Obesity and Long-Term Prognosis in Heart Failure: the Paradox Persists

To the Editor,

Obesity is considered a major risk factor for cardiovascular disease and heart failure. However, several studies suggest that, in the medium-term, there is a paradoxical relationship between obesity and heart failure prognosis, whereby the prognosis for overweight or obese heart failure patients is better than that for normal weight patients. As previously published, we observed a linear relationship between body mass index (BMI) and prognosis at 2 years in patients with heart failure. Mean follow-up in studies published to date is 2.7 years, though one might speculate that the longer-term prognosis in obese patients would be similar to or perhaps even worse than that for normal weight patients. To test this hypothesis, we analyzed the relationship between BMI and mortality over a minimum follow-up period of 5 (5 to 8.4) years from the first visit in a population of 504 heart failure patients. The study population included patients with different etiologies treated in a multidisciplinary heart failure unit. Mean age was 68 years (interquartile range, 58-74) and 73% were male. The main etiology for heart failure was ischemic heart disease (59%) and ejection fraction (EF) of 30% (23%-39.7%). Most patients were in functional class II (51%) or III (42%) of the New York Heart Association (NYHA). Patients were stratified into four groups based on BMI (World Health Organization classification, 1999): underweight (BMI <20.5), normal weight (BMI 20.5-<25.5), overweight (BMI 25.5-<30), and obese (BMI ≥30). The median length of follow-up was 68.4 [26.5 to 89.1] months. Mortality varied significantly between groups (linear-by-linear χ², P=.001): in underweight patients (n=32) it was 62.5%; in normal weight patients (n=141), 46.8%; in overweight patients (n=174), 42.5%, and; in obese patients (n=157), 33.7%. The survival curves for the
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The relationship between obesity and prognosis of patients with this condition remains linear and that the paradox is maintained over the long-term.

Elisabet Zamora, Josep Lupón, Agustín Urrutia, and Antoni Bayes-Genis

Unidad de Insuficiencia Cardiaca, Hospital Universitario Germans Trias i Pujol, Badalona, Barcelona, Spain

References


