Predictors of Primary Percutaneous Coronary Intervention Prognosis Among Palestinian Acute Coronary Syndrome Patients

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Abstract

Background/objectives:
According to World Health Organization, cardiovascular diseases are the main cause of death worldwide. A common consequence of coronary heart disease is acute coronary syndrome (ACS). In Palestine, myocardial infarction and ischemic heart disease are the leading cause of death according to the Palestinian health information center. Percutaneous coronary intervention is one of the strategies to treat ACS patients. In this study we assessed PCI patients' characteristics and their prognosis in Palestine.

Methods:
 We prospectively collected a sample of 227 ACS patients between 1 September 2014 and 31 December 2014 from two medical centers in Nablus-Palestine. Data collection was done by questionnaire-based interview, PCI reports and patients' medical files. Patients' mortality was followed up for a period of six months.

Results:
The majority of patients were secondary PCI patients, smokers (p value=0.038), hypertensive (p value=0.009), femoral access and drug eluting stents were used in most of the patients (p value=0.01 and 0.045 respectively). Regarding laboratory tests, the majority of primary PCI patients had positive cardiac markers (70%, p value=<0.001), and most of the patients had normal creatinine level (p value=0.05). In terms of mortality, patients without hypertension and without previous history of PCI were less likely to die (p value=0.039, 0.037 respectively), patients who were not on statin therapy prior PCI had 7 times increased mortality (p value=0.001).

Conclusion:
Mortality rates among PCI patients increase in the presence of hypertension, previous history of PCI, and in patients who don't take statins.