

## 如何在糖尿病病人精準應用心血管診斷檢查？

How to use cardiovascular examinations precisely in diabetic patients

田凱仁醫師

奇美醫院內分泌新陳代謝科

DM is becoming increasingly widespread, and CAD often coexists with DM. There is an increasing body of literature to support the use of stress testing, particularly stress imaging testing, in diabetic patients for both diagnostic and prognostic purposes. Many questions remain unanswered, and the issue of verification bias continues to be a confounding problem that must be considered when one interprets the literature. Although exercise ECG testing remains a well-established, inexpensive test, it has limited diagnostic power, and much of its prognostic power lies beyond the ST segment. The parameter such as cardiorespiratory fitness appears to offer important information, particularly in diabetic patients with autonomic dysfunction. There is presently inadequate evidence to recommend routine screening of asymptomatic diabetic patients with an exercise ECG test.

Among diabetic patients with known or suspected CAD, there is ample evidence to support the use of stress imaging studies, particularly stress nuclear testing, for their diagnostic and prognostic power. Evidence of MI or inducible ischemia appears to predict an increased risk of future cardiovascular events. Studies consistently demonstrate that diabetic patients who are unable to perform an exercise test or who have a poor exercise capacity have a worse prognosis.