



# Baseline shock index-creatinine clearance score and long-term mortality after ACS. Results from 24 years of follow-up of the ABC study on heart disease.



G. Berton, HT. Mahmoud, R. Palmieri, F. Cavuto, R. Cordiano, D. Merotto, ML. Dario, A. Dal Bo, F. Bagato

The ABC Study on Heart Disease Foundation-ONLUS, Conegliano, Italy

## The ABC Study on ACS:

- An ongoing, **prospective** investigation designed to reflect, as closely as possible, an unbiased population of patients with **ACS**.
- Started in 1992-1993.
- Patients were enrolled in Adria, Bassano and Conegliano Hospitals.
- All data were connected with Padua University.



## Background:

Shock Index-Creatinine Clearance score (SI-C) is an updated version of the shock index that includes renal function.

$$SI-C = (SI * 100) - \text{estimated CCR}$$

## Purpose:

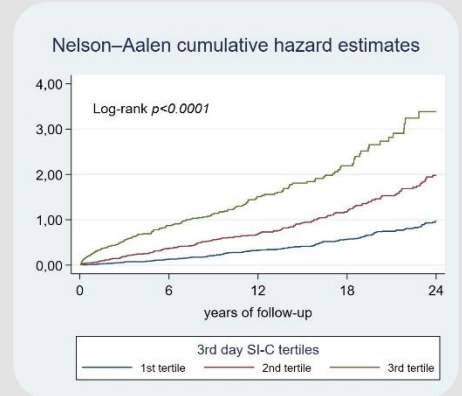
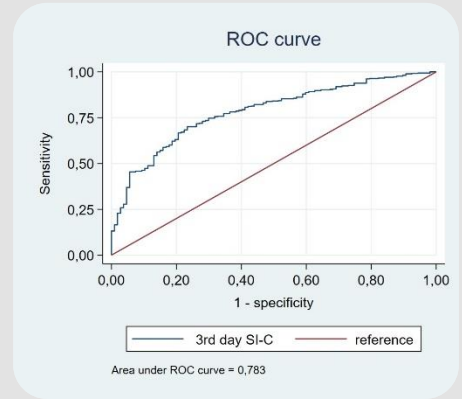
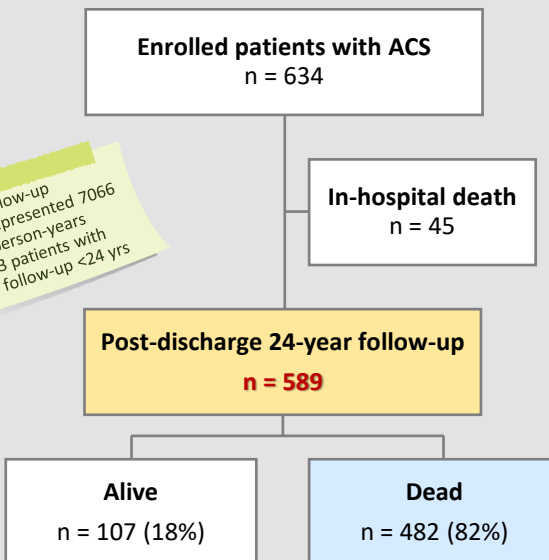
To assess the long-term predictive value of baseline SI-C score in patients long after ACS.

## Methods:

- 589 ABC study patients with **ACS**.
- Follow-up **24 years** or until death.
- Baseline data recorded within the first 7 days of hospitalization.

## Results:

- Patients' mean age was 66±12 years, 70% were males.
- 482(82%) had died during follow-up.
- Most of the clinical characteristics were significantly different between patients who died and those who survived.
- SI-C score was higher in the patients who died during follow-up ( -11± 25 vs -36±23 p<0.0001
- The predictive value of SI-C for 24-year mortality was very good.
- The cumulative risk was significantly higher in the upper SI-C tertile.
- Cox regression analysis showed a significant association with **long-term all-cause mortality and SI-C score** (HR: 2.1, 95% CI 1.8-2.3, p<0.0001).
- This association persisted in the fully adjusted model.



## Conclusions:

- **Baseline SI-C seems to be an effective and independent predictor of long-term all-cause mortality after ACS.**