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T wave alternans in clinical practice- A single center experience

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Background: T wave alternans (TWA) was evaluated in several trials as a tool for risk stratification of patients with left ventricle dysfunction.

Methods: Analysis of 80 consecutive patients who underwent TWA for risk stratification of SCD. We compared the outcome of patients with negative TWA vs. patients with non-negative alternans.

Results: 39 pts. had a positive TWA result. Patients with positive TWA were older, had more often CHD, their LV function was poorer and they had more frequently coronary risk factors. The positive TWA cohort had an ICD implant more commonly than the negative TWA group. One year mortality rates did not differ between TWA positive vs. TWA negative patients.

Conclusions: In the present study TWA positive pts had more commonly ICD implantations as a consequence of their test result, but their mortality risk did not differ from pts with negative TWA test.