

Abstract No. **5**

Category: **Acute Coronary Syndromes**

Title: **Outcomes and Management of Acute Coronary Syndrome in Patients Over 65 Years Old**

Primary Author: **Herrera Pena Angela Maria**

Abstract:

Background: As living conditions improve and medical advances facilitate the prolongation of life, older adults population increases, thus increasing acute coronary syndrome (ACS) requiring intervention, there might be differences with younger people

Methods: We conducted a prospective cohort, in a high complexity institution in south west Colombia. All consecutive patients admitted with ACS between 2011 and 2018 taken to percutaneous coronary intervention (PCI) were included in the analysis in cluster according age, <65 group 1 (G1) or >65 years old group 2 (G2)

Results: There were 2353 patients (57,2%) <65 years, and 1757 (42.7%) over 65 years. In hospital length was 3.9 days vs 5.9. There was a higher proportion of diabetes, hypertension and others in G2 (Table 1). The indication for PCI was silent ischemia in 31.96% G1 and 30.29% in G2, followed by No ST myocardial infarction in 29.27% vs 25.3% (G1 vs G2). Discharge treatment included similar proportion of medications. The 12.9% of group 2 died vs 7.9% of the G1. At 6th month follow up there was a greater proportion of G1 patients referring and episode of chest pain, re hospitalizations was 20.9% G2 vs 8.3% G1. There was similar proportion in treatment between both at six and 12 month, but lower, compared with discharge

Conclusion: there were similar indications for PCI irrespective of age. Differences were seen in a greater length of stay, re-hospitalizations and higher mortality between >65 years old. There were no significant differences in treatments.