

## RESULTS

**Table (3):** Demographic Data.

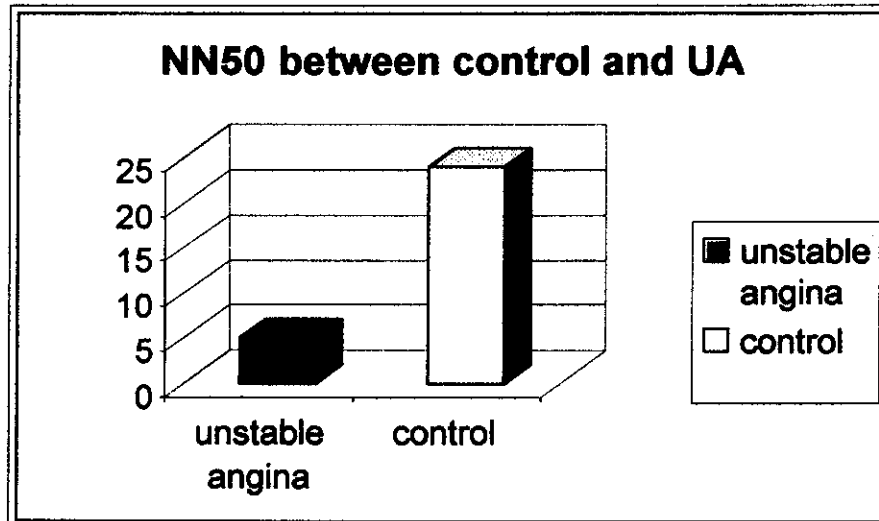
	Control group	Patient group	P
Age(mean $\pm$ SD)	45 $\pm$ 9	45 $\pm$ 10	>0.05
Males(%)	70%	72%	>0.05
Females(%)	30%	28%	>0.05

There is no significant difference between patients with unstable angina and control group as regard age and sex.

**Table (4):** Comparison between patients with unstable angina and controls as regard NN50.

<b>Groups Variables</b>	<b>Control group</b>	<b>Unstable angina</b>	<b>T</b>	<b>P</b>
	<b>Mean <math>\pm</math>SD</b>	<b>Mean <math>\pm</math>SD</b>		
NN50(ms)	20.1 $\pm$ 4.3	3.2 $\pm$ 1.6	10.6	<0.01

There is significant difference in NN50 between unstable angina and control group.

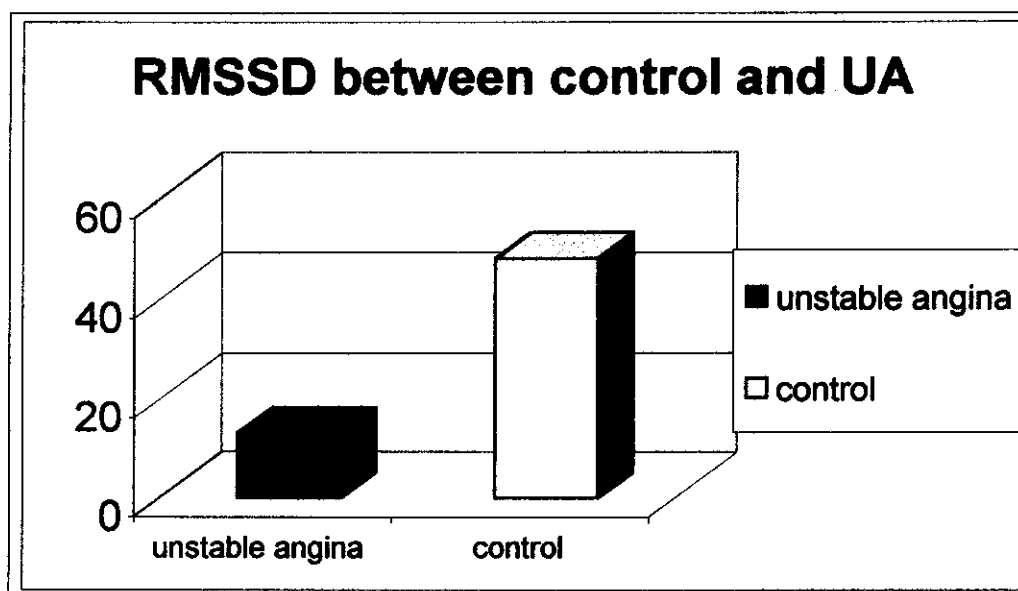


**Figure (1):** There is significant difference in NN50 between unstable angina and control ( $p < 0.01$ ).

**Table(5):** Comparison between patients with unstable angina and controls as regard rMSSD.

Variables \ Groups	Control group	Unstable angina	T	P
	Mean $\pm$ SD	Mean $\pm$ SD		
rMSSD(ms)	42.1 $\pm$ 6	10.11 $\pm$ 2.7	15.5	<0.01

There is significant difference in rMSSD between unstable angina and control group.

