Dear Editor,

We would like to thank the authors for their interest in our work titled, “Epicardial fat thickness associated with left ventricular myocardial performance in patients with newly diagnosed hypertension,” which was published in the December 2015;43(8):705-713 issue of the Archives of the Turkish Society of Cardiology.[1] As reported, we found that tissue Doppler myocardial performance index was independently associated with epicardial fat thickness (EFT) in patients with newly diagnosed hypertension (HT). It was ultimately suggested that EFT may be used as a predictor of impaired left ventricular global functions in patients with normal left ventricular ejection fraction and newly diagnosed HT.[1]

HT is a common cause of diastolic and systolic heart failure, and these disorders can present in the same patient.[2] There are many causes of HT. It is well known that certain factors, including lifestyle, salt intake, smoking, alcohol use, and use of contraceptives in women can influence blood pressure.[3] These factors were compared between 2 groups, and no statistically significant differences were found. Only rates of smoking were reported.[1]

EFT is a metabolically active organ that produces several proinflammatory, proatherogenic cytokines, and has emerged as a new cardiovascular risk factor.[4] Several methods can be used to measure EFT. Although the gold standards are magnetic resonance imaging or computed tomography, echocardiography can be used effectively for EFT measurement. All echocardiograms were presently performed and analyzed by 2 observers. Echocardiographic techniques and calculations of cardiac dimensions were performed in accordance with the recommendations of the American Society of Echocardiography.[5]

References