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Design and validation of an Index to predict the development of Hypertensive Cardiopathy

Introduction: The high morbidity and mortality by hypertensive cardiopathy demand the construction and validation of tools to stratify the risk of developing this condition.

Objective: To design and validate an index, based on risk factors, that permits to predict the development of hypertensive cardiopathy in patients with a diagnosis of essential arterial hypertension.

Methods: A prospective cohort study was done in hypertensive patients assisted at the specialized arterial hypertension physicians' office of the "Carlos Manuel de Céspedes" Specialty Policlinic attached to the General University Hospital, Bayamo Municipality, Granma Province, Cuba from January 1st, 2010 to December 31, 2016. Internal and external validity and the internal consistency of the index were determined.

Results: The index sensitivity was of 97, 20 (IC: 93, 93-94.09) and specificity of 65, 38 (IC: 76, 25-76, 20). Both the index discriminative capacity (area under the ROC curve= 0,944; interval of confidence: 0.932-0.956; p<0.0005) and calibration (p=0.751) were adequate.

Conclusions: The present study proposes an index to predict the risk of developing hypertensive cardiopathy, with adequate discriminative capacity and calibration (external validity). The index can be used as a tool of clinical and epidemiological surveillance since it permits to identify subjects with greater probability of developing the condition and to stratify the risk.

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Electrocardiographic criteria in founder mutations related to Arrhythmogenic cardiomyopathy

Founder mutations are rare causes in arrhythmogenic cardiomyopathy including TMEM43 und phospholamban mutations. The incidence is approximately 1%. P.S358L TMEM43 mutations cause aggressive, in most cases biventricular arrhythmogenic cardiomyopathy [1], with the necessity of primary prophylactic ICD implantation in men and in women>30 years for sudden cardiac death prevention.

Short Communication

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Heart disease new hypothesis: under endogenous toxicological aspect

In order to suggest new pathogenetic hypothesis in some heart disease we think is interesting to observe some biomedical literature: Can we think some endogenus toxicologic movens in some heart pathologies?