



Acute Coronary Syndromes

CHARACTERISTICS AND OUTCOMES OF MEDICALLY MANAGED PATIENTS WITH NON-ST-SEGMENT ELEVATION ACUTE CORONARY SYNDROMES: INSIGHTS FROM THE MULTINATIONAL EPICOR ASIA STUDY

Poster Contributions

Poster Hall B1

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Session Title: Epidemiology of ACS Events: Of Comorbidity and Long Term Trends

Abstract Category: 2. Acute Coronary Syndromes: Clinical

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Background: Many NSTEMACS patients are medically managed without coronary revascularization. The reasons vary and may impact prognosis.

Methods: EPICOR Asia (NCT01361386) is a prospective study of hospital survivors post ACS enrolled in 219 hospitals from 8 countries/regions in Asia (06/2011-05/2012). All medically managed NSTEMACS patients in EPICOR Asia were classified into 3 groups: 1) no coronary angiography (CAG-); 2) non-significant coronary artery disease (CAD) on angiogram (CAG+ CAD-); and 3) significant CAD (CAG+ CAD+). We compared baseline differences between groups, and report 1-y mortality rates.

Results: Of 6,164 NSTEMACS patients, 2,272 (37%) were medically managed only, with 1,339 (59%), 254 (11%) and 679 (30%) patients in the CAG-, CAG+ CAD-, and CAG+ CAD+ groups, respectively. There were marked differences in number of NSTEMACS patients medically managed among the 8 countries/regions (13-81%). Between-group differences were seen in baseline characteristics (Table). CAG+ CAD- patients were younger with fewer CV risk factors than CAG+ CAD+. CAG- patients were older, more likely with known CV disease, more frequently admitted to hospitals with no cath lab, and had the highest 1-y mortality (6.9% versus 3.3% for EPICOR Asia overall).

Conclusion: NSTEMACS patients who are medically managed are a heterogeneous group with different clinical features and outcomes e.g. mortality risk. The factors underlying different management strategies, and to improve prognosis, need to be identified.

| | CAG- | CAG+ CAD- | CAG+ CAD+ | p [†] |
|--------------------------|-----------|-----------|-----------|----------------|
| n, (%) | 1339 (59) | 254 (11) | 679 (30) | — |
| Age, mean (SD), years | 65 (12) | 59 (12) | 62 (11) | <0.001 |
| Age ≥75 years, % | 24 | 12 | 12 | <0.001 |
| Male, % | 62 | 63 | 69 | 0.008 |
| Hypertension, % | 65 | 53 | 66 | <0.001 |
| Hypercholesterolemia, % | 21 | 20 | 21 | 0.84 |
| Diabetes, % | 29 | 26 | 33 | 0.039 |
| Family history of CAD, % | 9 | 8 | 10 | 0.49 |
| Obesity, % | 7 | 7 | 5 | 0.39 |
| Current smoker, % | 22 | 17 | 24 | 0.23 |
| Previous CVD, % | 43 | 31 | 40 | 0.001 |
| No cath lab, % | 11 | 0 | <1 | <0.001 |
| 1-year mortality, % | 6.9 | 2.4 | 4.0 | 0.002 |

[†]Chi-square test. CAD, coronary artery disease; CVD, cardiovascular disease; SD, standard deviation