Top Ten Things to Know
Current Diagnostic and Treatment Strategies for Specific Dilated Cardiomyopathies

1. Dilated cardiomyopathy (DCM) includes a spectrum of heterogeneous myocardial disorders with ventricular dilation and depressed myocardial performance without hypertension, valvular, congenital or ischemic heart disease.

2. The US age adjusted prevalence of DCM is approximately 36 cases per 100,000 population or 1:2500.

3. DCM is most common in the third or fourth decade, but it can occur at any age.

4. An independent mortality risk factor in DCM is advancing age.

5. For adults HF and DCM prognosis have improved significantly over the past 20 years, even among the elderly.

6. African Americans have 3 times greater risk for developing DCM than whites. Factors such as hypertension social, or economic factors don’t completely explain the reason for this. They also have about 1.5 to 2.0 times greater mortality risk from DCM.

7. This scientific statement offers a summary of the current understanding of DCM. It includes special emphasis on new developments in diagnosis and treatment for specific cardiomyopathies.

8. DCM characteristics include ventricular dilation and depressed myocardial performance; chronic alcoholism is one of the leading causes of non-ischemic DCM in the western world.

9. In some cases, when the cause is eliminated and the appropriate treatment administered, reversal of myocardial remodeling and recovery of cardiac dysfunction can occur.

10. Future studies targeting specific cardiomyopathies will be important.