**English version**

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| No. | **Original questions** |
| 1 | Is hypertrophic cardiomyopathy (HCM) a rare heart disease? |
| 2 | To which category of genetic disorders does hypertrophic cardiomyopathy (HCM) belong, and which genetic mutations are closely associated with it? |
| 3 | In clinical practice, how is hypertrophic cardiomyopathy (HCM) classified based on hemodynamic characteristics? |
| 4 | How is hypertrophic cardiomyopathy (HCM) clinically classified based on genetic features? |
| 5 | Based on the location of myocardial hypertrophy, into what types can hypertrophic cardiomyopathy (HCM) be classified? |
| 6 | What are the main pathophysiological characteristics of hypertrophic cardiomyopathy (HCM)? |
| 7 | Do all patients with hypertrophic cardiomyopathy (HCM) present with symptoms of left ventricular outflow tract obstruction? |
| 8 | In hypertrophic cardiomyopathy (HCM), which region of the left ventricle is most commonly affected by hypertrophy? |
| 9 | What are the diagnostic criteria for hypertrophic cardiomyopathy (HCM)? |
| 10 | In populations with a family history of hypertrophic cardiomyopathy (HCM), is the threshold value for diagnosing left ventricular wall thickness different? |
| 11 | What are the most common symptoms in patients with hypertrophic cardiomyopathy (HCM)? |
| 12 | What are the three main causes of death in patients with hypertrophic cardiomyopathy (HCM)? |
| 13 | Under what circumstances might hypertrophic cardiomyopathy (HCM) patients be at risk of developing ventricular aneurysms? |
| 14 | Do patients with hypertrophic cardiomyopathy (HCM) experience autonomic dysfunction? |
| 15 | Do the diagnostic criteria for hypertrophic cardiomyopathy (HCM) differ between adults and children? |
| 16 | Is the likelihood of developing clinical hypertrophic cardiomyopathy (HCM) higher among family members with pathogenic variants? Does the age of onset vary? |
| 17 | In patients with hypertrophic cardiomyopathy (HCM) who are genotype-positive but phenotype-negative, at what stage of the disease are they? |
| 18 | In patients with hypertrophic cardiomyopathy (HCM), are elderly patients at a higher risk of sudden cardiac death (SCD) compared to younger patients? |
| 19 | Do gender or racial factors increase the risk of sudden cardiac death (SCD) in patients with hypertrophic cardiomyopathy (HCM)? |
| 20 | Does hypertrophic cardiomyopathy (HCM) affect the life expectancy of patients? |
| 21 | Is it possible for the electrocardiogram of patients with hypertrophic cardiomyopathy (HCM) to show ST-T wave variations and abnormal Q waves? |
| 22 | How often should electrocardiograms be performed during initial evaluation and regular follow-up in patients with hypertrophic cardiomyopathy (HCM)? |
| 23 | In hypertrophic cardiomyopathy (HCM) patients, which type of arrhythmia significantly increases the risk of sudden cardiac death (SCD)? |
