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## PERCUTANEOUS CORONARY INTERVENTION FOR ACUTE CORONARY SYNDROME COMPARISON BETWEEN WEEKEND VERSUS WEEKDAY PRESENTATION

### i2 Poster Contributions

Ernest N. Morial Convention Center, Hall F  
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Session Title: PCI - Acute MI

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Authors: *Satoshi Mogi, Shun Kohsaka, Hiroaki Miyata, Akio Kawamura, Shigetaka Noma, Masahiro Suzuki, Takashi Koyama, Shiro Ishikawa, Yukihiro Momiyama, Susumu Nakagawa, Koichiro Sueyoshi, Shunsuke Takagi, Toshiyuki Takahashi, Shinichi Takamoto, Satoshi Ogawa, Keiichi Fukuda, Keio University School of Medicine, Tokyo, Japan*

**Background:** Previous reports have shown higher morbidity and mortality for patients with acute coronary syndrome (ACS) who arrived on weekends compared with weekday. We analyzed the modern PCI registry developed compatibly with American College of Cardiology National Cardiovascular Data Registry, and analyzed the difference of in-hospital mortality and complication rate by the day of the week.

**Methods:** We analyzed data from 853 ACS patients enrolled in a 14-center multicenter registry. Weekend admission was defined as presentation on Saturday and Sunday, and the association between day of the admission and the in-hospital mortality and bleeding complication was evaluated. The bleeding complication was defined as a drop in hemoglobin >3.0g/dl within 72hrs after the procedure.

**Results:** About fifth of the patients (22.2%) presented in the weekend. The in-hospital mortality and bleeding complication rate was 2.1% and 9.5% for weekend presenters compared with 3.3% and 6.8% for weekday presenters (P=0.48 and 0.21, respectively). After adjusting for demographic and clinical factors, the day of the presentation was not associated with higher in-hospital mortality and bleeding complication rate (adjusted OR 0.48, 95%CI 0.63-6.29: P=0.24, and adjusted OR 1.27, 95%CI 0.68-2.37: P=0.45, respectively). Same trend was observed when patients who underwent PCI on the following day were analyzed separately.

**Conclusions:** Weekend presentation was not associated with an increased risk of in-hospital mortality or bleeding complications.