



AMIS Plus Newsletter No. 60 – November 2019

Dear AMIS Plus Participants & Sponsors

We are very pleased to bring you our 60th Newsletter! In this special edition, we reflect on what we have learnt from our publications in the past year covering a variety of topics nicely showcasing the data from our treasure trove.

- Antidepressant prescription after acute myocardial infarction was associated with increased mortality 1 year after discharge. *Fehr et al. Eur J Intern Med 2019; 61:75-80.*
- Patients admitted for acute myocardial infarction and presenting with multisite artery disease, despite being high-risk patients, were less likely to receive evidence-based therapies than coronary artery disease-only patients. They had increased in-hospital morbidity and mortality, which has not improved over time. *Roffi et al. Eur Heart J Acute Cardiovasc Care First Published Dec 5 2018. doi.org/10.1177/2048872618814708.*
- A minority of patients with ST-elevation myocardial infarction admitted to hospital had an out of hospital cardiac arrest and consequently worse clinical courses as well as more than 6 times higher in-hospital mortality. Despite therapy optimization, this has not changed over time. *Müller et al. Resuscitation 2019; 134:55-61.*
- Acute myocardial infarction patients with cardiac rehabilitation referrals at discharge had better 1-year outcomes than those without. *Hermann et al. Eur J Prev Cardiol 2019; 26:138-144.*
- Patients with acute myocardial infarction and a history of cancer were less likely to receive guideline-recommended treatment and had worse in-hospital outcomes than non-cancer patients. *Rohrmann et al. Eur Heart J Acute Cardiovasc Care 2018; 7:639-45.*
- Amongst patients with ST-elevation myocardial infarction, manual thrombus aspiration was not associated with lower risk-adjusted in-hospital all-cause mortality compared with patients receiving PCI-alone, regardless of total ischemic time. However, it was associated with a significantly greater risk of in-hospital major adverse cardiac events. *Hugelshofer et al. Am Heart J 2018; 204:34-42.*
- While pre-atrial fibrillation is independently associated with in-hospital mortality, new atrial fibrillation may reflect worse hemodynamic impact of acute coronary syndromes. *Biasco et al. Rev Esp Cardiol <https://doi.org/10.1016/j.rec.2018.03.002>.*

Please find attached our latest publication entitled “Twenty-year trends in the incidence and outcome of cardiogenic shock in the AMIS Plus Registry” by Hunziker et al. *Circ Cardiovasc Interv 2019;12:e007293.*



Yours sincerely

For the Steering Committee:

Prof. Hans Rickli, MD
President

AMIS Plus Data Center
Hirschengraben 84
CH-8001 Zurich

For the Data Center:

Dragana Radovanovic, MD
Head of the Data Center

Tel.: +41 (0)44 634 48 30
Fax: +41 (0)44 634 49 86

www.amis-plus.ch
info@amis-plus.ch