

Gender Differences in Demographics, Management and Outcome in Participants in the Registry of Acute Coronary Syndrome in Israel - Results of the ACSIS 2008

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Background: There has been increasing interest in gender differences in the presentation, management and outcome of patients with ACS.

Objectives: To compare and characterize gender differences in the management and outcome of ACS patients who participated in the bi-monthly biannual Acute Coronary Syndrome in Israel Survey (AC SIS) 2008.

Methods: Assessment of the ACSIS data on ACS patients for 2008.

Results: Selected epidemiological, clinical and outcome data are presented:

ADMISSION ECG	STE			NSTE		
	Female n=145	Male n=620	P value	Female n=217	Male n=776	P value
Age (median, years)	71	57	0.001	73	63	0.001
Previous MI (%)	22.1	23.3	0.82	29.6	40.1	0.005
Previous AP (%)	23.6	23.3	0.92	49.3	51.9	0.49
Prior PCI/CABG (%)	18.5	26.4	0.03	35.5	49.3	0.003
Diabetes (%)	31.7	28.8	0.48	53.5	40.2	0.001
HTN (%)	59.9	45.6	0.001	79.3	63.2	0.001
Smoker (%)	40.5	51.5	0.001	13.8	36.5	0.001
Typical Chest pain (%)	86.9	90.3	0.22	80.6	83.9	0.25
Time from onset to seeking help (median, minutes)	81	81	0.35	176	162	0.71
Angiography (%)	86.2	94.5	0.001	76	87.1	0.001
IIb/IIIa antagonist (%)	60.4	70.4	0.047	0	68.8	0.025
Plavix before PCI (%)	96.4	86.7	0.014	33.3	94.7	0.003
Subacute stent thrombosis	4.7	1.2	0.029	1.4	0.3	0.033
ASA (%)	94.1	98.1	0.05	96.3	97.8	0.21
Adj. 7-day mortality (%)	7.2	2.8	0.029	0.6	1.9	0.11
Adj. 30-day mortality (%)	7.4	4.9	0.47	4.2	2.8	0.35
Adj. 30-day MACE (%) (mortality/ non-fatal MI/UAP)	20.8	13	0.049	13.7	12.7	0.35

In addition, significantly more females in the STEMI group had free wall rupture (3.8%), tamponade (3%) and primary VF (6.2%) compared to males (0.6%, 0.5% and 2.6%, respectively). CHF of any class was significantly more common in non-STEMI females (21.3%) compared to males (10.4%).

Conclusions: The ACSIS survey data demonstrated that female patients with ACS were older and thus more often had concomitant diseases. They also received reperfusion therapy less frequently and generally had a poorer outcome.