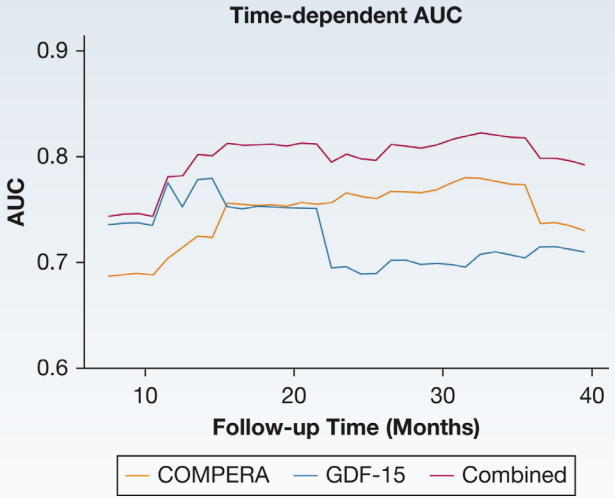
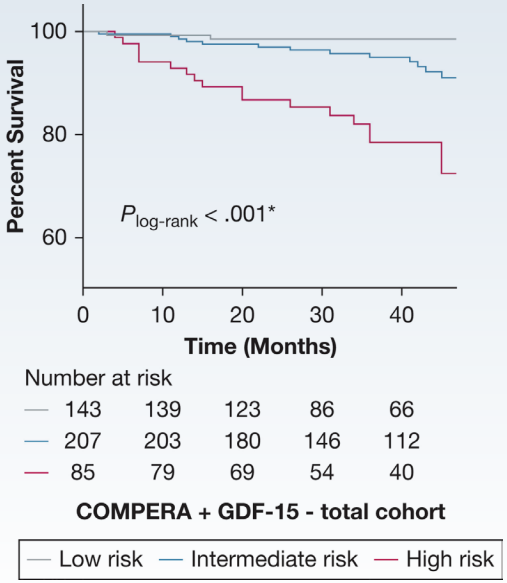
Can the Addition of GDF-15 Improve the Performance of Existing Prediction Models for PAH?

STUDY DESIGN

- Nationwide, multicenter retrospective study of patients with pulmonary arterial hypertension (PAH) enrolled in the National Rare Diseases Registry System of China (218 in the discovery cohort and 217 in the validation cohort)
- Serum growth differentiation factor-15 (GDF-15) levels were obtained, and comprehensive PAH assessments, including right heart catheterizations, were performed
- Compared prediction power of several existing risk models (especially COMPERA) with or without GDF-15

RESULTS





The findings of this study show that adding GDF-15 as an additional prognostic biomarker may improve predictive performance of preexisting PAH risk assessment strategies and, compared with COMPERA, a new risk model incorporating GDF-15 based on COMPERA showed better discriminatory power for all-cause mortality and better fit.

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