

Effect of Taurine on Diastolic Function of the Left Ventricular Myocardium in Patients with Ischemic Disease Complicated by Chronic Heart Failure

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ABSTRACT

Objective: This study investigates the potential therapeutic effect of taurine supplementation on the diastolic function of the left ventricular myocardium in patients diagnosed with ischemic heart disease complicated by chronic heart failure (CHF). The primary objective is to assess whether taurine, a naturally occurring amino acid with known cardiovascular benefits, can positively influence diastolic function in this specific patient population. **Methods:** A randomized, double-blind, placebo-controlled clinical trial was conducted to evaluate the impact of taurine supplementation on diastolic function. Patients with ischemic heart disease and chronic heart failure were enrolled, and baseline echocardiographic assessments of left ventricular diastolic function were performed. Participants were then randomly assigned to either the taurine supplementation group or the placebo group. The intervention period lasted for a predetermined duration, and follow-up echocardiograpms were conducted to assess changes in diastolic function.

Results: Preliminary findings suggest that taurine supplementation may have a positive effect on the diastolic function of the left ventricular myocardium in patients with ischemic heart disease complicated by chronic heart failure. Compared to the placebo group, individuals receiving taurine demonstrated improvements in various diastolic function parameters, including E/A ratio and deceleration time.

Conclusion: The results of this study suggest that taurine supplementation may be a promising adjunctive therapy for improving diastolic function in patients with ischemic heart disease and chronic heart failure. Further research with larger sample sizes and longer follow-up periods is warranted to confirm and expand upon these preliminary findings.

Keywords: Ddiastolic function ischemic heart disease, heart failure, Treatment, Taurine.

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