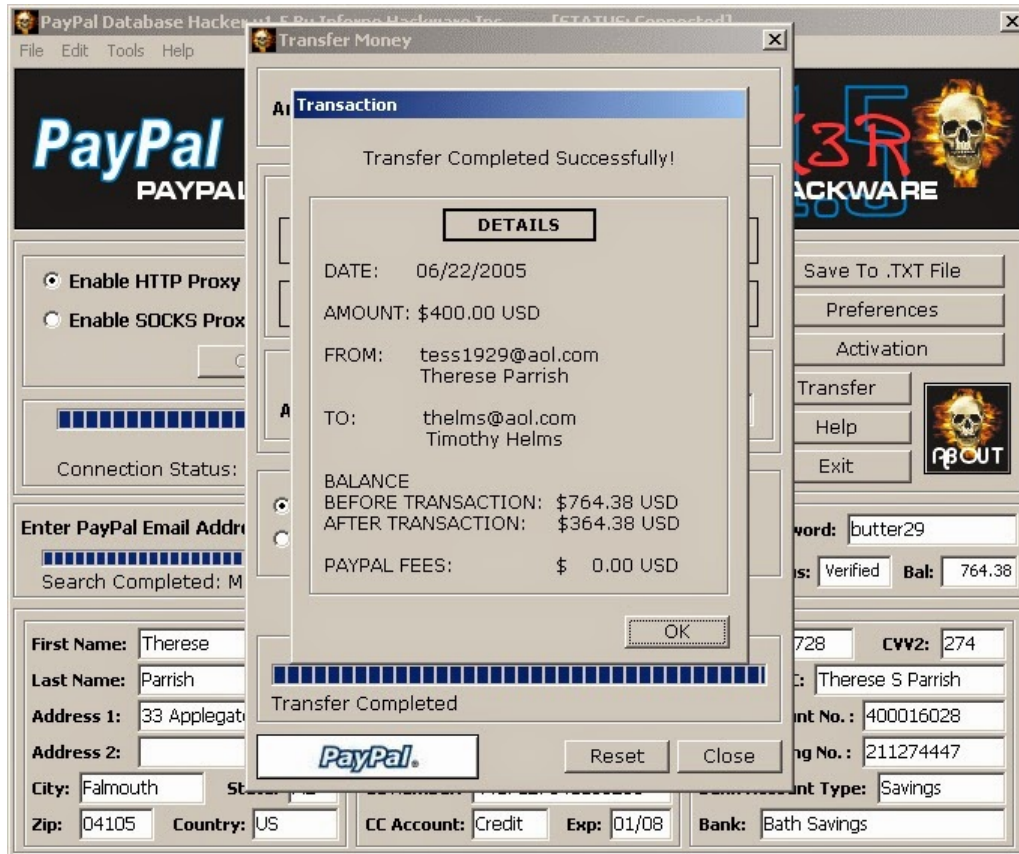


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Prognostic significance of B-type natriuretic peptide as a marker for prognosis in patients with chronic heart failure: role of valvular heart disease. Although B-type natriuretic peptide (BNP) is elevated in patients with chronic heart failure (CHF) and has been used as a marker for prognosis, the characteristics and prognosis of patients with CHF with valvular disease remain unclear. The aim of this study was to assess the prognostic significance of BNP in patients with CHF. In particular, the role of valvular heart disease was also analyzed. This study involved 167 patients with CHF who had a mean age of 68.2 +/- 10.4 years (mean follow-up period, 27.5 +/- 20.8 months). Patients with ventricular arrhythmias, pulmonary disease, and renal dysfunction were excluded. All patients had been given guideline-based medical therapy. The study included 91 males and 76 females. One hundred patients (60.2%) had mitral valve disease, 53 (31.1%) had aortic valve disease, and 14 (8.1%) had tricuspid valve disease. The survival rate of the 167 patients was 94.6% at 1 year and 70.3% at 3 years. Prognostic significance was assessed by the Kaplan-Meier method and Cox's proportional hazards model. The cumulative survival rate of the 167 patients was 85.3% at 1 year and 64.3% at 3 years. The prognostic significance of BNP in the 167 patients was analyzed using the Cox's proportional hazards model. The hazard ratio of BNP at 1 year was 1.07 (95% confidence interval [CI], 1.03 to 1.11) and that at 3 years was 1.12 (95% CI, 1.05 to 1.20). Although the hazard ratios of BNP increased with the duration of follow-up in the logistic regression model, B 82157476af

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