Category :**Cardiovascular: coronary syndromes**

A30 - ***Evaluation of the prognosis of anemia in patients with acute coronary syndrome: a moroccan center experience.***

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Introduction:

Anemia is a well-known marker as an independent risk factor in coronary patients. The aim of our work was to determine the relationship between hemoglobin levels and the evolution of patients admitted into the cardiology intensive care department at the Ibn Rochd University Hospital.

Methods:

We prospectively included 364 patients admitted to the cardiology intensive care unit of Ibn Rochd Hospital in Casablanca between September 2019 and January 2021 for ACS with or without persistent ST segment elevation (STEMI n=128 and NSTEMI n= 236). The patients were subdivided into 2 groups: group 1 (n=119) with an hemoglobin level < 11g/dl and group 2 (n= 245) with an hemoglobin level > 11 g/dl.

Results:

Among the 364 included patients, the average age was 60.27 ± 12.35 years, with a male predominance (64.7% of the population). The anemic subjects were older than the non-anemic: 63 ± 9.9 years versus 57 ± 11 years. The renal function was more impaired in anemic patients with a clearance of creatinine to 54.66 ml per minute versus 93.62 ml per minute in non-anemic patients. Group 1 patients had more frequently signs of left ventricular (LV) heart failure than group 2 (46 % versus 10 %). Systolic LV function, however, seemed unaffected by this rate with a mean ejection fraction measured in both groups (43% in group 1 versus 45% in group 2). Diastolic function was more often impaired with higher LV filling pressures in anemic patients (66% versus 30%). The mean length of stay was longer for patients with anemia (12.5 ± 10.1 days versus 7.9 ± 4 days).

Conclusion:

Anemia at admission for ACS is linked to a pejorative prognosis. A fairly strong relationship is found between low values of hemoglobin and the evolution of patients especially in terms of clinical or latent heart failure.