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Patients with non-obstructive coronary artery disease admitted with acute coronary syndrome carry a better outcome compared to those with obstructive coronary artery disease

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Purpose: The present study aimed to investigate the clinical profile, in-hospital and 3-months outcome of ACS patients with insignificant coronary stenosis on a coronary angiography.

Methods: This prospective observational study included 200 consecutive patients admitted with ACS. Group I (100 patients) included patients with insignificant CAD (all lesions <50% stenosis). Group II (100 patients) included patients with one or more lesions >70% stenosis. Patients with previous CABG were excluded.

Results: Patients with insignificant CAD were significantly younger (61 vs. 67 years, $p<0.001$), more likely to be females (41% vs. 23%, $p=0.006$), less likely to smoke ($p=0.006$), less likely to have diabetes mellitus ($p<0.001$), and less likely to have history of CAD ($p=0.042$) or prior PCI ($p=0.037$). At presentation these patients were also less likely to have typical anginal pain (61% vs 91%, $p<0.001$), less likely to have heart failure (9% vs 30%, $p<0.001$), less likely to have ischemic ST-segment changes (10% vs 46%, $p<0.001$), had lower elevations in peak troponin I ($p<0.001$) and CK-MB levels ($p<0.001$), with lower LDL-C ($p=0.006$), and higher HDL-C levels ($p=0.020$). They were less likely to be treated with thienopyridines ($p<0.001$), statins ($p<0.001$), b-blockers ($p=0.002$), ACEI/ARBs ($p=0.007$), and higher rates of calcium channel blocker therapy ($p<0.001$), this trend continued at discharge. They had lower prevalence of major adverse clinical events at follow up (readmission for ACS ($p=0.009$), revascularization ($p=0.035$), recurrent chest pain ($p=0.009$), cardiogenic shock ($p=0.029$)).

Conclusion: Patients with ACS and insignificant CAD have different clinical profile and outcome compared to those with significant disease.

Biography

Adel Bakr completed Master Degree of Cardiology, from Ain Shams University, Cairo, Egypt in May 2012. After four months, he started attending for PhD of Cardiovascular Diseases, Cairo University, Cairo, Egypt. Through 13 years, he has worked in more than eight different hospitals in Cardiovascular Department in ascending ranks and positions till being an associate consultant in Saudi German Hospital, Riyadh, Saudi Arabia.

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