



## Ischemic Heart Disease

### LONG-TERM OUTCOME IN PATIENTS AFTER PRIMARY PERCUTANEOUS CORONARY INTERVENTION - CAN WE RISK-STRATIFY?

Poster Contributions

For exact presentation time, refer to the online ACC.22 Program Planner at <https://www.abstractsonline.com/pp8/#!/10461>

Session Title: Ischemic Heart Disease Flatboard Poster Selections: Population Science

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**Background:** Long-term follow-up after primary percutaneous coronary intervention (pPCI) for ST elevation myocardial infarction (STEMI) beyond 5 years is poorly described. No routine risk-stratification system is established.

**Methods:** This is a retrospective, academic, two-centre analysis of all consecutive patients presenting with acute STEMI during the period from March of 2008 to December of 2019. Baseline characteristics were gathered from prospective local registries and based on initial hospitalization. Mortality data was acquired from a national registry.

**Results:** The study enrolled 5263 patients treated by pPCI and found cardiovascular mortality as the most frequent cause of death (65.0%) in the long-term follow-up to 12-years. Cardiovascular mortality dominated even in landmark analysis beyond 1 year. Significant predictors for long-term cardiovascular mortality identified by multivariate analysis were age; history of diabetes mellitus, renal insufficiency, or heart failure; Killip class and successful pPCI. The predictive model was built to evaluate the risk for cardiovascular death with a high discrimination value (C-statistic = 0.84).

**Conclusion:** Cardiovascular diseases remain the leading cause of long-term mortality after pPCI in the Central European population. The novel predictive model provides risk stratification and thus might help us identify patients who might most benefit from aggressive secondary prevention measures.

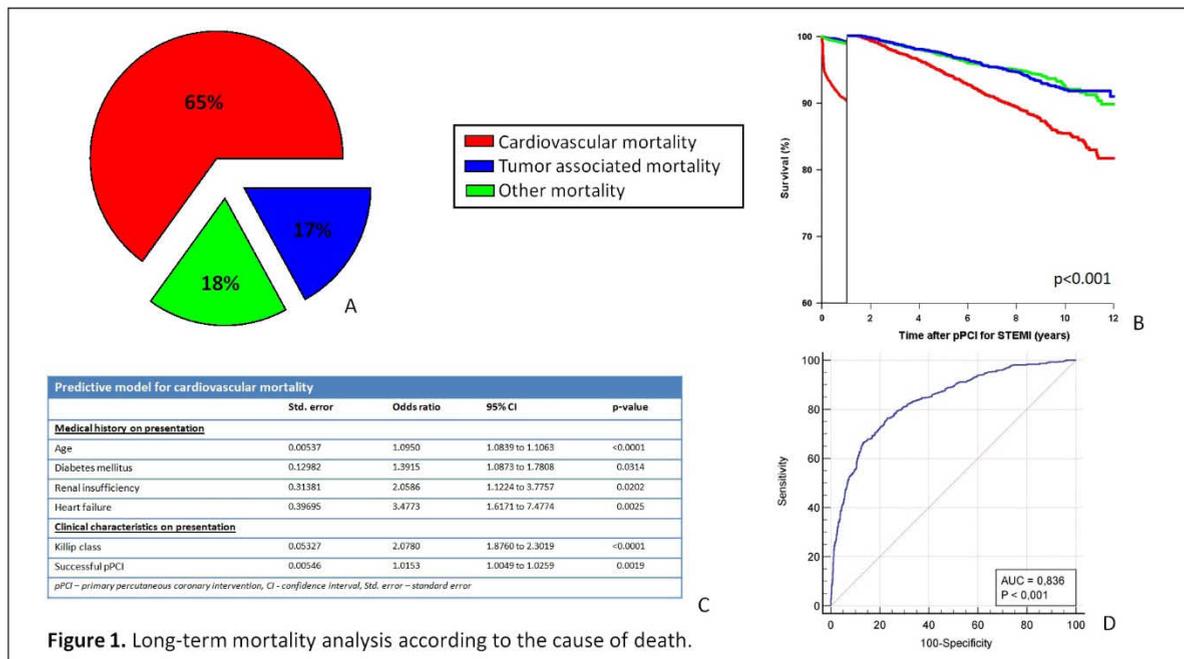


Figure 1. Long-term mortality analysis according to the cause of death.