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Coronary angiographic profile of diabetic women with acute coronary syndrome in south India

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Aim: Diabetes mellitus (DM) is known to be a major risk factor for the development of coronary artery disease (CAD). The aim of this study was to assess and compare the extent and the severity of coronary artery disease (CAD) in diabetic and non-diabetic women with acute coronary syndrome.

Methods: Angiographic findings of diabetic and non-diabetic women, who presented with acute coronary syndrome were analyzed and compared. Two interventional cardiologists determined the presence and characteristics of atherosclerotic lesion, according to the American Heart Association classification.

Results: Two hundred and eighty three (283) women who presented with acute coronary syndrome were studied, of these 166 with mean age of 60.84±9.49 years were diabetic and 117 with mean age of 58.70±11.78 years were non-diabetic. Unstable angina was significant among non-diabetic women [99 vs. 84, p=0.035, OR=1, (CI 0.349-0.965)], while ST elevation myocardial infarction (STEMI) was significantly higher among diabetic women [36 vs. 12, p=0.012, OR 2.423 (CI 1.201-4.89)]. Diabetic women had higher incidence of triple vessel disease (TVD) [44 vs. 12, p<0.001 OR 3.156, (CI 1.584-6.289)], while non-diabetic women had higher incidence of angiographically normal epicardial coronary arteries [14 vs. 30, p<0.001 OR=1, (CI 0.134-0.531)], segmental distribution showed proximal segment disease was the commonest, however, diabetic women had greater number of lesion per patient (2.47 vs. 1.31). Diabetics also had greater number of left mainstem disease, though not statistically significant (10 vs. 3, p=0.735). LAD (left anterior descending artery) was more commonly involved among non-diabetic women (112 vs. 60, p=0.007). Diabetics had greater type B2 [124 vs. 16, p<0.001, OR = 3.692, (CI 2.113-6.449)] and type C [228 vs. 69, p=0.027, OR=1.514, (CI 1.047-2.190)] lesions, while non-DM had greater percentage of type A [20 vs. 28, p<0.001, OR=1, (CI 0.126-0.423)] and B1 [48 vs. 44, p<0.001, OR=1 (CI 0.209-0.525)] lesions.

Conclusion: These findings confirm that the diabetic women have more severe and extensive coronary artery disease than the non-diabetics, especially among south Indian women.

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