1550499

Early Revascularization in Elderly Patients ≥80 years-Old Presenting with Acute Myocardial Infarction and Cardiogenic Shock

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Background: The benefit of early revascularization in cardiogenic shock is well established. However, the efficacy of an invasive strategy in shock pts ≥80 years-old is controversial. Methods: We retrospectively identified 35 pts ≥80 years-old with cardiogenic shock due to acute MI in whom a primary coronary intervention strategy was implemented. Clinical characteristics and survival were analyzed. Results: Mean age was 85±3 (range 80-97) years. Mean symptom-to-admission and door-to-balloon times were 319±343 (range 46-1540) and 126±76 (range 30-448) minutes, respectively. Eighteen (51%) had anterior infarction, 13 (37%) were mechanically ventilated, 24 (69%) received intra-aortic balloon pump and 11 (31%) needed a temporary pacing. Mean SYNTAX and TIMI STEMI risk scores were 28±16 (range 5.0-58.5) and 10.7±1.5 (range 8-14) points, respectively. Overall, 2 patients died before revascularization, 27 underwent PCI, 4 underwent emergency CABG and 2 were treated medically following diagnostic angiography. Mortality rates were 14% during the first day, 48% in-hospital, 51% at 30 days and 60% at 1 year. In univariate analysis, anterior infarction predicted increased mortality (p=0.018), whereas the RCA as culprit vessel was associated with lower mortality (p=0.005). Increased TIMI STEMI risk score predicted mortality (p=0.002) but SYNTAX score did not. Interestingly age, symptom-to-admission and door-to-balloon times did not predict outcome. Conclusion: Cardiogenic shock complicating acute MI in pts ≥80 years-old carries a high mortality rate. Following early urgent revascularization half the pts were alive at 1 month and 40% at 1 year. Policy regarding health care resource allocation for intervention and intensive cardiac care in these patients should be made at an institutional and societal level.

Age (years): (Mean±SD)	85±3
Female sex: n (%)	14 (40)
Diabetes: n (%)	7 (20)
STEMI: n (%)	32 (91)
NSTEMI: n (%)	3 (9)
Time from symptoms to admission (minutes): (mean±SD)	319 ± 343
Time from Door to balloon (minutes): (mean±SD)	126 ± 76
Cardiopulmonary rescusitation: n (%)	9 (26)
Intra-aortic balloon counterpulsation: n (%)	24 (69)
Temporary pacing: n (%)	11 (31)
SYNTAX score: (mean±SD)	28±16
TIMI RISK score: (mean±SD)	10.7±1.5
PCI: n (%)	27 (77)
CABG: n (%)	4 (11)
24 hour mortality: n (%)	5 (14)
In-hospital mortality: n (%)	17 (49)
30-day mortality: n (%)	18 (51)