Recent Temporal Trends in the Presentation, Management and Outcome of Women Hospitalized with Acute Coronary Syndromes

Avi Sabbag¹, Shlomi Matetzky¹, Shmuel Gottlieb², Shaul Atar³, Ilan Goldenberg¹, Amit Segev¹

¹The Heart Center, Chaim Sheba Medical Center, Israel
²Department of Cardiology, Bikur Holim Hospital, Israel
³Department of Cardiology, Nahariya Hospital, Israel

Background:
There are limited data regarding temporal trends in management strategies and outcomes of women hospitalized with acute coronary syndromes (ACS) in a real world setting.

Methods:
We evaluated time-dependent changes in the clinical characteristics, management strategies, and outcomes of women enrolled in the biannual Acute Coronary Syndrome Israeli Survey (ACSIS) between 2000 and 2010.

Results:
Among 11,536 patients enrolled in ACSIS 2000-2010, 2710 (24%) were women. Women presented less frequent with ST-elevation myocardial infarction and more frequently with associated comorbidities (p for trend <0.001 for both). There was no change in the time lag from symptom onset to emergency room across surveys (p for trend = 0.52), but the rate of women meeting the goal of door to balloon time of ≤90 min was significantly increased (p for trend = 0.009), with a corresponding significant increase in the utilization of evidence-based therapies over the past decade. Accordingly, 7-day mortality rates among women have significantly declined from 2000 to 2010 (Figure). In contrast, no improvement was observed in 30-day or one year survival (p-for trend = 0.69 and 0.18, respectively).

Conclusion:
Temporal trends in the clinical presentation and management of women hospitalized with ACS over the last decade may have resulted in reduced short term mortality. However, those changes did not translate to improvement in longer-term survival.