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Title: Right heart catheterization in elderly patients with suspected pre-capillary pulmonary hypertension

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Body: Introduction: despite more comorbidities and risk factors for heart failure with preserved left ventricular ejection fraction, elderly are often addressed in Pulmonary Hypertension (PH) center for suspicion of pre-capillary PH. Aims and method: the aims of the study were to compare results of right heart catheterization (RHC) in a large sample of elderly (age > 65 yrs) patients and in a group of younger patients, and to observe aetiologies of confirmed pre-capillary PH in both groups. All files of patients referred for suspicion of pre-capillary PH after non invasive assessment in Toulouse university PH center from 2009 to 2011 were retrospectively analysed. Results: data of 108 elderly patients and 92 younger were reviewed. PH was confirmed in 83% and 73% respectively. PH was considered post-capillary in 29.4% of cases in elderly versus 18.5% in younger ($p>0.05$). Aetiologies of pre-capillary PH were different according to age : 33% of group 1, 2.5% group 1', 35% group 3, 28% group 4 and 2.5% group 5 in elderly vs 55%, 2%, 21%, 17% and 5% in younger ($p<0.01$). PAH in elderly was more often associated with scleroderma (50% of cases) than in younger. This could in part explain poorer survival in the elderly group: 39% of mortality (median of follow-up 9.5 months) versus 16% (median of follow-up 19 months). Conclusion: pre-capillary PH diagnosis is challenging in elderly patients; when confirmed by RHC, PAH (excepted scleroderma associated PAH) is less frequent than in younger subjects, reinforcing the interest of a meticulous screening toward an aetiology in this population.