

Heart 2006:92:1434-1440 doi:10.1136/hrt 2005.079764

## Cardiovascular medicine

## Effects of torasemide on cardiac sympathetic nerve activity and left ventricular remodelling in patients with congestive heart failure

S Kasama<sup>1</sup>, T Toyama<sup>1</sup>, T Hatori<sup>1</sup>, H Sumino<sup>1</sup>, H Kumakura<sup>2</sup>, Y Takayama<sup>2</sup>, S Ichikawa<sup>2</sup>, T Suzuki<sup>1</sup>, M Kurabayashi<sup>1</sup>

Author Affiliations

Correspondence to:

Dr Shu Kasama

 $Department \ of \ Cardiovas cular \ Medicine, \ Gunma \ University \ School \ of \ Medicine, \ 3-39-15, \ Showa-machi, \ Maebashi, \ Gunma \ 371-0034, \ Japan;$ 

s-kasama@bay.wind.ne.jp

Accepted 24 March 2006

Published Online First 18 April 2006

## **Abstract**

**Objective:** To determine the effect of torasemide, a loop diuretic with antialdosteronergic properties, compared with furosemide on cardiac sympathetic nerve activity in patients with congestive heart failure (CHF).

**Methods:** 40 patients with non-ischaemic CHF (left ventricular ejection fraction (LVEF) < 45%) were randomly assigned to torasemide (4–8 mg/day; n = 20) or furosemide (20–40 mg/day; n = 20). All patients were also treated with angiotensin-converting enzyme inhibitor. The delayed heart to mediastinum count (H/M) ratio, delayed total defect score (TDS) and washout rate were determined from iodine-123 meta-iodobenzylguanidine measured before and 6 months after treatment. Left ventricular end diastolic volume (LVEDV), left ventricular end systolic volume (LVESV) and LVEF were also determined by echocardiography.

Results: After treatment, in patients receiving torasemide, TDS decreased from 44 (8) to 36 (8) (p < 0.001), H/M ratio increased from 1.61 (0.19) to 1.77 (0.24) (p < 0.001), and washout rate decreased from 52 (12)% to 41 (14)% (p = 0.001). In addition, LVEDV decreased from 173 (22) ml to 147 (30) ml (p < 0.001) and LVESV decreased from 117 (19) ml to 95(24) ml (p < 0.001). Although LVEF tended to increase, the change was not significant (from 31 (7)% to 34 (7)%, NS). Conversely, these parameters did not change significantly in patients receiving furosemide. Moreover, percentage change of TDS was significantly correlated with percentage change of LVEDV (r = 0.473, p < 0.05) and of LVESV (r = 0.579, p < 0.01) after torasemide treatment.

Conclusion: These findings indicate that torasemide treatment can ameliorate cardiac sympathetic nerve activity and left ventricular remodelling in patients with CHF.

## Articles citing this article

A Comprehensive Review of the Loop Diuretics: Should Furosemide Be First Line?

The Annals of Pharmacotherapy 2009;43:1836-1847

[Abstract] [Full text] [PDF]

Prognostic Value of Serial Cardiac 123I-MIBG Imaging in Patients with Stabilized Chronic Heart Failure and Reduced Left Ventricular Ejection

JNM 2008;49:907-914

[Abstract] [Full text] [PDF]

Additive Effects of Spironolactone and Candesartan on Cardiac Sympathetic Nerve Activity and Left Ventricular Remodeling in Patients with Congestive Heart Failure

JNM 2007;48:1993-2000

[Abstract] [Full text] [PDF]

1 of 1 09/11/2010 6:10 PM