

The influence of actual and retroactive T2DM regulation on duration of hospital stay and clinical outcome of patients suffered from NSTEMI/STEMI

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OBJECTIVES

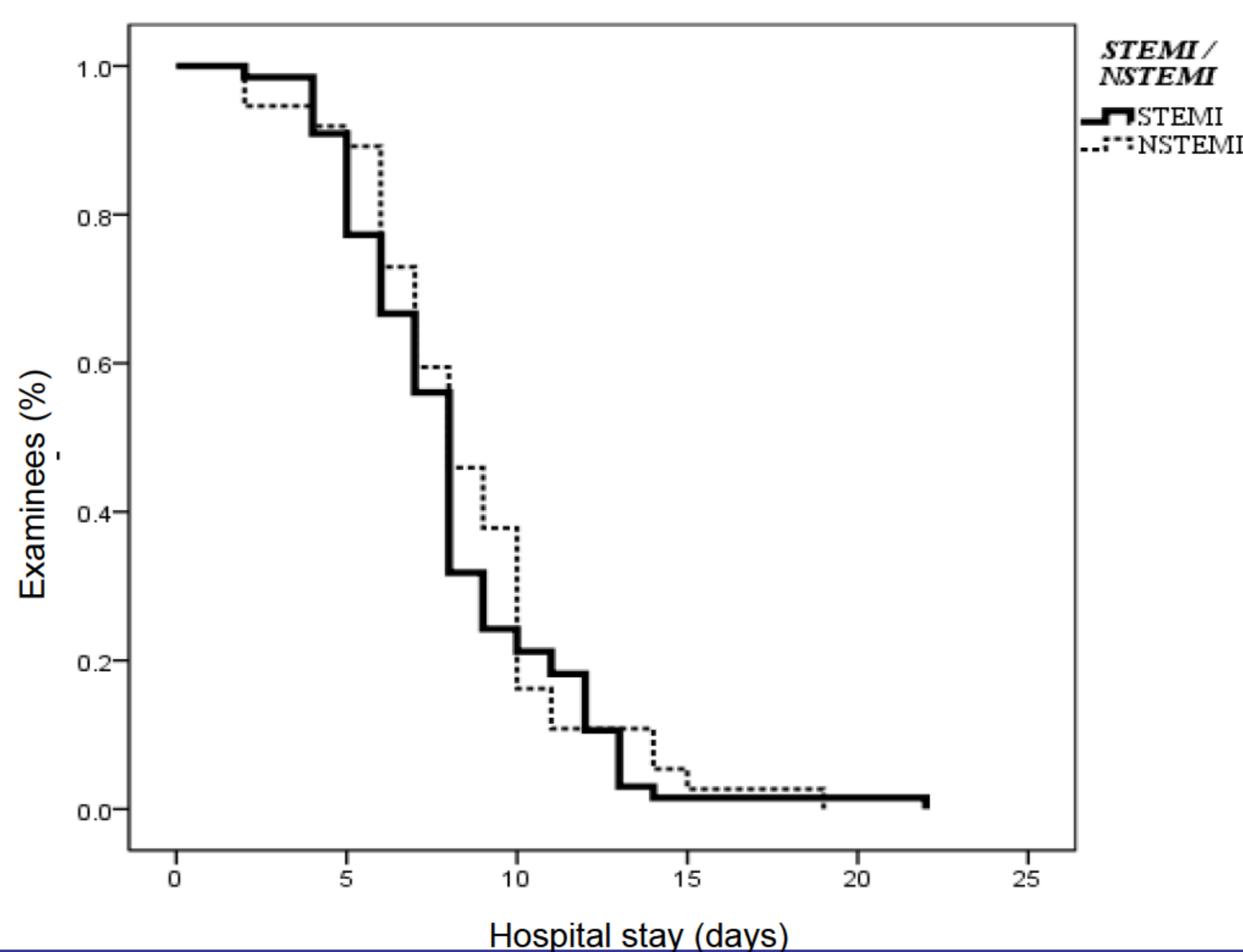
A link between diabetes and coronary heart disease is well-known. The aim of this study is to examine the influence of actual and retroactive diabetes regulation parameters (admission glycaemia and HbA1C value) on duration of hospital stay and clinical outcome of T2DM patients suffered from NSTEMI/STEMI.

METHODS

Cross sectional study involved 103 examinees with past history of T2DM actually hospitalized in CCU due to acute myocardial infarction (NSTEMI or STEMI). Beside some demographic, epidemiological, laboratory and clinical parameters, the impact of admission glycaemia (mmol/L) and HbA1C values (%) on duration of hospital stay and clinical outcome were observed. Obtained data were analyzed by SPSS for Windows 18.0 statistical package. Level of statistical significance was 0.05.

RESULTS

Mean duration of hospital stay (STEMI/NSTEMI)



Out of 103 examinees, 66 (64.1%) suffer from STEMI. Mean age of study population is 67 ± 9 years, 59 (57%) are males. Mean T2DM duration is 7 (1-30) months and it influences on duration of hospital stay ($p=0.232$, $p<0.05$), but not on clinical outcome ($p=0.174$, $p>0.05$). Mean duration of hospital stay is 8 and 8.5 days in STEMI and NSTEMI patients respectively, with no difference between groups ($\chi^2= 0.476$, $p>0.05$). HbA1C values influence on duration of hospital stay ($p=0.213$, $p<0.05$), opposite to admission glycaemia ($p=0.148$, $p>0.05$). Out of 4 patients (3.9%), who passed away, 3 suffered from STEMI. Neither admission glycaemia ($p=0.165$, $p>0.05$) nor HbA1C values ($p=0.047$, $p>0.05$) do not have effect on clinical outcome.

CONCLUSIONS

In present study, admission glycaemia do not influence either on duration of hospital stay or clinical outcome. Diabetes duration and HbA1C values extend mean duration of hospital stay, but do not influence on clinical outcome.

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