

HEART FAILURE 1

Results: During 20 years off follow-up, 437 (74.1%) patients died; they were significantly different for many clinical features from living patients. During follow-up BB TIT percent was higher among living patients 55.6% vs. 30.6% for the patients who died. 196 (33%) patients had heart failure (HF) at admission and their BB TIT percent was lower comparing to patients who did not presented with HF (43.6% vs. 25.6%) respectively. At Cox regression analysis using a model adjusted for age, gender, DM, heart rate at admission, diabetes, HF and albuminuria BB TIT showed a long term protective effect (HR ¼ 0.9 (95%CI¼0.993–0.998) p¼ 0.002). Using the same model, similar effect was observed among patients who did not have HF (HR ¼ 0.9 (95%CI¼0.991–0.998) p¼ 0.007) but not among patients who suffered from HF at admission (HR ¼ 0.9 (95%CI¼0.993–1.0) p¼ 0.22). Likewise, BB TIT showed a protective effect in patients who did not have albuminuria at admission but not for patients who did (HR ¼ 0.9 (95%CI¼0.989–0.997) p¼ 0.002) and (HR ¼ 0.9 (95%CI¼0.993–1.0) p¼ 0.10).
Conclusions: Beta-blocker time intensity treatment across 20 years off follow up after ACS seems to be more protective for global mortality in the non-severely ill patients and less protective in severely ill patients.

C22

BETA-BLOCKER TIME INTENSITY TREATMENT ACROSS 20 YEARS OF FOLLOW UP AFTER ACS THE ABC STUDY ON ACUTE CORONARY SYNDROME

F. Cavuto, G. Berton, H. Mahmoud, M. Mahmoud, R. Cordiano, R. Palmieri, F. Bagato, A. Cati, G. Allocca
BASSANO DEL GRAPPA GENERAL HOSPITAL, BASSANO DEL GRAPPA; CONEGLIANO GENERAL HOSPITAL, CONEGLIANO; THE ABC HEART DISEASE FOUNDATION, CONEGLIANO; MINIA UNIVERSITY HOSPITAL, MINIA; ADRIA GENERAL HOSPITAL, ADRIA; FELTRE GENERAL HOSPITAL, FELTRE; CONEGLIANO GENERAL HOSPITAL, CONEGLIANO

Purpose: To assess the effect of Beta-blocker time intensity treatment (BB TIT) on the long-term mortality risk after acute coronary syndrome (ACS) through 20 years off follow-up.

Methods: This study includes 589 patients with ACS enrolled in three centres and discharged alive. Baseline clinical and laboratory data were gathered within the first 7 days of hospitalization. Survival analysis using Cox regression analysis model was done to investigate the long term prognostic value of BB TIT after ACS.