

中文題目：結合低的踝臂血壓比和高的兩側踝臂血壓比之差，來預測病人的死亡率

英文題目：Combination of low ankle-brachial index and high ankle-brachial index difference for mortality prediction

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Background: Low ankle-brachial index (ABI) and high ABI difference (ABID) were associated with poor prognosis. However, there was no study to assess the ability of concurrent consideration of low ABI and high ABID in survival prediction. We created an ABI score, by assigning 1 point for ABI < 0.9 and 1 point for ABID ≥ 0.17, and aimed to examine the ability of ABI score in predicting mortality.

Methods: We included 941 patients arranged for echocardiographic examinations. The ABI was measured using an ABI-form device. ABID was calculated as |right ABI-left ABI|.

Results: Among 941 subjects, the prevalence of ABI < 0.9 and ABID ≥ 0.17 were 6.1% and 6.8%, respectively. Median follow-up to mortality was 93 months. There were 87 cardiovascular and 228 overall deaths. All ABI-related parameters, including ABI, ABID, ABI < 0.9, ABID ≥ 0.17, and ABI score, were significantly associated with overall and cardiovascular mortality ($P \leq 0.001$). In direct comparison of multivariable model, basic model + ABI score was the best one in overall and cardiovascular mortality prediction among the 5 ABI-related multivariable models ($P \leq 0.029$).

Conclusion: ABI score could significantly predict overall and cardiovascular mortality after the multivariable analysis. Further, in direct comparison of multivariable model, basic model + ABI score was the best one in overall and cardiovascular mortality prediction among the 5 ABI-related multivariable models. Hence, ABI score, combination of ABI < 0.9 and ABID ≥ 0.17, was deserved to be calculated for better mortality prediction.