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The prevalence among heart failure patients and clinical profiles of patients with cor pulmonale at a tertiary center in Ethiopia

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Background: Heart failure is a complex clinical syndrome resulting from structural and functional impairment of ventricular filling or ejection of blood. Cor pulmonale is one type of this clinical syndrome. There are only a few published studies on cor pulmonale from Ethiopia. The objective of this study was to determine the prevalence among patients with heart failure and the clinical and laboratory profiles of patients with cor pulmonale who had followed up at one of the tertiary hospitals in Ethiopia Methods: A hospital-based cross-sectional study was conducted at Felege Hiwot Referral Hospital from December 2018 to April 2019. A single population proportion formula was used to determine the number of heart failure patients that had to be included in the study to determine the prevalence of cor pulmonale. The medical records of cor pulmonale patients among the sample heart failure patients were then retrieved and data was extracted using a structured checklist. Data was entered into, cleaned, and analyzed using IBM.SPSS version 23.0. Descriptive statistics were used to report the findings. Results: Eight percent (35) of patients with heart failure had cor pulmonale. Fifty-four point three percent (19) of the patients with cor pulmonale were males and 45.7 % (16) were females. The median age of patients with cor pulmonale was 55 years. The commonest clinical features were cough and dyspnea (91.4 % and 97.1 % respectively). All patients had right ventricular dilation on echocardiography. Pulmonary Complications post-treatment for tuberculosis were the leading causes followed by interstitial lung disease. There was no identified respiratory disease in 40% of patients with cor pulmonale Conclusion: Cor pulmonale accounted for less than 10 % of heart failure cases. Complications post-pulmonary tuberculosis was found to be the leading respiratory conditions underlying the cor pulmonale. Programs on prevention, early detection, and treatment of pulmonary tuberculosis must be strengthened.

Biography

Dr. Habtamu Bayih is originally from Ethiopia where he obtained his medical degree at University of Gondar in Ethiopia. His residency was at Addis Ababa University and he completed his training with fellowship at Naryana Cardiac Institute in India in cardiology. Dr. Habtamu has ten years of experience in the field of internal medicine and cardiology and is a head of cardiac unit at Bahir Dar University, college of medicine and health sciences.

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