



2019- A-39- SCCT

Abstract 22: Probability Of Finding Significant Obstructive Coronary Artery Disease By Coronary Ct Angiography In Male vs Female Patients With Hyperlipidemia In A Large, Multi-physician Outpatient Cardiology Private Practice



Ronak Agarwal (High School)¹, Yesh Dhruva (High School)¹, Saachi Singal (High School)², Ayushi Agarwal (High School)¹, Mayank Agarwal (M.D)³, Rajiv Agarwal (M.D)⁴

¹ Clements High School, SUGAR LAND, TX, USA

² Katy Taylor High School, Katy, TX, USA

³ UTMB Medical School, Galveston, TX, USA

⁴ Vital Heart & Vein, Humble, TX, USA

Introduction: Cardiovascular (CV) disease remains the most common cause of mortality in United States of America. Hyperlipidemia is associated with increased risk of coronary artery disease (CAD) in the general population. It is unclear in patients with hyperlipidemia if gender plays a significant role in severity of CAD. Majority of CAD data is from academic institutions even though significant number of patients see cardiologists in the private setting. We analyzed coronary computed tomographic angiogram (CCTA) results in males and females with hyperlipidemia from an outpatient cardiology practice to determine probability of obstructive CAD.

Methods: We analyzed 345 consecutive ambulatory outpatients with hyperlipidemia ages 65 and below that underwent CCTA from

January 2015 to December 2016 for evaluation of CAD using a 64 detector CTA. Patients were broken down based on their gender (male or female). Coronary artery stenoses were assigned: none (0%), non-obstructive (< 50%), and obstructive (> 50%).

Results: As noted in the table, males were more likely than females to have non-obstructive CAD (56.2% vs 33.5%) and obstructive CAD (8.3% vs 1.7%). Overall, males were almost twice as likely (64.5% vs 35.2%) to have any degree of CAD (> 0% stenosis).

Conclusions: In patients with hyperlipidemia undergoing CCTA, males were significantly more likely to have non-obstructive CAD, obstructive CAD, and any degree of CAD.

	0%	<50%	>50%	>0%	Total
Male	60 (35.5%)	95 (56.2%)	14 (8.3%)	109 (64.5%)	169 (49%)
Female	114 (64.8%)	59 (33.5%)	3 (1.7%)	62 (35.2%)	176 (51%)
Total	174 (50.4%)	154 (44.6%)	17 (5%)	171 (49.6%)	345

<https://doi.org/10.1016/j.jcct.2018.12.026>

Available online 05 January 2019

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