What Is the Diagnostic Performance of Parameters Used for Pulmonary Hypertension Screening in Patients With Systemic Sclerosis?

STUDY DESIGN

- 355 patients with systemic sclerosis (SSc) from the EUSTAR database
  - 109 with mean pulmonary arterial pressure (mPAP) ≤ 20 mm Hg
  - **51 with mPAP 21-24 mm Hg**
  - 195 with mPAP ≥ 25 mm Hg

- Sensitivity, specificity, positive predictive value (PPV), negative predictive value (NPV), and accuracy were **calculated for those with mPAP 21-24 mm Hg** by right heart catheterization

RESULTS

	Sensitivity	Specificity	PPV	NPV	Accuracy
sPAP > 36 mm Hg	41.2%	62.4%	33.9%	69.4%	55.6%
TAPSE/sPAP > 0.55 mm/mm Hg	45.1%	**78.9%**	**50.0%**	75.4%	**68.1%**
D$_{LCO}$ < 80% pred	**88.9%**	18.2%	30.8%	**80.0%**	38.7%
D$_{LCO}$ < 60% pred	61.1%	51.1%	33.8%	76.3%	54.0%
FVC/D$_{LCO}$ ≥ 1.82	36.1%	70.1%	33.3%	72.6%	60.2%
NT-proBNP ≥ 125 pg/mL	59.3%	29.2%	32.0%	56.0%	40.0%
NT-proBNP ≥ 210 pg/mL	51.9%	43.8%	34.1%	61.8%	46.7%
Serum urate ≥ 6 mg/dL	34.6%	72.3%	40.9%	66.7%	58.9%

D$_{LCO}$ <80% of the predicted value identified most of patients with SSc with mPAP 21 to 24 mm Hg, while TAPSE/sPAP ratio had the highest specificity, PPV, and accuracy in detecting patients with SSc with mPAP 21 to 24 mm Hg.