

Although limited by its small sample size, this study suggests that ECHO should be used for all patients who are suspected of having LVH. The low pretest probability of LVH in this cohort, largely comprising women in their mid-30s, may have impacted test performance. Larger studies that involve a broader group of patients are recommended.

Further reading: Bacchus R et al. *Vasc Health Risk Manag* 2011;7:327–332.

Symptom Recognition of AMI Among Patients Attending Primary Care Facilities in North-Central Trinidad

Written by Maria Vinall

Educating the public about acute myocardial infarction (AMI) may be an important tool for reducing risks of morbidity and mortality. In a study that was presented by S. Bhola, University of West Indies, St. Augustine, Trinidad and Tobago, over 75% of patients reported never discussing symptoms of AMI with a health care professional.

This prospective observational study was designed to assess the level of knowledge that patients have concerning AMI and the percentage who are able to recognize the symptoms of AMI. Patients (n=200) aged ≥40 years with 2 or more coronary artery disease (CAD) risk factors and an increased 10-year risk for CAD were randomy selected for the study. The majority of the participants was aged between 51 and 60 years (75%), female (59%), and of East Indian ethnic background. The questionnaire assessed patients' knowledge of AMI symptoms, the presence of risk factors for CAD, and sociodemographic characteristics.

Patients with a previous history of AMI obtained better knowledge scores in comparison with those with no prior history. However, these patients were still unable to fully recognize all of the symptoms of an AMI, as the majority only obtained a good knowledge score compared with the well informed. Shortness of breath (78%), severe chest pain (71.5%), and diaphoresis (69.0%) were the most commonly identified symptoms. A previous discussion with a health care professional significantly improved scores (p=0.011), as did a family history of AMI (p<0.05).

As the longest time interval delay is from the time of symptom recognition to the decision to seek treatment, it would be beneficial to implement strategies to educate the public concerning AMI symptoms and the importance of seeking immediate medical attention once the symptoms are identified.

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