| 24 | What is the preferred imaging modality for diagnosing hypertrophic cardiomyopathy (HCM)? |
| 25 | How frequently should echocardiography be repeated for patients with stable hypertrophic cardiomyopathy (HCM)? |
| 26 | For adult patients with hypertrophic cardiomyopathy (HCM) and a left ventricular outflow pressure gradient of less than 50mmHg at rest, is it necessary to assess for the presence of latent left ventricular outflow tract obstruction (LVOTO)? |
| 27 | If the quality of transthoracic echocardiography (TTE) images is suboptimal, are there other adjunctive techniques that can guide the decision-making for septal ablation in hypertrophic cardiomyopathy (HCM)? |
| 28 | Is dobutamine stress echocardiography recommended for screening in patients with suspected myocardial ischemia in hypertrophic cardiomyopathy (HCM)? |
| 29 | Is exercise stress testing applicable to patients of all ages suspected of having hypertrophic cardiomyopathy (HCM)? |
| 30 | What diagnostic tests are needed to assess the degree of functional limitation in non-obstructive hypertrophic cardiomyopathy (HCM) and advanced heart failure (NYHA class III-IV) patients? |
| 31 | What is the preferred non-invasive imaging method for assessing myocardial fibrosis in patients with hypertrophic cardiomyopathy (HCM)? |
| 32 | How often should cardiac magnetic resonance (CMR) contrast-enhanced scans be performed in patients with hypertrophic cardiomyopathy (HCM)? |
| 33 | What are the new biomarkers for diagnosing hypertrophic cardiomyopathy (HCM)? |
| 34 | Is cardiac computed tomography (CT) typically included as a standard diagnostic step in the management of hypertrophic cardiomyopathy (HCM)? |
| 35 | Under what circumstances do patients with hypertrophic cardiomyopathy (HCM) require invasive imaging procedures? |
| 36 | When hypertrophic cardiomyopathy (HCM) patients show symptoms or signs of myocardial ischemia, which diagnostic methods should be used to further determine the cause? |
| 37 | Before considering surgery for hypertrophic cardiomyopathy (HCM) patients with concurrent coronary atherosclerosis, should coronary angiography be performed to better assess atherosclerotic risk? |
| 38 | Should patients with hypertrophic cardiomyopathy (HCM) undergo genetic testing related to their disease? |
| 39 | Should a detailed family history of genetic disorders spanning three generations be taken during the initial evaluation of hypertrophic cardiomyopathy (HCM)? |
| 40 | Should family members of hypertrophic cardiomyopathy (HCM) patients receive genetic counseling before and during pregnancy? |
| 41 | Are there management differences between pediatric and adult patients with hypertrophic cardiomyopathy (HCM)? |
| 42 | Does shared decision-making among patients, families, and the treatment team have clinical significance in the management of hypertrophic cardiomyopathy (HCM)? |
