



TRADITIONAL RISK FACTORS AND PREMATURE ACUTE CORONARY SYNDROMES IN SOUTH EASTERN EUROPE

Poster Contributions Hall B4-5 Saturday, April 6, 2024, 3:45 p.m.-4:30 p.m.

Session Title: 1324: Ischemic Heart Disease: Clinical Science 07 Abstract Category: 22. Ischemic Heart Disease: Clinical Science Presentation Number: 1324-158

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Background: The age-standardized death rates under 65 years from ischemic heart disease (IHD) in South Eastern Europe are approximately twice as high than the Western Europe average, but the reasons are unknown.

Methods: We enrolled 70,953 Caucasian patients with first acute coronary syndrome (ACS), from 40 urban hospitals in 6 South Eastern European countries and assessed their life expectancy free of ACS and mortality within 30 days after hospital admission from ACS as estimated in relation to dichotomous categories of traditional risk factors (current smoking, hypertension, diabetes, and hypercholesterolemia) stratified according to sex.

Results: Compared with patients without any baseline traditional risk factors, the presence of all four risk factors was associated with a 5-year shorter life expectancy free of ACS (women: from 67.1 ± 12.0 to 61.9 ± 10.3 years; *r*= -0.089; p<0.001 and men: from 62.8 ± 12.2 to 58.9 ± 9.9 years; *r*= -0.096; p<0.001). Premature ACS (women <67 years and men <63 years) was remarkably related to current smoking and hypercholesterolemia among women (Risk Ratios [RRs]: 3.96; 95% Cl,3.72-4.20 and 1.31; 95% Cl, 1.21-1.40, respectively) and men (RRs: 2.82; 95% Cl, 2.171- 2.95 and 1.39; 95% Cl, 1.34-1.45, respectively). Diabetes was most strongly associated with death from premature ACS either in women (RR: 1.52; 95% Cl: 1.29-1.79) or men (RR: 1.63; 95% Cl: 1.41-1.89).

Conclusion: Public health policies in Southeastern Europe should place significant emphasis on the four traditional risk factors and the associated lifestyle behaviors to reduce the epidemic of premature IHD.