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Acute Coronary Syndromes

IMPACT OF ATRIAL FIBRILLATION ON HOSPITAL AND 1-YEAR OUTCOME OF MYOCARDIAL INFARCTION: RESULTS OF THE OPTAMI REGISTRY

Poster Contributions
Hall C
Saturday, March 29, 2014, 3:45 p.m.-4:30 p.m.

Session Title: Acute Coronary Syndromes: Comorbid Considerations
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Background: Atrial fibrillation (Afib) is the most common arrhythmia in patients (pts) with acute myocardial infarction (MI), nevertheless little is known about its influence on the choice of therapeutic strategy and the clinical course of these pts.

Methods: The OPTAMI registry (Optimized Therapy of Acute Myocardial Infarction) enrolled consecutive pts with STEMI or NSTEMI in 33 centres (27 with cathlab) in Germany to document patient characteristics, acute therapy as well as hospital and 1-year outcome. We examined the impact of Afib on outcome of MI in the era of reperfusion therapy.

Results: A total of 3189 pts were enrolled into OPTAMI. The prevalence of Afib was 5.2% in STEMI and 9.7% in NSTEMI. Pts with Afib were older, more often female and had more comorbidities, only 52.3% were taking oral anticoagulants at the time of admission. Primary PCI rates in STEMI were similar for pts with and without Afib, wheareas early invasive strategy in NSTEMI was more frequent among pts without Afib. There was no difference in the use of DES. Hospital mortality was higher for Afib pts with STEMI but not for those with NSTEMI, probably due to high reperfusion rates and overall low mortality. Mortality rates at 1-year were significantly higher among Afib pts for both STEMI and NSTEMI.

Conclusion: Afib was present in 7.4% of MI. Pts with Afib had higher 1-year mortality despite comparable rates of medical and interventional treatment. Afib was a significant predictor of impaired outcome of MI even in the era of reperfusion therapy.

	STEMI		p-value	NSTEMI		p-value
	Afib (n=85)	No Afib (n=1548)		Afib (n=151)	No Afib (n=1405)	
Age (years)	74	63	<0.0001	77	68	<0.0001
Females	41.2%	27.6%	<0.01	37.7%	29.3%	<0.05
Diabetes	36.5%	22.7%	<0.01	49%	33%	<0.0001
Hypertension	84.7%	65%	<0.001	86.1%	78.1%	<0.05
Hyperlipidemia	40%	38.4%	0.76	49%	48.6%	0.93
Prior MI	18.8%	15%	0.34	37.7%	30.3%	0.06
Prior PCI	17.6%	13.5%	0.29	31.8%	26.2%	0.14
Prior CABG	8.2%	3.5%	<0.05	13.9%	11.7%	0.43
Prior stroke	10.6%	3.8%	<0.01	13.9%	8%	<0.05
Renal failure	27.1%	8.6%	<0.0001	35.8%	18.4%	<0.0001
Coro-Angio<48h	90.6%	95.5%	<0.05	76.8%	86.2%	<0.01
PCI	80.0%	86.3%	0.10	52.7%	64.8%	<0.01
Aspirin	96.5%	96.8%	0.86	93.4%	94.9%	0.44
Clopidogrel	82.4%	91.5%	<0.01	80.1%	86.2%	<0.05
Heparin	96.5%	97.5%	0.57	94.0%	95.4%	0.47
GP IIbIIIa	55.3%	62.0%	0.22	19.9%	28.7%	<0.05
Hospital mortality	12.0%	5.9%	<0.05	8.7%	5.1%	0.07
1-year mortality	34.2%	10.8%	<0.0001	32.7%	13.9%	<0.0001