

# Should Tricuspid Regurgitation Velocity (TRV) Thresholds to Screen for Pulmonary Hypertension Be Revised Given the New Hemodynamic Definition?

## STUDY DESIGN

- Multicenter **retrospective cohort study** of 1,608 patients that underwent both echocardiography and right heart catheterization
- 2 different cohorts used for discovery (n=1,081) and validation (n=527)



## RESULTS

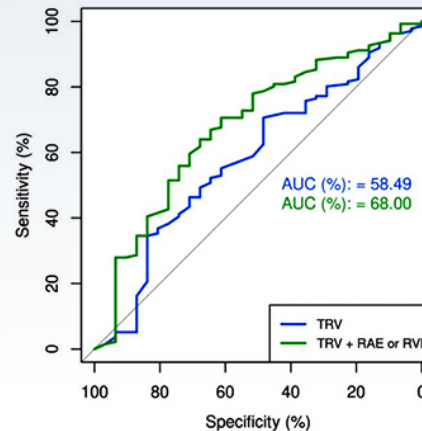
### ORIGINAL THRESHOLD

TRV 3.4m/s      Sensitivity of 78%,  
Specificity of 87%

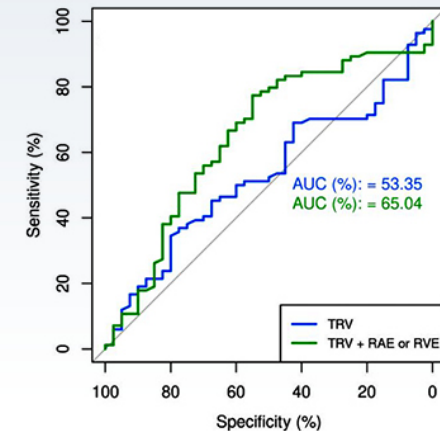
### LOWERED THRESHOLD

TRV 2.7m/s      Sensitivity of 95%, Specificity of 41%  
Negative likelihood ratio of 0.12

Discovery cohort (TRV <2.7 m/s)



Validation cohort (TRV <2.7 m/s)



Using a lower TRV around 2.7m/s for screening of pulmonary hypertension yields a higher sensitivity than the previous value, and right heart chamber measurements improved diagnostic yield.