**English version**

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| No. | **Rephrased questions** |
| 1 | Is the incidence of hypertrophic cardiomyopathy (HCM) high in the general population? |
| 2 | What genetic inheritance pattern does hypertrophic cardiomyopathy (HCM) follow? What are the major genetic mutations associated with it? |
| 3 | In clinical practice, how can hypertrophic cardiomyopathy (HCM) be classified based on hemodynamic characteristics? |
| 4 | How should hypertrophic cardiomyopathy (HCM) be clinically classified based on genetic features? |
| 5 | Based on the location of myocardial thickening, how can hypertrophic cardiomyopathy (HCM) be categorized? |
| 6 | What are the main pathophysiological features of hypertrophic cardiomyopathy (HCM)? |
| 7 | Do all patients with hypertrophic cardiomyopathy (HCM) inevitably face left ventricular outflow tract obstruction? |
| 8 | In hypertrophic cardiomyopathy (HCM), where does left ventricular hypertrophy most commonly occur? |
| 9 | What criteria must be met to establish a definitive diagnosis of hypertrophic cardiomyopathy (HCM)? |
| 10 | For individuals with a family history of hypertrophic cardiomyopathy (HCM), are the diagnostic criteria for left ventricular wall thickening different from those in the general population? |
| 11 | What clinical manifestations are most common in patients with hypertrophic cardiomyopathy (HCM)? |
| 12 | Among patients with hypertrophic cardiomyopathy (HCM), what are the three most common causes of death? |
| 13 | Under what conditions might hypertrophic cardiomyopathy (HCM) progress to ventricular aneurysm? |
| 14 | Does hypertrophic cardiomyopathy (HCM) affect autonomic nervous system function in patients? |
| 15 | Are the diagnostic criteria for hypertrophic cardiomyopathy (HCM) consistent across adults and children? |
| 16 | In family members with pathogenic mutations, what are the characteristics of the likelihood and age of onset for clinical hypertrophic cardiomyopathy (HCM)? |
| 17 | What stage of the disease does a patient with a positive genetic test for hypertrophic cardiomyopathy (HCM) but no clinical symptoms correspond to? |
| 18 | Is there an age-related difference in the risk of sudden cardiac death (SCD) in patients with hypertrophic cardiomyopathy (HCM)? |
| 19 | Does the risk of sudden cardiac death (SCD) in patients with hypertrophic cardiomyopathy (HCM) vary by gender or race? |
| 20 | Do patients with hypertrophic cardiomyopathy (HCM) have a different life expectancy compared to the general population? |
| 21 | Among family members of patients with hypertrophic cardiomyopathy (HCM), is electrocardiogram (ECG) more effective than echocardiography in detecting the condition? |
| 22 | What is the recommended frequency for electrocardiogram (ECG) monitoring in the initial diagnosis and subsequent regular follow-up of hypertrophic cardiomyopathy (HCM) patients? |
| 23 | What type of arrhythmia accelerates the risk of sudden cardiac death (SCD) in hypertrophic cardiomyopathy (HCM) patients? |
