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# Abstracts from the World Congress of Cardiology/ Brazilian Congress of Cardiology 2022

ABSTRACT

#### THE EDITORIAL TEAM (ON BEHALF OF THE WORLD HEART FEDERATION)

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### ABSTRACT

These are the abstracts from the combined 77<sup>th</sup> Brazilian Congress of Cardiology, together with the World Congress of Cardiology, held in October 2022. From 1950 to today, the World Heart Federation's World Congress of Cardiology (WCC) has been a key event on the cardiovascular calendar, offering a global perspective on cardiovascular health and bringing together thousands of cardiology professionals from all over the world with one common goal: to reduce the global burden of cardiovascular disease and help people live longer, healthier lives.

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### CARDIOPULMONARY EXERCISE TEST VARIABLES AND ITS ASSOCIATION WITH QUALITY OF LIFE IN PATIENTS WITH CHRONIC CHAGAS CARDIOMYOPATHY: RESULTS FROM THE PEACH STUDY

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**Introduction:** The association between functional capacity and quality of life (QoL) in individuals with chronic Chagas cardiomyopathy (CCC) is still poorly investigated, with the few studies including indirect measures of functional capacity, limiting the validity and the interpretation of the results.

**Objective:** The present study aimed to evaluate the association between functional capacity (quantified by cardiopulmonary exercise test [CPET]) and QoL in individuals with CCC.

**Methods:** A cross-sectional analysis using baseline data from PEACH study, a randomized clinical trial that evaluated the effects of exercise training in patients with CCC, was performed. QoL was assessed using the SF-36 questionnaire. Sociodemographic, anthropometric, clinical, cardiac function and maximal progressive CPET variables were retrieved from PEACH study dataset. Generalized linear models adjusted for age, sex, and left ventricular ejection fraction were performed to evaluate the association between CPET variables and QoL.

**Results:** After adjustments for potential confounders, VO2peak and VO2AT were both positively associated with physical functioning and physical component summary (PCS). Double product was positively associated with physical functioning, general health perceptions, and PCS, whilst heart rate recovery <12bpm at the first minute (HRR) was negatively associated with physical functioning, role limitations due to physical problems, bodily pain, and PCS. VE/VCO2 slope presented a negative association with all mental scales of SF-36: vitality, social functioning, role limitations due to emotional problems, mental health, and mental component summary. HRR <12bpm was negatively associated with vitality and mental health. Double product was positively associated with vitality. The CPET variables that most explained the QoL variation in the adjusted models were VO2AT (50% for physical functioning and 36% for PCS), VO2peak (31% for physical functioning and 21% for PCS), VE/VCO2 slope (45% for mental health and 31% for mental component summary), and HRR <12 bpm (20% for vitality).

**Conclusions:** The association between CPET variables and QoL reinforces the importance of CPET inclusion for a more comprehensive evaluation of individuals with CCC. Intervention strategies aiming to improve functional capacity may also promote additional benefits on QoL and should be incorporated as a treatment strategy for patients with CCC.