

A new study shows that even micro heart attacks are a major problem

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Researchers at the Minneapolis Heart Institute at Abbott Northwestern Hospital have found that cardiac magnetic resonance (CMR) imaging may help doctors better identify which patients with mild heart disease are likely to develop more serious heart problems long term. CMR imaging provides supporting information to guide treatment decisions and help doctors provide targeted care for patients at highest risk. The research, led by Minneapolis Heart Institute Foundation Research Fellow Naohiko Nemoto, MD, will be presented at the American College of Cardiology (ACC) meeting in Washington, DC today.

Provided by Minneapolis Heart Institute Foundation

To understand the long-term impact of a mild [heart attack](#), researchers retrospectively analyzed CMR imaging results for 179 patients who were admitted with symptoms of [heart disease](#), who tested positive for elevated troponin (a key indicator of damage to the heart muscle), and who had partial blockage of one or more arteries in the heart (as shown by invasive angiography). The patients were divided into two groups based on the CMR analysis: those who had experienced a mild myocardial infarction, or heart attack (the MI group) and those who had not (the non-MI group).

The results showed that patients who had a mild heart attack (the MI group) were nearly three times as likely to experience a major cardiac event (like a heart attack, bypass surgery, or stroke) over the long-term as those in the non-MI group.

Additionally, the most frequent cause of death for individuals in the MI group was heart-related. "Using CMR acutely, when an individual is first admitted with [heart-attack](#)-like symptoms, provides unique information that can guide [treatment decisions](#) and aid in prognosis," states Robert Schwartz, MD, FACC, FAHA, who will present the team's research at ACC. "Our research shows that secondary prevention is vitally important for [patients](#) who've experienced mild heart attacks, as determined by acute CMR analysis."

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