

A novel study of the trends, triggering factors and outcomes of Takotsubo Cardiomyopathy in Malta.

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AIM

To assess demographics, triggering factors, and outcomes of all consecutive patients admitted with Takotsubo Cardiomyopathy (TTC) in a tertiary centre-setting in Malta.

Methodology

A retrospective analysis of all consecutive patients diagnosed with TTC between 2012-2018.

Results

57 patients were diagnosed with TTC to date. The majority were female (n=51, 89%) and mean age at presentation was 66 ± 13 . An emotional trigger was detected in 32%, while a physical trigger (including surgery, a medical event, a neurological event, and physical exertion) was found in 26%. In 42% no trigger was identified. During a mean follow-up of 3.5 years, all patients in the emotional trigger group were still alive, while the physical trigger group had a 13% all-cause mortality rate (RR 4.2; 95% CI; 0.2176 to 81.4737; $p = 0.3416$).

Discussion

Data from the recent international InterTAK registry suggests that long-term outcome of TTC depends on the trigger. TTC with a physical trigger carries a poor prognosis with higher long-term mortality than acute coronary syndrome, while in emotionally-triggered TTC prognosis is good. TTC in Malta affects women of post-menopausal age predominantly. Although statistical significance could not be proven due to small population size, patients with a physical trigger appear to have worse outcomes.

Conclusion

A careful history to elicit the trigger of TTC is important to predict outcomes and implement more careful follow-up of patients at higher risk.