האיגוד הקרדיולוגי בישראל האינוד הישראלי לכירורגית לב וחזה ו זוג גוד הקרדיולוגי בישראל האינוד הישראלי לכירורגית לב וחזה וואיגוד הקרדיולוגי בישראל





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Ejection Fraction and Long-Term Mortality in Heart Failure Patients Real World Outcome Data from the Heart Failure Survey in ISrael (HFSIS)

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Background and Aims

- Contemporary heart failure (HF) therapies have not resulted in improved outcome among HF patients with preserved left ventricular ejection function (LVEF).
- We sought to evaluate the differential effect of LVEF on long term (4-year) mortality following hospitalization for acute HF patients in a real world setting.





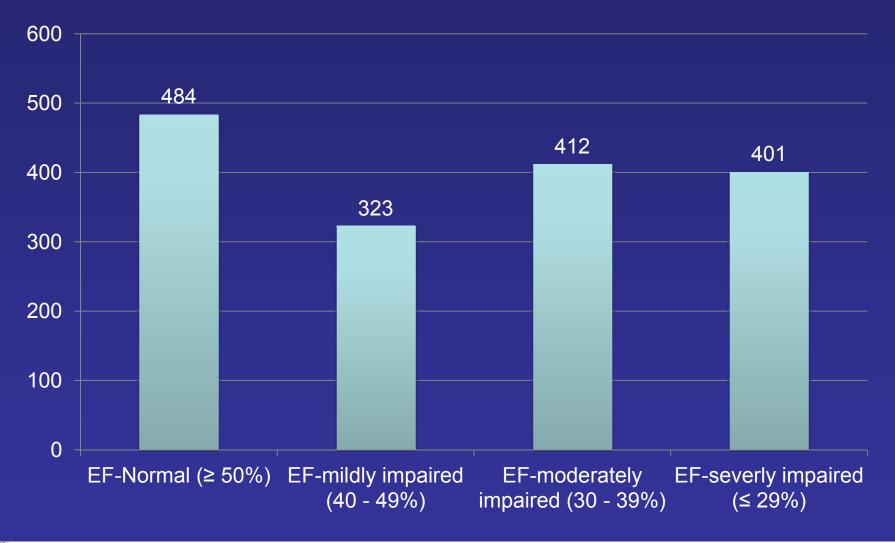
Heart Failure Survey in ISrael (HFSIS)

- Conducted on 3-4/2003
- Internal medicine and cardiology departments.
- Included all hospitalized HF patients (n=4102)
- HF as primary diagnosis (n=2212)
- Among whom available EF data (n=1620, 63%)





Patient Distribution By LVEF Category





Baseline Characteristics

		Mildly	Moderately	Severely
	Preserved	Reduced	Reduced	Reduced
Age, years, mean	76	73	73	73*
Women	63%	44%	33%	27%*
Hypertension	82%	75%	68%	59%*
Obesity	31%	26%	21%	17%*
Diabetes Mellitus	40%	46%	49%	47%*
NYHA Class III-IV	41%	38%	24%	58%*
Ischemic Etiology	51%	79%	89%	82%*

* P-value < 0.05

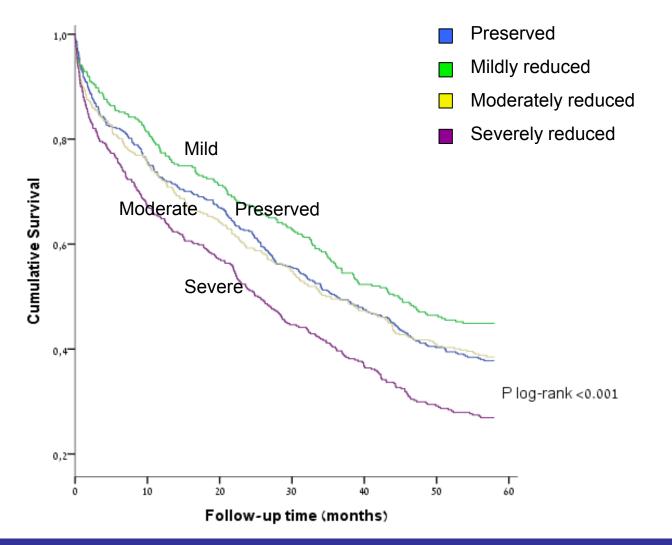


Multivariate-adjusted Cox Proportional-Hazards Model for 4-Year All-Cause Mortality*

Variable	Hazard Ratio	P-Value
Mildly reduced LVEF vs. Preserved LVEF	0.92	0.41
Moderately LVEF vs. Preserved LVEF	1.01	0.90
Severely LVEF vs. Preserved LVEF	1.20	0.04

Model adjusted for age, gender, DM, SBP, NYHA class, Hb, Na and GFR



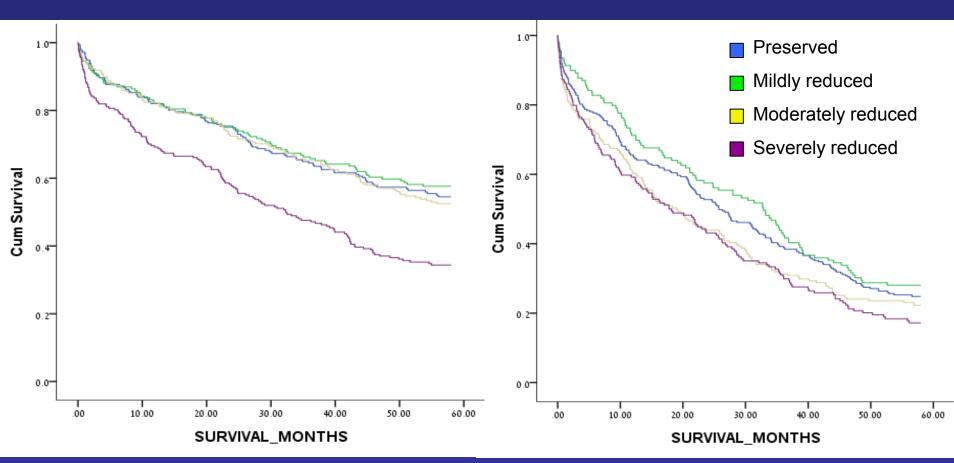




Cumulative Survival by Age

≤ 75

> 75



p-value for age-by-LVEF interaction = 0.03



Conclusions

- Patients hospitalized for HF who have preserved LVEF experience similar long-term mortality as patients with mild or moderate reductions in LVEF
- Severely reduced LVEF remains an independent predictor of long-term mortality in this population.
- The differential effect of LVEF on long-term mortality is significantly attenuated in the older age-group.



