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Evaluation of salivary cardiac troponin-1 as potential marker for detection of acute myocardial infarction

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Introduction: Serum cardiac troponin-1 is the important marker in diagnosis of myocardial infarction as it offers wide range of diagnostic window to detect myocardial injury. Saliva, a plasma ultra-filtrate, can substitute serum for detection of troponin-1 as saliva may produce more accurate, inexpensive and convenient results.

Objective: To estimate and co-relate the level of cardiac troponin-1 (cTnI) in unstimulated whole saliva and serum in acute MI patients and control group.

Materials & Method: Total of 60 individuals was enrolled and equally divided in to study (Group-1) and control group (Group-2). Informed consent form was taken from all the subjects. Saliva and blood samples were obtained from patients with ECG features suggestive of acute MI within 24 hours. Serum and saliva samples were processed further for cTnI. The results obtained were then statistically analyzed.

Result: The mean cTnI level in serum of group-1 and group-2 was found to be 4.27 ± 1.79 mg/l and 0.158 ± 0.05 mg/l, respectively. The mean cTnI level in saliva of group-1 and group-2 was found to be 0.67 ± 0.10 ng/l and 0.160 ± 0.05 ng/l, respectively. Serum levels of cTnI were directly associated with saliva levels and demonstrated a highly significant strong positive relation.

Conclusion: The saliva levels of cTnI were directly associated with serum levels demonstrating a highly significant strong positive relation and confirms the diagnostic ability of saliva for detection of cTnI.

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