

N-terminal pro brain natriuretic peptide in coronary artery disease



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Dear Editor

We refer to your recently published report entitled *N-terminal pro brain natriuretic peptide in coronary artery disease* [1]. Radwan et al. describe NT-proBNP as a ‘valuable marker for predicting prognosis and severity of coronary artery disease in patients with acute coronary syndrome’ [1]. In fact, the clinical usefulness of NT-proBNP has been widely discussed. Ranjith et al. examine the usefulness of this biomarker and suggest that NT-proBNP ‘should be included in the risk assessment of ACS to provide guidance for further therapeutic strategies’ [2]. Nevertheless, conditions exist that might affect NT-proBNP values, such as underlying renal problems and anemia [3]. In a recent report, the limitation of NT-proBNP is cited for ‘very old people with limiting dyspnea’ [4]. In the report by Radwan et al. further analysis to analyze the effect of

possible underlying comorbidities should be implemented. Further investigation to compare NT-proBNP with other clinical parameters as well as cost effectiveness analysis could also be the basis of future studies.

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