| 43 | What are the differences in risk factors for sudden cardiac death (SCD) between children and adults with hypertrophic cardiomyopathy (HCM)? |
| 44 | What models have been designed to predict the risk of sudden cardiac death (SCD) in hypertrophic cardiomyopathy (HCM) patients under the age of 16 over the next five years? |
| 45 | What validated risk assessment tools are available to predict the likelihood of sudden death in hypertrophic cardiomyopathy (HCM) patients over 16 years of age within the next five years? |
| 46 | Can routine drug therapy change the natural course of obstructive hypertrophic cardiomyopathy (HCM) in symptomatic patients? |
| 47 | Which medications are considered first-line treatment options for symptomatic obstructive hypertrophic cardiomyopathy (HCM)? |
| 48 | When patients with hypertrophic cardiomyopathy (HCM) exhibit congestive symptoms, should high-dose diuretics be used to alleviate these symptoms? |
| 49 | Are cardiac myosin inhibitors appropriate for symptomatic adult patients with hypertrophic cardiomyopathy (HCM)? |
| 50 | What treatment strategies should be implemented when hypertrophic cardiomyopathy (HCM) patients present with symptomatic atrial fibrillation? |
| 51 | Which groups of hypertrophic cardiomyopathy (HCM) patients are not suitable for treatment with verapamil? |
| 52 | What treatment principles should guide the management of non-obstructive hypertrophic cardiomyopathy (HCM)? |
| 53 | For patients with life-threatening, recurrent ventricular arrhythmias that are refractory to drug therapy in hypertrophic cardiomyopathy (HCM), what are the appropriate treatment options? |
| 54 | For symptomatic obstructive hypertrophic cardiomyopathy (HCM) patients, is the use of positive inotropic agents (e.g., digoxin, phosphodiesterase inhibitors) recommended to alleviate symptoms? |
| 55 | Should septal reduction therapy (SRT) be routinely considered for patients with hypertrophic cardiomyopathy (HCM) who are asymptomatic and have normal exercise capacity? |
| 56 | How should symptomatic obstructive hypertrophic cardiomyopathy (HCM) patients who also have other cardiac conditions requiring surgical intervention be managed? |
| 57 | Should genotype-positive but phenotype-negative hypertrophic cardiomyopathy (HCM) patients receive an implantable cardioverter-defibrillator (ICD) as primary prevention? |
| 58 | Is risk stratification for sudden cardiac death (SCD) necessary in the clinical management of hypertrophic cardiomyopathy (HCM) patients? |
| 59 | How often should sudden cardiac death (SCD) risk be assessed in adolescent and adult patients with hypertrophic cardiomyopathy (HCM)? |
| 60 | Should genotype-positive but phenotype-negative hypertrophic cardiomyopathy (HCM) patients be prohibited from participating in any competitive activities? |

**Chinese version**

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| No. | **原始题目** |
| 1 | 肥厚型心肌病（HCM）是一种罕见的心脏病吗？ |
