



AMIS Plus Newsletter No. 57 – November/December 2018

Dear AMIS Plus Participants & Sponsors

We are pleased to bring you the latest news from AMIS Plus.

New Data Entry Software

After 15 years of service, it's finally time to replace our data entry software. In 2019 the new software will be implemented and will contain certain features requested by participants to help expedite data entry. We will also take this opportunity to undertake one of our regular updates of the questionnaire.

Sponsors' Meeting

On September 27, 2018 we held a sponsors' meeting in Zurich and had a lively, productive discussion. It was very heartening to see the sponsors brainstorming to try and overcome the hurdles now facing them in the pharmaceutical industry in order to be able to sponsor AMIS Plus. The survival of the AMIS Plus Project depends on their support.

AMIS Plus Highlight Box



A recent study using AMIS Plus data aimed to identify which predictors and patient characteristics are associated with a cardiac rehabilitation (CR) referral after acute myocardial infarction (AMI) as referral rates for CR after an AMI are still low. In 2005 through 2017, from 32,416 patients with ST-elevation myocardial infarction (STEMI) and non-STEMI (NSTEMI), 10,940 were discharged with CR referrals. These patients were younger (62.6 vs. 68.2 years), more likely smokers (44.0% vs 34.9%) and more obese (22.0% vs. 20.4%), but other risk factors such as dyslipidemia (55.0% vs. 60.1%), hypertension (55.6% vs. 65.3%), and diabetes (16.7% vs. 21.5%) were surprisingly less frequent. Furthermore, STEMI (OR 1.61; CI 1.52–1.71), performed PCI (OR 2.65; CI 2.42–2.90) and Killip class >2 (OR 1.58; CI 1.36–1.84) favored referral for CR, while age >65 years, previous myocardial infarction, cerebrovascular disease or peripheral artery disease had a negative impact on CR referral. *Hermann et al. Int J Cardiol 2018; 261:1-5.*

We would like to thank all the study nurses, interns and doctors in our participating hospitals for collecting and entering the data – an invaluable contribution. We are also deeply grateful to our sponsors for their financial support.



Please find enclosed a paper entitled "Circadian dependence of manual thrombus aspiration benefit in patients with ST-segment elevation myocardial infarction undergoing primary percutaneous coronary intervention" by Iglesias et al. *Clin Res Cardiol 2018; 107:338-46.*

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Yours sincerely

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