| 24 | What is the preferred imaging modality for diagnosing hypertrophic cardiomyopathy (HCM)? |
| 25 | For patients with stable hypertrophic cardiomyopathy (HCM), what is the recommended frequency for follow-up echocardiography? |
| 26 | Do adult patients with hypertrophic cardiomyopathy (HCM) and a resting left ventricular outflow pressure gradient of less than 50 mmHg have latent left ventricular outflow tract obstruction (LVOTO), and should further evaluation be performed? |
| 27 | What methods or techniques are recommended to assist in interventricular septal ablation treatment for hypertrophic cardiomyopathy (HCM) when transthoracic echocardiography (TTE) fails to provide clear images? |
| 28 | Is dobutamine stress echocardiography applicable for screening hypertrophic cardiomyopathy (HCM) patients with potential myocardial ischemia? |
| 29 | Is there an age limit for exercise stress testing in suspected hypertrophic cardiomyopathy (HCM) patients? |
| 30 | For non-obstructive hypertrophic cardiomyopathy (HCM) patients with advanced heart failure (NYHA functional class III-IV), what diagnostic measures should be taken to assess the extent of functional impairment? |
| 31 | What non-invasive imaging technique is recommended for evaluating myocardial fibrosis in hypertrophic cardiomyopathy (HCM) patients? |
| 32 | How often should cardiac magnetic resonance (CMR) contrast-enhanced scans be performed in the management of hypertrophic cardiomyopathy (HCM)? |
| 33 | What novel biomarkers are used in the diagnosis of hypertrophic cardiomyopathy (HCM)? |
| 34 | Is cardiac computed tomography (CT) considered a routine examination in the diagnosis and management of hypertrophic cardiomyopathy (HCM)? |
| 35 | Under what specific conditions should invasive imaging evaluations be considered for hypertrophic cardiomyopathy (HCM) patients? |
| 36 | What tests are recommended to identify the cause in hypertrophic cardiomyopathy (HCM) patients presenting with myocardial ischemia symptoms or related signs? |
| 37 | For hypertrophic cardiomyopathy (HCM) patients with concomitant coronary artery atherosclerosis, is coronary angiography necessary before surgery to assess the risk of coronary artery disease? |
| 38 | Does genetic testing for hypertrophic cardiomyopathy (HCM) have practical value in patient management? |
| 39 | When conducting an initial evaluation of hypertrophic cardiomyopathy (HCM) patients, is it important to consider the genetic background of their immediate family members (up to three generations)? |
| 40 | For family members of hypertrophic cardiomyopathy (HCM) patients, is acquiring genetic information before and during pregnancy significant? |
| 41 | Are management strategies for adult hypertrophic cardiomyopathy (HCM) applicable to pediatric patients as well? |
| 42 | In the diagnosis and treatment of hypertrophic cardiomyopathy (HCM), is it of significant clinical value for patients and their families to make decisions in collaboration with the treatment team? |
