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Clinical value of BNP as an independent predictor of mortality following heart surgery

Valor clínico do BNP como um preditor independente de mortalidade após cirurgia cardíaca

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Detection and characterization of mortality predictors is becoming an interesting approach in the field of cardiovascular surgery, particularly in valve and CABG procedures. Yet there is a paucity of trials in order to obtain precise data on this topic using statistic criteria. In the last decades, many cardiologists have turned attention to underlying role of inflammation in heart diseases and different types of heart operation. The key point raised by these experts is that main expression from inflammatory cardiovascular process can be translated into serologic appearance of some markers^[1-3].

From the publication “Predictors of mortality in cardiac surgery: B-type natriuretic peptide” by Murad Junior et al.^[4], the first observation can be drawn is epidemiologic quality of retrospective study of valve and CABG patients. Undoubtedly main step for identifying a mortality predictor using statistical analysis is to know how patients were selected and included in the study.

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The second and most remarkable observation can be drawn from publication by Murad Junior et al.^[4] is the meticulous view regarding preoperative role of BNP as a mortality predictor in the setting of valve and CABG operations. Many authors have advocated that cardiac diseases have some inflammatory burden preoperatively and, on account of it, postoperative time becomes a particular moment for so many complications and deleterious events^[5-7].

This study provides a very elegant representation of preoperative BNP values and its relationship with 30-day mortality. Thus, publication by Murad et al.^[4] is a cornerstone reference for Brazilian cardiologic community in an attempt to preoperatively include BNP as prognostic marker in valve and CABG operations.

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