Key question
What is the diagnostic yield of N-terminal pro-brain natriuretic peptide (NT-proBNP) in patients with suspected heart failure (HF) referred from primary care?

Key finding
The majority of patients referred from primary care with suspected HF and a NT-proBNP >400 ng/L have HF. Most patients have either valvular disease or atrial fibrillation (AF). In patients with a NT-proBNP >400 ng/L, NT-proBNP levels correctly identified 64.5% of patients with HF. The remainder were misclassified as valvular disease, AF or no cardiac diagnosis.

Take home message
NT-proBNP cannot reliably discriminate between HF, valve disease or AF. On this basis, it may be best employed in detecting cardiac disease in general, including valve disease and atrial fibrillation (AF), rather than HF per se.