



Cardiac Dysfunction Related to Cirrhosis

Odilson Marcos Silvestre¹, Alberto Queiroz Farias², Fernando Bacal¹

Instituto do Coração do Hospital das Clínicas da Faculdade de Medicina da Universidade de São Paulo¹; Hospital das Clínicas da Faculdade de Medicina da Universidade de São Paulo², São Paulo, SP – Brazil

Dear Editor,

A systematic review of Mota and Markman Filho¹ demonstrates that Doppler echocardiography is indicated in cases of cirrhosis, for investigation of pulmonary and vascular complications of cirrhotic cardiomyopathy. We agree that this test may show cardiac abnormalities related to cirrhosis. In our experience, 184 patients prospectively evaluated showed structural cardiac

abnormalities at rest, which correlated with the severity of cirrhosis². However, the presence of these abnormalities is not sufficient to characterize cirrhotic cardiomyopathy. The criteria for diagnosis are not yet established or validated internationally. Clinical manifestations occur in conditions of stress. At rest, the heart is functionally normal. Hence, Doppler echocardiography at rest is often insufficient to characterize cirrhotic cardiomyopathy.

Keywords

Heart Diseases / complications; Heart Disease / physiopathology; Liver Cirrhosis / complications; Liver Cirrhosis / physiopathology; Echocardiography.

Mailing address: Odilson Marcos Silvestre •

Rua Oscar Freire, 1.967, apto. 10B, Pinheiros. Postal Code 05409-011, São Paulo – SP – Brazil

E-mail: odilsonsilvestre@yahoo.com.br, odilsonsilvestre@cardiol.br

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Reply

We are thankful to the statements of Silvestre et al¹, with which we agree and have mentioned in the introduction to our manuscript. Recent reviews^{2,3} that address this issue describe a number of abnormalities on Doppler echocardiography at rest, characterizing cirrhotic cardiomyopathy: E/A ratio < 1; E wave deceleration time > 200 ms, isovolumic relaxation time > 80ms, increased left atrial volume, decreased left

ventricular contractility, presence of wall hypokinesia and/or akinesia, increased myocardial mass, lowered ejection fraction (< 55%), among others.

Sincerely,

Vitor Gomes Mota
Brivaldo Markman Filho

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