

# AUTONOMIC SYMPTOMS AND ASSOCIATED FACTORS IN PATIENTS WITH CHRONIC HEART FAILURE

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**Objective:** Autonomic disorders are prevalent in chronic illness and its symptoms may restrict mental and physical functioning of patients. This study aims to explore the autonomic symptom profile, its associated factors and the impact of these symptoms on the health-related quality of life in CHF. **Methods:** One hundred and twenty-four patients with documented CHF (50 to 86 years), classified into three subgroups according to their left ventricle ejection fraction (40%; 40-49%; >50%) and 124 sex-and age-matched healthy controls without CHF participated in this study. Autonomic symptoms (AS) were assessed using the COMPASS 31 questionnaire with higher scores indicating more symptoms. Fatigue, anxiety and depression were assessed using the CIS and HADS questionnaires, respectively. Health-related quality of life was obtained using the SF 36 questionnaire. **Results:** CHF reported higher median scores for total AS compared to controls [14.9; 6.2 - 25.1 vs 7.3; 0 -18;  $p<0.001$ ], especially for orthostatic intolerance [14.9; 6.2 - 25.1 vs 7.3; 0 -18;  $p<0.001$ ]. Comparisons among the CHF subgroups showed no differences in AS. Patients with high level for fatigue ( $p=0.003$ ), anxiety ( $p=0.031$ ) and depression ( $p=0.008$ ) reported higher scores for AS, compared with patients with low levels. AS had a moderate association with fatigue, anxiety and depression ( $0.343 \leq r \leq 0.420$ ;  $p<0.001$ ). Finally, we found a negative moderate correlation between AS and health-related quality of life ( $r=-0.454$ ,  $p>0.001$ ). **Conclusion:** Autonomic symptoms are present in patients with chronic heart failure, especially for orthostatic intolerance. These symptoms are associated with high levels of fatigue, anxiety and depression and negatively associated with the health-related quality of life of patients.