



## AMIS Plus Newsletter No. 59 – July/August 2019

Dear AMIS Plus Participants & Sponsors

We hope you have all been able to enjoy this hot summer and have time to relax as we bring you the latest news from AMIS Plus.

### AMIS at SSC/SSCS

At the Joint Annual Meeting of SSC and SSSC in Interlaken in June, AMIS Plus data were presented on trends spanning 2 decades in latecomers with ST-segment elevation myocardial infarction as well as on cardiovascular risk factors in patients with acute myocardial infarction.



### New Data Entry Portal

As already announced in the last newsletter, the new AMIS Plus Portal went live in May right on schedule. Due to new technology, the portal is not only more user-friendly expediting data entry but is now compatible with tablets and smartphones. Many thanks to Rolf Pfister from Datrix Consulting GmbH. We would also like to thank our hospital participants for their patience as well as their suggestions for improvement.

### AMIS Plus Highlight Box



We examined a multisite artery disease (MSAD) population with coronary artery disease to determine whether outcomes of these high-risk patients have improved. From 44,157 patients enrolled in AMIS Plus from January 1999 to October 2016, 39,613 (89.7%) had coronary artery disease only and 4544 (10.3%) had MSAD. Of the MSAD patients, 4097 (9.3%) had one additional vascular condition (MSAD1) and 447 (1.0%) two (MSAD2). Compared to patients with coronary artery disease only, MSAD patients were older, had longer delays, more frequently presented with non-STEMI, Killip class III/IV, 3-vessel coronary artery disease, and a higher Charlson comorbidity index. MSAD patients were less likely to receive evidence-based treatments such as aspirin, P2Y<sub>12</sub> inhibitors or beta blockers, coronary angiography and PCI and had increased in-hospital morbidity and mortality with no improvement over time with MSAD2 patients faring the worst. *Roffi et al. Eur Heart J Acute Cardiovasc Care 2018 Dec 5:2048872618814708. doi: 10.1177/2048872618814708*

Please find enclosed a paper entitled “Antidepressant prescription in acute myocardial infarction is associated with increased mortality 1 year after discharge” by Fehr et al. *Eur J Int Med 2019; 61:75–80.*

Yours sincerely

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