PREVALENCE AND OUTCOMES OF COGNITIVE IMPAIRMENT IN OLDER ADULT SURVIVORS OF ACUTE MYOCARDIAL INFARCTION

ACC Poster Contributions
Georgia World Congress Center, Hall B5
Monday, March 15, 2010, 9:30 a.m.-10:30 a.m.

Session Title: Outcomes In the Elderly
Abstract Category: Outcomes Assessment
Presentation Number: 1140-173

Authors: S. Michael Gharacholou, Kimberly J. Reid, Harlan M. Krumholz, Eric D. Peterson, Karen P. Alexander, Mayo Clinic, Rochester, MN, Duke University, Durham, NC

Background: Cognitive impairment (CI) is prevalent in older community dwelling adults, yet its prevalence and impact post acute myocardial infarction (AMI) have not been described.

Methods: We assessed CI among 799 older patients (pts) (age≥ 65 yrs) 1 month post-AMI in TRIUMPH, a national AMI registry. Cognitive function was assessed using the Telephone Interview of Cognitive Status-Modified (TICS-M; score range 0-39) adjusted for level of education. Pts were stratified as normal (score >22), mildly impaired (score 19-22) or moderate/severely impaired (score <19). Cognitive function, characteristics, and mental (MCS) and physical (PCS) QOL using the short form (SF-12) at 1 year are described.

Results: Mean TICS-M score of the population was 19.5 ± 9.1; 44.7% normal, 55.3% cognitively impaired (20.7% mildly and 34.7% moderate/severely impaired). Bivariate associations with cognitive impairment included lower education, female sex, non-caucasian race and prior cardiac disease or stroke (p <0.05). Depression and medication treatment did not differ by groups. After multivariable adjustment, preliminary 1 year results demonstrated that cognitive impairment was associated with lower reported mental and physical QOL domains (Figure).

Conclusion: Cognitive impairment is prevalent, being present in over half of older adult survivors of AMI. Degree of CI is associated with differential MCS and PCS QOL outcomes, findings which may further improve the understanding of process and outcomes post-AMI.

![Graph showing parameter estimates of mental (MCS) and physical (PCS) QOL by degree of cognitive impairment in older adult survivors of acute MI.](image-url)