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In abstract 112-06 from the ASNC2021 Annual Scientific Sessions, the co-authors were not included. Please see corrected abstract below in its entirety.

ASSESSMENT OF STRESS-INDUCED LEFT VENTRICULAR DIASTOLIC DYSFUNCTION USING GSPECT AMONG OBESE FILIPINOS WITH NORMAL MYOCARDIAL PERFUSION IMAGING

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Introduction: LV diastolic dysfunction is prevalent among obese but remained undiagnosed with echocardiography alone. Evaluation of LVDD using GSPECT is rarely done. Studies reported that diastolic dysfunction evaluated by echocardiography correlated with LVDD by GSPECT. Addition of cardiac stress may unmask diastolic abnormalities that are not evident at rest. Early diagnosis and management of LVDD may prevent the development of overt heart failure.

Methods: 160 Filipino patients who underwent one-day rest/stress (treadmill or dipyridamole) 99mTc-sestamibi myocardial perfusion imaging with GSPECT between January 2016 to January 2020 in our institution were included in the study given that they have a normal MPI,

resting systolic and diastolic parameters. Patients with known CAD, hypertension, diabetes, heart failure, pericardial disease and moderate to severe valvular heart disease were excluded. Included patients were grouped into 3 BMI class: Normal weight, overweight and obese. The % rest-to-stress difference of the G-SPECT diastolic parameters (PFR, MFR/3, TTPF) was determined and compared among groups and among different stressors (Treadmill exercise vs. Dipyridamole). Data were analyzed using ANOVA and Kruskal-Wallis test. Tukey test and Dunn's test were used for post-hoc analysis.

Results: Findings showed no significant differences in PFR and TTPF among the BMI classes at baseline and after stress test. The resting MFR/3 was significantly lower among obese patients compared to the other two groups ($P = .027$). The % rest-to-stress decrease of MFR/3 was lower in normal BMI patients than in overweight or obese patients ($P = .009$).

Conclusions: No significant differences in PFR and TTPF among the BMI classes at baseline and after stress test. The resting MFR/3 was significantly lower among obese patients compared to the other two groups ($P = .027$). The % rest-to-stress decrease of MFR/3 was lower in normal BMI patients than in overweight or obese patients ($P = .009$).

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