| 43 | What differences exist in the risk factors for sudden cardiac death in pediatric and adult patients with hypertrophic cardiomyopathy (HCM)? |
| 44 | Are there specific predictive tools for estimating the five-year risk of sudden cardiac death in children under 16 with hypertrophic cardiomyopathy (HCM)? |
| 45 | What validated risk assessment tools are used to estimate the risk of sudden death in hypertrophic cardiomyopathy (HCM) patients aged 16 and above over the next five years? |
| 46 | Is conventional pharmacological treatment effective in symptomatic obstructive hypertrophic cardiomyopathy (HCM) patients? |
| 47 | What are the first-line drugs for treating symptomatic obstructive hypertrophic cardiomyopathy (HCM)? |
| 48 | Do high-dose diuretics benefit patients with congestive hypertrophic cardiomyopathy (HCM) in alleviating symptoms? |
| 49 | Do myosin inhibitors provide therapeutic effects for symptomatic hypertrophic cardiomyopathy (HCM) patients? |
| 50 | When symptomatic atrial fibrillation occurs in hypertrophic cardiomyopathy (HCM) patients, what treatment options should be considered? |
| 51 | Which patient groups should avoid using verapamil in the treatment of hypertrophic cardiomyopathy (HCM)? |
| 52 | What basic principles should be observed when treating non-obstructive hypertrophic cardiomyopathy (HCM) patients? |
| 53 | What appropriate treatment options should be considered for hypertrophic cardiomyopathy (HCM) patients with frequent life-threatening ventricular arrhythmias who do not respond well to pharmacological treatment? |
| 54 | Do positive inotropic agents (e.g., digoxin, phosphodiesterase inhibitors) have therapeutic effects for symptomatic obstructive hypertrophic cardiomyopathy (HCM) patients? |
| 55 | Should patients with asymptomatic hypertrophic cardiomyopathy (HCM) and normal exercise capacity undergo septal reduction therapy (SRT)? |
| 56 | How should symptomatic obstructive hypertrophic cardiomyopathy (HCM) patients who also have other heart diseases requiring surgery approach treatment? |
| 57 | Should an implantable cardioverter-defibrillator (ICD) be considered for asymptomatic hypertrophic cardiomyopathy (HCM) patients with positive genetic test results to prevent cardiac events? |
| 58 | Is stratifying the risk of sudden cardiac death important for the clinical management of hypertrophic cardiomyopathy (HCM) patients? |
| 59 | How often should sudden cardiac death risk assessments be conducted for adolescent and adult hypertrophic cardiomyopathy (HCM) patients? |
| 60 | Should genetically positive but asymptomatic hypertrophic cardiomyopathy (HCM) patients be restricted from participating in competitive sports activities? |

**Chinese version**

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| No. | **问题改述** |
| 1 | 肥厚型心肌病（HCM）在普通人群中的发病率高吗？ |
| 2 | 肥厚型心肌病（HCM）遵循哪一种遗传模式？主要基因变异有哪些？ |
| 3 | 在临床实践中，依据血流动力学的不同，肥厚型心肌病（HCM）能够被划分为哪几种形式？ |
