



PRESS RELEASE  
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**STUDY DEMONSTRATES CLINICAL UTILITY OF LONGITUDINAL STRAIN  
WITH ECHOINSIGHT® IN PATIENT OUTCOMES WITH CARDIAC  
AMYLOIDOSIS AFTER AUTOLOGOUS HEMATOPOIETIC STEM CELL  
TRANSPLANTATION (A-HSC)**

***Recently Study Was Presented By Research Team from MD Anderson Cancer  
Center at the International Society of Amyloidosis (ISA) Symposia in Sweden***

Ann Arbor, MI, July 12, 2016 – Epsilon Imaging, Inc., a visualization and analysis software provider transforming cardiac diagnostic workflow, today announced a research study was recently presented at the ISA Symposia conference from a team at the MD Anderson Cancer Center. The study, “Outcomes of Patients With Cardiac Amyloidosis After Autologous Hematopoietic Stem Cell Transplantation and its Association With Longitudinal Strain Analysis Per Speckled Tracking Echocardiography,” presented by W Yusuf, J Banchs, RA Quintana-Quezada, et al. demonstrated that longitudinal strain with EchoInsight may be clinically useful in improving patient outcomes with cardiac amyloidosis after autologous hematopoietic stem cell transplantation.

“Light-chain amyloidosis (AL) cardiac involvement is caused when antibody producing cells do not function properly and generate abnormal protein fibers that can deposit and damage different organs,” said Jose Banchs, MD, director of echocardiography, MD Anderson Cancer Center. “Today, assessing for cardiac amyloidosis (CA) is currently the standard of care and part of routine staging. A-HSC has been associated with improved survival compared to chemotherapy. However, transplant-related mortality (TRM) is higher in patients with CA. With increasing research and guidelines, strain imaging appears to be a more accurate predictor of cardiac outcomes in comparison to traditional cardiac functional measures. In this study, we analyzed AL patients with cardiac involvement and their changes after A-HSC with longitudinal strain (LS) along with their outcomes.”

From January 1998 to March 2014, a total of 37 patients with AL and cardiac involvement diagnosed by endomyocardial biopsy underwent an A-HSC at MD Anderson. Using speckle tracking echo, LS values from basal, mid and apical segments of the LV were averaged into 3 regional LV values. Cardiac involvement, cardiac and organ responses were defined according to previously established consensus criteria.

“Previous studies from our group have indicated that A-HSC is a safe procedure in patients with AL and cardiac involvement,” said Jose Banchs. “The current literature supports that myocardial infiltrative disease is a continuum that may start in the sub endocardium of the basal region of the heart and mid cavity with relative sparing to the apex. We found the largest LS improvement in the mid region of the heart after A-HSC, which could represent a reversal of this continuum. This study demonstrates use of LS for assessment and monitoring could provide useful clinical information that ultimately may improve patient management in this population.”

**About Epsilon Imaging**

As a provider of workflow enhancing solutions for cardiology, Epsilon Imaging is transforming cardiac diagnostic workflow with a vendor neutral suite of visualization and analysis software applications designed for echocardiography. EchoInsight provides clinical applications for improved quantification of the heart with clinical strain imaging. Applications assist clinicians to enhance, standardize, and streamline interpretation and monitoring of echo studies. Learn more by visiting [epsilon-imaging.com](http://epsilon-imaging.com).