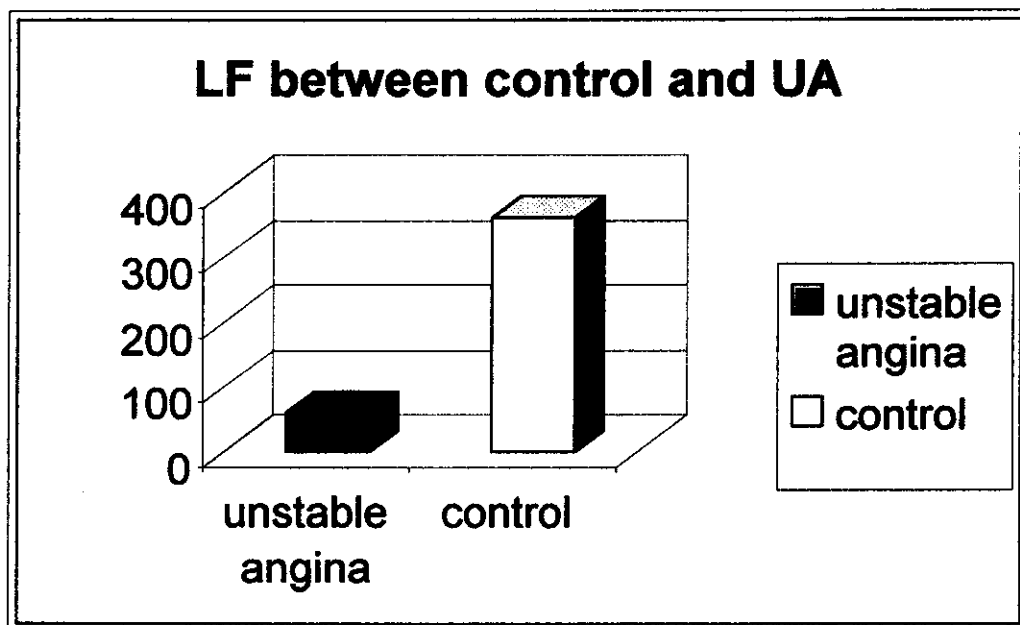


**Figure (2):** There is significant difference in rMSSD between unstable angina and control group ( $p < 0.01$ ).

**Table (6):** Comparison between patients with unstable angina and controls as regard low frequency (LF).

Variables \ Groups	Control group	Unstable angina	T	P
	Mean $\pm$ SD	Mean $\pm$ SD		
L.F(ms <sup>2</sup> )	350 $\pm$ 12	50 $\pm$ 9	75	<0.001

There is significant difference in L.F between unstable angina and control group.

