting pulmonary artery pressures <25mmHg, eleven with respiratory and ten with cardiac disease to explain their symptoms. 65 patients were diagnosed with pulmonary hypertension following invasive studies: 19 related to left heart disease, 7 related to chronic lung disease, 7 CTEPH, five mixed aetiology, and 27 PAH. Three patients with idiopathic PAH, one case associated with an atrial septal defect, 23 with connective tissue disease. Follow up log(10)NT-proBNP testing in 24 patients with PAH showed a significant reduction at 12 months (-0.21, p<0.05 students' t-test).

Conclusion Pulmonary hypertension of all types may be present in older patients. Thorough assessment may provide insight into the drivers of symptoms in older patients and help to guide treatment, which can be successful.