**POSITIVE STRESS ECHO AND NORMAL CORONARY ARTERIES: HOW OFTEN AND WHY?**

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*Objective*: To conduct long-term follow-up of patients with a positive result of exercise echo and the absence of significant coronary artery stenosis.

*Methods*: We examined 97 patients (41 men and 56 women) (63.3±8.9 years) with a positive exercise echo and the absence of significant stenosis in coronary arteries. Re-examination was carried out after 1-10 years (±6) and the patients were divided into two groups. In the first group (17 patients), the second test was again positive. 10 patients had repeated coronary angiography: 4 patients revealed significant stenosis and revascularization was performed (two with use of intravascular ultrasound). One patient presented with insignificant stenosis (less than 50%) and 3 patients had no pathology in coronary arteries. One patient was found to have cardiac X syndrome, and one more patient was found to have cardiomyopathy. In the second group (80 patients), a second test was negative. Patients were divided into two groups: patients with exercise-induced hypertension (57) and patients without development of hypertension during exercise (23 patients). The correction of antihypertensive medication before the second test was performed.

*Conclusion*: In 71% of patients, the false-positive test was caused by exercise-induced hypertension. With antihypertensive therapy the percentage of false-positive tests decreased to 44%. Thus, a positive stress echocardiography in a patient with exercise-induced hypertension in the absence of other high-risk signs appears to warrant expedient antihypertensive therapy follow by repeated examination.