



## AMIS Plus Newsletter Nr. 44 – August 2014

Dear AMIS Plus Participants & Sponsors

We hope you have enjoyed the summer despite the near constant deluge of rain. Thankfully things have been looking a lot brighter for AMIS Plus with 13 contributions accepted at the following 6 congresses so far this year:

- EuroPrevent 2014, EACPR Annual Meeting, May 8-10, Amsterdam
- European and Swiss Congress of Internal Medicine 2014, May 14-16, Geneva
- Joint Annual Meeting of the SSC/SSCS 2014, June 11-13, Interlaken
- Joint Meeting ESH-ISH Hypertension 2014, June 13-16, Athens
- ESC Congress 2014, August 30 - September 3, Barcelona
- Acute Cardiovascular Care 2014, October 18-20, Geneva



The topics presented ranged from risk factors (obesity, hypertension), impact of circadian rhythm and treatment of patients with comorbidities, such as liver and peptic ulcer disease, to very old patients, changing treatment strategies, heart failure and palliative treatment in patients hospitalized in Swiss hospitals for acute coronary syndromes.

### AMIS Plus Sponsors' & Participants' Meeting – 5 March 2015, 14:00 in Berne

Please mark this date in your agendas now. Further details will follow nearer the time.

### AMIS Plus Highlights Box



To examine whether an obesity paradox exists in Swiss patients with ST-elevation myocardial infarction (STEMI) who underwent percutaneous coronary intervention (PCI), a recent AMIS Plus study looked at the impact of body mass index (BMI) on in-hospital mortality. From 2005 – 2012, 6938 patients with acute STEMI underwent PCI. These patients were stratified into 5 BMI groups. Crude in-hospital mortality rates showed a U-shaped distribution between BMI groups, with the lowest mortality in obese class 1 patients (2.0%) and the highest in underweight patients (9.0%). The odds ratios for in-hospital mortality were significantly lower for obese class I (OR 0.56; 95% CI 0.35-0.91) and significantly higher for underweight patients (OR 2.72; 95% CI 1.14-6.48) compared to the normal weight group. However, after adjustment for covariates the differences between BMI groups were no longer significant. This study showed that the lower crude in-hospital mortality of obese class I patients can be partly explained by lower age and lower comorbidity rates. *Witassek F. et al. SMW 2014; 144:w13986.*

Please find enclosed the AMIS Plus publication entitled “Acute multivessel revascularization improves 1– year outcome in ST-elevation myocardial infarction. A nationwide study cohort from the AMIS Plus Registry”. *Jeger et al. Int J Cardiol 2014; 172:76-81.*

Yours sincerely

For the Steering Committee:

For the Data Center:

Prof. Paul Erne, MD  
President

Dragana Radovanovic, MD  
Head of the Data Center

AMIS Plus Data Center  
Hirschengraben 84  
CH-8001 Zurich

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

E-Mail: [amis@ifspm.uzh.ch](mailto:amis@ifspm.uzh.ch)  
[www.amis-plus.ch](http://www.amis-plus.ch)