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Acute Coronary Syndromes

GENDER DISPARITY IN RISK FACTORS AND OUTCOME IN YOUNG PATIENTS WITH ST ELEVATION MYOCARDIAL INFARCTION

Poster Contributions
Hall C
Sunday, March 30, 2014, 9:45 a.m.-10:30 a.m.

Session Title: Acute Coronary Syndromes: STEMI
Abstract Category: 1. Acute Coronary Syndromes: Clinical
Presentation Number: 1190-239

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Background: Coronary artery disease (CAD) remains the leading cause of death in the US. Recent studies suggest a changing pattern of risk factor profile in patients with CAD. The objective of our study was to compare the current short-term outcome and risk factor profile of young women and men with ST elevation myocardial infarction (STEMI).

Methods: The Nationwide Inpatient Sample (NIS), part of the Healthcare Cost and Utilization Project (HCUP), is the largest publicly available inpatient database designed to provide information on characteristics and outcomes of patients discharged from US hospitals. Using the NIS we identified all patients 18 to 55 year-old who were admitted with a primary diagnosis of STEMI during the calendar years 2008 to 2010.

Results: Our study population included 33,676 discharges, including 26,609 men and 7,067 women. Women in general had a higher prevalence of established risk factors especially obesity and Diabetes, and had higher mortality compared to men (see table1). Female gender remained an independent predictor of increased in-hospital mortality even after adjusting for pertinent covariates using logistic regression analysis, (p = 0.009, OR 1.232{1.052-1.443}).

Risk Factors/ Mortality	Male (n=26,609)	Female (n=7,067)	*p*-Value
Smoking	52.9%	56.1%	<0.000
Hypertension	49.4%	51.2%	<0.006
End Stage Renal Disease	0.6%	1.3%	<0.000
Obesity	12.5%	20.1%	<0.000
Chronic Kidney Disease	2.7%	3.4%	<0.003
Diabetes	20.9%	29.8%	<0.000
Mortality Rate	2.3%	3.2%	<0.000

Conclusions: Among adults 55 years or younger presenting with STEMI, women had a higher prevalence of traditional risk factors and higher in-hospital mortality compared to men.