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## QUALITY OF CARE AND OUTCOMES ASSESSMENT

### POST-MI ANGINA STATUS AND QUALITY OF LIFE IN OLDER VS. YOUNGER ADULTS

ACC Poster Contributions

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**Background:** A primary goal for patients (PTS) who survive a myocardial infarction (MI) is to minimize symptoms and optimize health-related quality of life (HRQL). Whether the impact of changes in angina frequency (AF) on HRQL in older adults is as important as it is in younger adults is unknown.

**Methods:** We evaluated 1,621 post-MI PTS enrolled in a multi-center prospective study (PREMIER). AF and HRQL were evaluated at 1 and 6 months following MI using the Seattle Angina Questionnaire (SAQ) AF and HRQL domains, respectively. We compared changes in HRQL scores between older (age greater than or equal to 70, n=415) and younger (age < 70, n=1206) adults as a function of change in SAQ AF score.

**Results:** For both younger and older PTS, change in AF correlated strongly with change in HRQL. However, after adjusting for baseline HRQL and 20 other covariates, older PTS with increased AF experienced a significantly smaller decline in HRQL scores compared to younger PTS, while older PTS with no change or decreased AF had significantly greater improvements in HRQL scores ( $p < 0.001$  for all group comparisons, Figure).

**Conclusion:** In stable post-MI PTS, change in AF is correlated with HRQL in both older and younger PTS. However, older adults generally have greater HRQL improvements than younger adults from maintaining or reducing their AF. These data indicate that angina relief is at least as important in older PTS as in younger PTS for optimizing HRQL following acute MI.