| 4 | 基于遗传特征，如何对肥厚型心肌病（HCM）实施临床分类？ |
| 5 | 依据心肌增厚的部位，肥厚型心肌病（HCM）能够划分为哪几种类别？ |
| 6 | 肥厚型心肌病（HCM）的主要病理生理特征体现在哪些方面？ |
| 7 | 是否每一位肥厚型心肌病（HCM）患者都必将面临左室流出道梗阻的问题？ |
| 8 | 对于肥厚型心肌病（HCM）而言，左心室肥厚通常最容易发生在什么位置？ |
| 9 | 明确诊断肥厚型心肌病（HCM），需要满足什么条件？ |
| 10 | 对于有肥厚型心肌病（HCM）家族史的个体，诊断时用于确定左心室壁增厚的标准阈值是否有别于普通人群？ |
| 11 | 在肥厚型心肌病（HCM）患者中，哪种临床表现最为普遍？ |
| 12 | 在肥厚型心肌病（HCM）患者中，哪三种疾病是最常见的致死原因？ |
| 13 | 肥厚型心肌病（HCM）在哪些条件下可能会发展成室壁瘤？ |
| 14 | 肥厚型心肌病（HCM）患者的自主神经系统功能是否会受到影响？ |
| 15 | 在诊断肥厚型心肌病（HCM）时，成人与儿童是否适用一致的标准？ |
| 16 | 在有致病变异的家族成员中，发展为临床肥厚型心肌病（HCM）的可能性和发病年龄有何特点？ |
| 17 | 基因检测结果为阳性但尚未表现出临床症状的肥厚型心肌病（HCM）患者对应疾病的哪个阶段？ |
| 18 | 肥厚型心肌病（HCM）患者发生心源性猝死（SCD）的风险是否存在年龄差异？ |
| 19 | 肥厚型心肌病（HCM）患者的心源性猝死（SCD）风险是否受性别或种族因素的影响？ |
| 20 | 肥厚型心肌病（HCM）患者与普通人群相比，其预期寿命是否存在差异？ |
| 21 | 在肥厚型心肌病（HCM）家族成员中，心电图的检出率是否比超声心动图更有效？ |
| 22 | 针对肥厚型心肌病（HCM）患者，在初次诊断评估及后续定期监测过程中，推荐的心电图检测频率是怎样的？ |
| 23 | 什么样的心律失常会加速肥厚型心肌病（HCM）患者心源性猝死（SCD）风险？ |
| 24 | 用于诊断肥厚型心肌病（HCM）的首选影像技术是什么？ |
| 25 | 针对那些处于病情平稳期的肥厚型心肌病（HCM）患者，应当如何安排超声心动图的复查频率？ |
| 26 | 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）患者会存在隐匿性左心室流出道梗阻（LVOTO）吗？是否需要作进一步评估？ |
| 27 | 在经胸超声心动图（TTE）无法提供清晰图像时，有哪些推荐的方法或技术可以辅助进行肥厚型心肌病（HCM）的室间隔消融治疗？ |
| 28 | 多巴酚丁胺负荷超声心动图是否适用于筛查可能存在心肌缺血的肥厚型心肌病（HCM）患者？ |
| 29 | 对于疑似肥厚型心肌病（HCM）患者，运动负荷试验有年龄限制吗？ |
| 30 | 针对非梗阻性肥厚型心肌病（HCM）且伴有晚期心力衰竭（NYHA心功能分级III至IV级）的患者，应采取哪些检查手段以评估其功能受限的具体程度？ |
| 31 | 针对肥厚型心肌病（HCM）患者的心肌纤维化程度评估，推荐采用哪种无创性影像学检查技术？ |
| 32 | 在肥厚型心肌病（HCM）的管理中，如何安排患者心脏磁共振（CMR）对比增强扫描检查的频率？ |
| 33 | 有哪些新标志物用于在肥厚型心肌病（HCM）的诊断中？ |
| 34 | 在肥厚型心肌病（HCM）的诊治流程中，心脏计算机断层扫描（CT）是否属于常规检查项目？ |
| 35 | 在哪些特定条件下，肥厚型心肌病（HCM）患者应考虑接受侵入性影像学评估？ |
| 36 | 肥厚型心肌病（HCM）患者若出现心肌缺血症状或相关征象，建议进行哪些检查以明确病因？ |
| 37 | 对于合并冠状动脉粥样硬化的肥厚型心肌病（HCM）患者而言，在进行手术之前，是否有必要实施冠状动脉造影来评估冠状动脉粥样硬化的风险？ |
| 38 | 对于肥厚型心肌病（HCM）患者，进行针对HCM的基因检测是否具有实际价值？ |
| 39 | 在对肥厚型心肌病（HCM）患者进行初步评估时，考虑其家族中三代以内的遗传背景是否有其重要性？ |
| 40 | 对于肥厚型心肌病（HCM）患者的家族成员来说，孕前和产前获取与遗传相关的信息是否有实际意义？ |
| 41 | 成人肥厚型心肌病（HCM）的管理策略是否同样适用于儿童患者？ |
| 42 | 在肥厚型心肌病（HCM）的诊治过程中，患者及其家属与治疗团队一同进行决策，这一做法在临床上是否具备重要价值？ |
| 43 | 在肥厚型心肌病（HCM）的背景下，儿童患者与成人患者在心源性猝死的风险因素上，存在什么差异？ |
| 44 | 针对16岁以下患有肥厚型心肌病（HCM）的儿童患者，有哪些特定的预测工具，可用于估算他们未来五年内心源性猝死的发生概率？ |
| 45 | 有哪些经过验证的风险评估工具，专门用于估计16岁及以上的肥厚型心肌病（HCM）患者在未来五年内发生猝死的风险？ |
| 46 | 对于有临床症状的梗阻性肥厚型心肌病（HCM）患者而言，常规的药物治疗是否能够带来实际的治疗效果？ |
| 47 | 治疗症状性梗阻性肥厚型心肌病（HCM）的一线药物有哪些？ |
| 48 | 大剂量利尿剂是否有利于充血性肥厚型心肌病（HCM）患者缓解症状？ |
| 49 | 对于出现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具有治疗效果？ |
| 50 | 当肥厚型心肌病（HCM）患者同时出现症状性心房颤动时，应该考虑什么治疗方案？ |
| 51 | 在肥厚型心肌病（HCM）的治疗中，哪些患者群体应当避免使用维拉帕米作为治疗药物？ |
| 52 | 对非梗阻性肥厚型心肌病（HCM）患者实施治疗时，需注意哪些基本原则？ |
| 53 | 针对那些患有肥厚型心肌病（HCM）、频繁出现危及生命的快速室性心律失常，并且对药物治疗反应不佳的患者，应当考虑哪些合适的治疗方案？ |
| 54 | 使用正性肌力药物（例如洋地黄类、磷酸二酯酶抑制剂等）对症状性梗阻性肥厚型心肌病（HCM）患者而言，是否有治疗效果？ |
| 55 | 是否应该对那些没有症状、运动能力正常的肥厚型心肌病（HCM）患者进行室间隔减容手术（SRT）？ |
| 56 | 当面临症状性梗阻性肥厚型心肌病（HCM）且同时患有需通过手术处理的其他心脏疾病时，患者该如何应对？ |
| 57 | 是否应该为尚未显现任何临床症状的基因检测结果呈阳性的肥厚型心肌病（HCM）患者安装心脏复律除颤器（ICD），以预防心脏事件的发生？ |
| 58 | 评估心源性猝死风险分层对于肥厚型心肌病（HCM）患者的临床管理是否具有重要的临床意义？ |
| 59 | 对于青少年及成人肥厚型心肌病（HCM）患者，推荐每间隔多长时间进行一次心源性猝死的风险评估？ |
| 60 | 基因型阳性但尚未表现出症状的肥厚型心肌病（HCM）患者，是否应被限制参加任何竞技性活动？ |