| 2 | 肥厚型心肌病（HCM）属于哪一类遗传疾病？与哪些基因变异密切相关？ |
| 3 | 在临床实践中，根据血流动力学特征，肥厚型心肌病（HCM）可以分为哪些类型？ |
| 4 | 根据遗传学的特点，肥厚型心肌病（HCM）如何进行临床分型？ |
| 5 | 根据心肌肥厚部位，肥厚型心肌病（HCM）可以分为哪些类型？ |
| 6 | 肥厚型心肌病（HCM）主要的病理生理特点是什么？ |
| 7 | 是否所有肥厚型心肌病（HCM）患者都会表现出左室流出道梗阻的症状？ |
| 8 | 在肥厚型心肌病（HCM）中，左心室肥厚在什么部位最常见？ |
| 9 | 肥厚型心肌病（HCM）诊断的标准是什么？ |
| 10 | 在有肥厚型心肌病（HCM）家族背景的人群中，确诊左心室壁厚度的标准阈值是否有所不同？ |
| 11 | 肥厚型心肌病（HCM）患者最常见的症状是什么？ |
| 12 | 导致肥厚型心肌病（HCM）患者死亡的三大主要病因是哪些？ |
| 13 | 在什么情况下，肥厚型心肌病（HCM）患者可能会有室壁瘤形成的危险？ |
| 14 | 肥厚型心肌病（HCM）患者是否会出现自主神经功能障碍？ |
| 15 | 成人与儿童肥厚型心肌病（HCM）的诊断标准是否不一致？ |
| 16 | 在具有致病性变异的家族成员中，发展为临床肥厚型心肌病（HCM）的可能性是否较高？个体发病年龄是否存在差异？ |
| 17 | 基因型阳性但表型阴性的肥厚型心肌病（HCM）患者处于疾病的哪个阶段？ |
| 18 | 在肥厚型心肌病（HCM）患者中，老年患者与年轻患者相比，谁的心源性猝死（SCD）风险更高？ |
| 19 | 性别或种族因素是否会增加肥厚型心肌病（HCM）患者的心源性猝死（SCD）风险？ |
| 20 | 肥厚型心肌病（HCM）是否影响患者的预期寿命？ |
| 21 | 肥厚型心肌病（HCM）患者的心电图是否可能出现ST-T波的变异和异常Q波？ |
| 22 | 在肥厚型心肌病（HCM）患者的初始评估和定期随访中，建议多长时间进行一次心电图检查？ |
| 23 | 在肥厚型心肌病（HCM）患者中，哪种类型的心律失常显著增加心源性猝死（SCD）的风险？ |
| 24 | 诊断肥厚型心肌病（HCM）的首选影像学检查方法是什么？ |
| 25 | 对于病情稳定的肥厚型心肌病（HCM）患者，建议多久复查一次超声心动图？ |
| 26 | 对于静息时左心室流出道压力差小于50mmHg的成人肥厚型心肌病（HCM）患者，是否需要评估有无隐匿性左心室流出道梗阻（LVOTO）？ |
| 27 | 在经胸超声心动图（TTE）图像质量不佳的情况下，是否有其他辅助技术可以帮助指导肥厚型心肌病（HCM）室间隔消融治疗的进行？ |
| 28 | 对于临床上怀疑心肌缺血的肥厚型心肌病（HCM）患者，是否建议采用多巴酚丁胺负荷超声心动图进行筛查？ |
| 29 | 运动负荷试验是否适用于所有年龄段的疑似肥厚型心肌病（HCM）患者？ |
| 30 | 对于非梗阻性肥厚型心肌病（HCM）和晚期心力衰竭（NYHA心功能III级至IV级）的患者，需要进行什么检查来评估功能限制的程度？ |
| 31 | 评估肥厚型心肌病（HCM）患者心肌纤维化的首选无创性影像学检查方法是什么？ |
| 32 | 对于肥厚型心肌病（HCM）患者，推荐多长时间进行一次心脏磁共振（CMR）对比增强扫描检查？ |
| 33 | 诊断肥厚型心肌病（HCM）的新标志物有哪些？ |
| 34 | 在肥厚型心肌病（HCM）的诊疗过程中，是否通常包括心脏计算机断层成像（CT）作为标准检查步骤？ |
| 35 | 肥厚型心肌病（HCM）患者在什么情况下需要进行有创性影像学检查？ |
| 36 | 当肥厚型心肌病（HCM）患者表现出心肌缺血的症状或迹象时，应采取哪些检测手段来进一步确定病因？ |
| 37 | 在考虑对合并冠状动脉粥样硬化的肥厚型心肌病（HCM）患者进行手术之前，是否应该对冠状动脉的状况进行造影检查，以便更好地评估粥样硬化的风险？ |
| 38 | 肥厚型心肌病（HCM）患者是否应该接受与其疾病相关的基因检测？ |
| 39 | 在肥厚型心肌病（HCM）的初始评估中，是否应该详细询问并记录三代家族遗传史？ |
| 40 | 肥厚型心肌病（HCM）患者的家庭成员是否需要在怀孕前和怀孕期间接受遗传咨询？ |
| 41 | 儿童与成人肥厚型心肌病（HCM）患者在管理上是否存在差异？ |
| 42 | 在肥厚型心肌病（HCM）的诊治过程中，患者、家属和治疗团队共同参与决策是否具有临床意义？ |
| 43 | 在肥厚型心肌病（HCM）患者中，儿童与成人发生心源性猝死的风险因素有哪些差异？ |
| 44 | 针对16岁以下的肥厚型心肌病（HCM）儿童患者，有哪些模型被设计用来预测他们在未来五年内心源性猝死的风险？ |
| 45 | 有哪些已被证实有效的风险评估工具，适用于预测16岁以上肥厚型心肌病（HCM）患者在接下来五年内突发死亡的可能性？ |
| 46 | 常规药物治疗对于有症状的梗阻性肥厚型心肌病（HCM）患者，能否起到改变疾病自然发展进程的作用？ |
| 47 | 针对症状性梗阻性肥厚型心肌病（HCM）患者，哪些药物被视为一线治疗选择？ |
| 48 | 当肥厚型心肌病（HCM）患者出现充血症状时，是否应该使用大剂量利尿剂来缓解症状？ |
| 49 | 对于有症状的成年肥厚型心肌病（HCM）患者，心肌肌球蛋白抑制剂是否是合适的药物选择？ |
| 50 | 当肥厚型心肌病（HCM）患者伴随症状性心房颤动的出现时，应当采取哪些治疗措施？ |
| 51 | 哪些肥厚型心肌病（HCM）患者群体不适合接受维拉帕米治疗？ |
| 52 | 在治疗非梗阻性肥厚型心肌病（HCM）时，应该依据哪些治疗原则？ |
| 53 | 对于反复出现威胁生命的快速室性心律失常且药物治疗无效的肥厚型心肌病（HCM）患者，合理的治疗选择方案是什么？ |
| 54 | 对于症状性梗阻性肥厚型心肌病（HCM）患者，是否建议使用正性肌力药物（如洋地黄类、磷酸二酯酶抑制剂等）来缓解症状？ |
| 55 | 对于没有症状并且运动能力正常的肥厚型心肌病（HCM）患者，是否应该常规考虑进行室间隔减容术（SRT）？ |
| 56 | 如果一位症状性梗阻性肥厚型心肌病（HCM）患者同时患有其他需手术干预的心脏疾病，应如何处理？ |
| 57 | 对于那些基因型阳性但尚未表现出症状的肥厚型心肌病（HCM）患者，是否需要植入心脏复律除颤器（ICD）作为一级预防措施？ |
| 58 | 在肥厚型心肌病（HCM）患者的临床管理中，是否需要进行心源性猝死（SCD）风险分层？ |
| 59 | 针对青少年和成人患有肥厚型心肌病（HCM）的群体，应当多久进行一次心源性猝死风险的评估？ |
| 60 | 是否禁止基因型阳性但表型阴性的肥厚型心肌病（HCM）患者参与任何竞技活动？ |