

Letter to the Editor

Mitral annular tissue velocity in the diagnosis of coronary artery disease

Dear Editor,

We have read the article of Sun et al¹, entitled "Mitral annular tissue velocity in the diagnosis of coronary artery disease" with great interest. Authors aimed to determine the effect of coronary artery lesion on left ventricular function using tissue doppler imaging, and to discuss the role of mitral annular tissue velocity in the diagnosis of coronary heart disease (CHD). They reported that early diastolic mitral flow velocity/mean early diastolic velocity of the septal and lateral mitral annulus (E/Ea) is the optimal indicator of whether patients with suspected CHD have coronary lesions and impaired diastolic function. These findings provide an effective method to assess cardiac function and diagnose CHD.

We have favoured a few contributions about the methodology of the study: First, it would have been better to test for interobserver and intraobserver variability. Second, when tissue doppler measurements were made with pulse wave velocity, PW sample size/gate size should have been 5 mm; because sample size measurements are affected when it is measured with 3 mm, as normal PW. It could have been better to mention about that in methodology.

Last of all, we think that post-hoc test for multiple comparisons after variance analysis in statistical analysis, would make the study more noteworthy.

Conflict of Interest

The Authors declare that there are no conflicts of interest.

References

- 1) SUN L, MA C, LIU S, ZOU L, JIA D. Mitral annular tissue velocity in the diagnosis of coronary artery disease. Eur Rev Med Pharmacol Sci 2014; 18: 3754-3760.

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