

The significance of epicardial adipose tissue in different phenotypes and stages of heart failure

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Goal: To systematically investigate the role of epicardial adipose tissue (EAT) in heart failure (HF) according to key clinical data and to assess the applicability of available data in routine work.

Material and Methods: conducted search of all relevant scientific databases to identify and analyze relevant information that were published on the highlighted topic during the past 5 years.

Results: The evaluation of all available data analyzing the impact of echocardiographic EAT on the clinical course and prognosis HF with special emphasis on the type of HF phenotype. The cardiovascular hemodynamics and patient metabolic profile were also taken into consideration if available in the current source.

Conclusion: According to the available data, in patients with heart failure and preserved left ventricular systolic function (HFpEF), the presence of significant accumulations of EAT is associated with a less favorable circulatory / hemodynamic, but also metabolic status and affects survival. Conversely, lower amounts of EAT are associated with an increased risk of adverse outcomes in patients with heart failure and reduced left ventricular systolic function (HFrEF). Although the causes of these facts are still at the level of pathophysiological hypotheses and require further research, the protective and good prognostic value of EAT in HFrEF, which represents the opposite clinical meaning in patients with HFpEF, are a significant contribution to the knowledge of modern science on HF that have a direct impact on clinical practice^{1,2}.

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LITERATURE

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