**EFFECTS OF EARLY STAGE DIASTOLIC DYSFUNCTION ON FUNCTIONAL CAPACITY**

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Objective: To determine the correlation between functional capacity, body mass index (BMI), age, sex, and impaired relaxation of the myocardium in patients with preserved let ventricular ejection fraction (EF>50%).

Background: Dyspnea on exertion is a common complaint among patients presenting to health care professionals. There are multiple causes for it.

Methods: We reviewed the data of patients with impaired relaxation and preserved EF who were referred to our echo lab. The patients’ BMI, age, NYHA level, COPD status, and hemoglobin were determined. Patients with history of COPD and anemia were excluded. The data for a total of 659 patients with impaired relaxation was further analyzed. There were a total of 27% with normal BMI, 28% overweight, 20% mildly obese, 17% moderately obese and 8% morbidly obese. 60% of the total patients were classified as NYHA functional class I, and 40% were symptomatic as class II to IV NYHA. There were 51% males and 49% females. Seventy percent of the patients less than 65 years of age were class I NYHA and 30% of patients above the age of 65 were NYHA class I.

Conclusion: Impaired diastolic relaxation is frequently correlated with heart failure symptoms, especially in elderly. These patients should be managed as preserved EF Heart Failure patients. Impaired relaxation in elderly should not be read as "normal for age".