

2006 SAE-P: Coronary Artery Disease in Masters-Level Athletes

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1. When performing exercise stress testing in masters-level athletes,
 - (a) routine medications should be discontinued 24 hours before testing.
 - (b) the testing should approximate the cardiovascular, metabolic, and mechanical demands of the intended training and activity.
 - (c) the criteria for cardiac ischemia include a minimum ST-segment depression of 3mm.
 - (d) routine testing is recommended only for symptomatic people.

Ref: Bruce RA, DeRouen TA, Hossack KF. Value of maximal exercise tests in risk assessment of primary coronary heart

disease events in healthy men: five years' experience of the Seattle Heart Watch Study. Am J Cardiol 1980;46:371-8.

2. Which risk factor places a masters-level athlete with coronary artery disease in the substantial risk category?
 - (a) Reduced ejection fraction of less than 50%
 - (b) Exercise tolerance of 8 metabolic equivalents in a 70-year-old person
 - (c) Absent exercise-induced ischemia
 - (d) Successful myocardial revascularization

Ref: Whiteson JH, Bartels MN, Kim H, Alba AS. Coronary artery disease in masters-level athletes. Arch Phys Med Rehabil 2006;87(3 Suppl 1):S79-81.