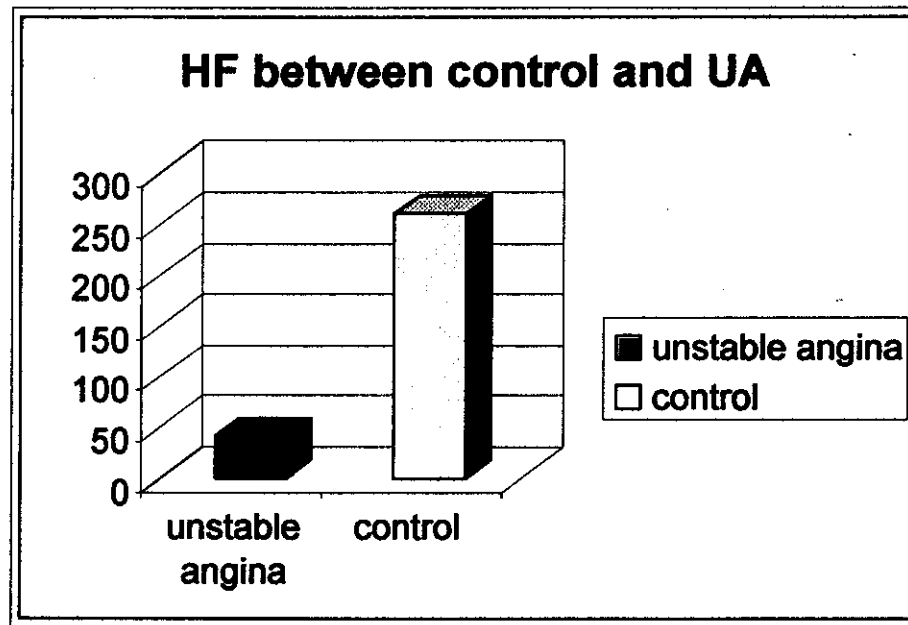


**Figure (3):** There is significant difference in L.F between unstable angina and control group ( $p < 0.01$ ).

**Table (7):** Comparison between patients with unstable angina and controls as regard high frequency (HF).

Variables \ Groups	Control group	Unstable angina	T	P
	Mean $\pm$ SD	Mean $\pm$ SD		
H.F(ms <sup>2</sup> )	246 $\pm$ 14	32.5 $\pm$ 9	46	<0.001

There is significant difference in H.F between unstable angina and control group.

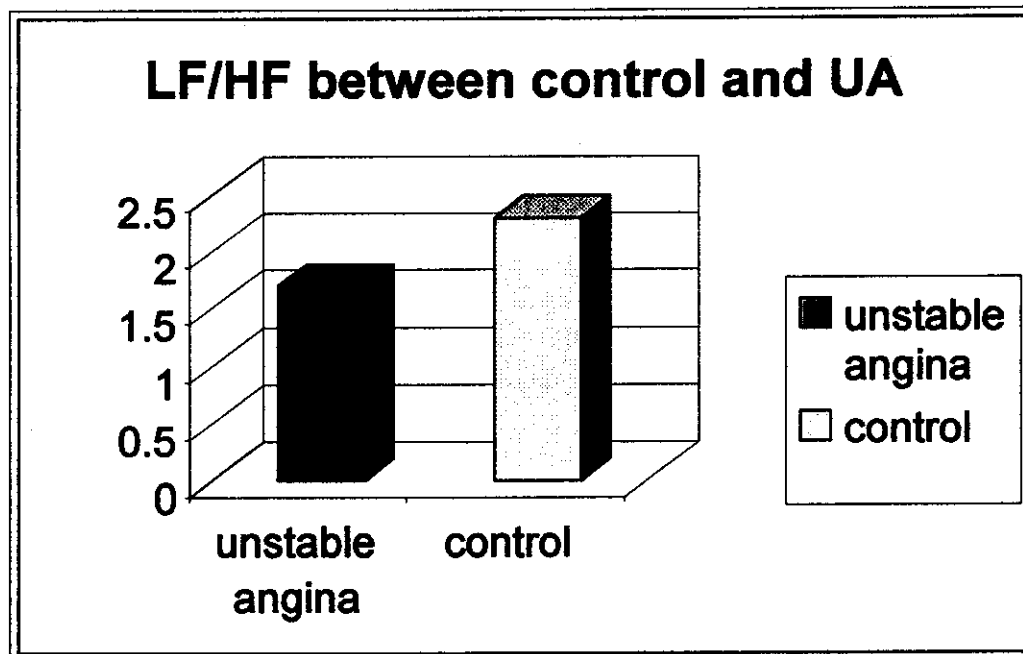


**Figure (4):** There is significant difference in H.F between unstable angina and controls ( $p < 0.01$ ).

**Table (8):** Comparison between patients with unstable angina and controls as regard LF/HF ratio.

Variables \ Groups	Control group	Unstable angina	T	P
	Mean $\pm$ SD	Mean $\pm$ SD		
L.F/H.F	1.6 $\pm$ 0.7	1.5 $\pm$ 0.4	0.4	>0.05

There is no significant difference in L.F/ H.F between patients with unstable angina and controls.



**Figure (5):** There is no significant difference in L.F/ H.F between unstable angina and control group ( $p>0.05$ ).

During short term (two weeks) follow up five patient (10%) developed recurrent chest pain without elevation in cardiac enzymes (no M.I)

However, there were no mortality, arrhythmias or acute myocardial infarction among studied population.

