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Gender-based clinical outcomes in diabetics with HbA1c >7.3 and normal and abnormal gated myocardial perfusion imaging

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Aim: To find out gender based clinical outcomes in diabetics having normal and abnormal stress Gated Myocardial Perfusion Imaging (GMPI) and glycosylated hemoglobin (HbA1c) > 7.3.

Method: This prospective study was conducted at Nuclear Cardiology Department of Karachi Institute of Heart Diseases (KIHD), Karachi, Pakistan. Total 523 diabetics who had stress GMPI with HbA1c >7.3 from June 2014 till December 2015 were included. This cut-off for HbA1c was taken from our previously published study performed upon early cohort. These patients were followed for 02 years (till December 2017) for fatal, Non-Fatal Myocardial Infarction (FMI and NFMI) and overall events. 37 patients were excluded due to lost to follow up.

Results: The mean age of total cohort was 58±10 years having a Body Mass Index (BMI) 26.95±5.48 and mean HbA1c of 9.09±1.68. Stress GMPI was normal in 62% while 16% had fixed defects and 22% had reversible ischemic defects. In total 486 patients male and female ratio was 55% and 45%, respectively with significantly higher prevalence of hypertension in female while smoking and dyslipidemia was higher in males, rest of demographics were non-significant. Normal GMPI and LVEF were significant higher in females while males had more reversible defects. Annualized event in total cohort for both normal and abnormal GMPIs was 3.70% without significant gender difference. No significant difference in event rate was seen for normal GMPIs in both groups. However, significantly higher overall, FMI and NFMI were seen in female cohort with abnormal GMPI.

Conclusion: Female diabetics having HbA1c>7.3 despite of having significantly lower abnormal GMPI and ischemic burden had significantly higher overall, fatal and non-fatal MI events compared to male counterpart. For normal GMPI similar outcome was seen in both genders.

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