

## ABSTRACT

### **Background:**

The incidence and prevalence of heart failure especially in India are on the rise so is the number of hospital admissions for management of acute decompensated heart failure. Though there are studies reported in the literature on factors influencing the in-hospital mortality of western patients admitted with acute decompensated heart failure, data related to Indian counterparts are lacking.

### **Aim and objectives:**

To identify predictors of in-hospital mortality in Indian subset of patients hospitalized for acute decompensated heart failure and compare them with those of western studies.

### **Materials and methods:**

A total of hundred random patients admitted to our medical college hospital for acute decompensated heart failure were included in the study. Their various epidemiological, clinical and investigational characteristics were analyzed in relation to their in-hospital mortality.

**Results:**

Out of twenty factors studied, six emerged as significant predictors of in-hospital mortality, viz. poor NYHA grade (p 0.014), presence of peripheral edema (p 0.041), low ejection fraction (p 0.004), high blood urea level (p 0.001), low hemoglobin level (p 0.010) and presence of chronic kidney disease (p 0.006). On comparison, these results are different from those of western studies.

**Conclusion:**

As ours is a small study, its results that differ from western data are to be confirmed by large-scale Indian trials so that if any difference still exists, management strategy and guidelines specific for Indian patients with acute decompensated heart failure especially in resource restrained settings can be devised.