**Table (9):** comparison between patients with and patients without recurrent chest pain as regard different parameters of heart rate variability.

<b>Groups Variables</b>	<b>Without chest pain</b>	<b>With chest pain</b>	<b>T</b>	<b>P</b>
	<b>Mean <math>\pm</math> SD</b>	<b>Mean <math>\pm</math> SD</b>		
NN50	3.2 $\pm$ 1.6	3 $\pm$ 1.5	0.5	>0.05
rMSSD	10 $\pm$ 2	9 $\pm$ 2.5	0.8	>0.05
L.F	50 $\pm$ 9	42 $\pm$ 8	1	>0.05
H.F	31 $\pm$ 8	26 $\pm$ 9	1.3	>0.05
L.F/H.F	1.6 $\pm$ 0.6	1.9 $\pm$ 0.9	2.3	<0.05

No significant difference between patients with and patients without chest pain as regard NN50, rMSSD, L.F and H.F ( $p > 0.05$ ). But there is significant difference between them as regard L.F/H.F ratio ( $p < 0.05$ ).

All subjects with recurrent chest pain had abnormal LF/HF ratio. Whereas, all other subjects without chest pain had such ratio within normal.

## SUBGROUP ANALYSIS

**Table(10): Sex .**

	<b>Males ( No. 32)</b> <b>Mean <math>\pm</math>SD</b>	<b>Females (No. 18)</b> <b>Mean <math>\pm</math>SD</b>	<b>T</b>	<b>P</b>
NN50	3 $\pm$ 1.6	3.2 $\pm$ 1.7	0.6	> 0.05
L.F	42 $\pm$ 9	50 $\pm$ 10	1	> 0.05
L.F/H.F	1.6 $\pm$ .0.7	1.5 $\pm$ 0.9	0.8	> 0.05

There is no significant difference in NN50, L.F and L.F./ H.F ratio between males and females.

**Table (11): smokers versus non smokers.**

	<b>Smokers</b> <b>Mean <math>\pm</math>SD</b>	<b>Non Smokers</b> <b>Mean <math>\pm</math>SD</b>	<b>T</b>	<b>P</b>
Nn50	3.2 $\pm$ 1.5	3.2 $\pm$ 1.6	0.05	>0.05
L.F	50 $\pm$ 9	49 $\pm$ 8	0.4	>0.05
L.F/H.F	1.6 $\pm$ .07	1.5 $\pm$ 0.4	0.4	>0.05

There is no significant difference in NN50, L.F and L.F/H.F ratio between smokers and nonsmokers.



**Table (12):** comparison between patients with single vessel and patients with three vessel disease as regard NN50, LF and LH/HF ratio.

	Single vessel disease (No. 17) Mean $\pm$ SD	Three vessel disease (No. 10) Mean $\pm$ SD	T	P
NN50	5 $\pm$ 1	2 $\pm$ 1	5	<0.01
L.F	57 $\pm$ 6	48 $\pm$ 8	3	<0.05
L.F/H.F	1.6 $\pm$ 0.7	1.7 $\pm$ 0.2	0.8	>0.05

There is significant difference in NN50 and L.F between Single vessel disease and Three vessels disease. But there is no significant reduction in L.F./H.F. ratio between single vessel disease and three vessel disease.

**CORRELATION COEFFICIENT STUDIES**

**Table(13):** Correlation coefficient (r) and probability (p) between HRV (NN50) and different variables.

Variables	NN50	
	r	P
Age	0.2	>0.05
Severity	0.7	<0.01
Ejection Fraction	0.8	<0.01
End Systolic Diameter	-0.03	>0.05
End Diastolic Diameter	-0.02	>0.05

There is significant correlation coefficient between NN50 and severity of coronary artery disease and ejection fraction but no significant correlation coefficient between NN50 and age, ESD and EDD

**Table(14):** Correlation coefficient (r) and probability (p) between HRV (LF) and different variables.

Variables	L.F	
	r	P
Age	0.2	>0.05
Severity	0.7	<0.01
Ejection Fraction	0.8	<0.01
End Systolic Diameter	-0.03	>0.05
End Diastolic Diameter	-0.02	>0.05

There is significant correlation coefficient between L.F and severity of coronary artery disease and ejection fraction but no significant correlation coefficient between L.F and age , ESD and EDD