



Acute and Stable Ischemic Heart Disease

RACIAL DIFFERENCES IN LEVEL OF INFLAMMATION AND CLINICAL OUTCOMES BETWEEN EUROPEAN AND EAST ASIAN PATIENTS UNDERGOING PERCUTANEOUS CORONARY INTERVENTION: THE COMPARE-CRP STUDY

Poster Contributions
Posters Hall_Hall A
Monday, March 30, 2020, 12:30 p.m.-1:15 p.m.

Session Title: Acute and Stable Ischemic Heart Disease: Clinical 8
Abstract Category: 02. Acute and Stable Ischemic Heart Disease: Clinical
Presentation Number: 1466-147

Authors: *Jong-Hwa Ahn, Diana A. Gorog, Young-Hoon Jeong, Tobias Geisler, Gyeongsang National University Changwon Hospital, Changwon, AL, South Korea*

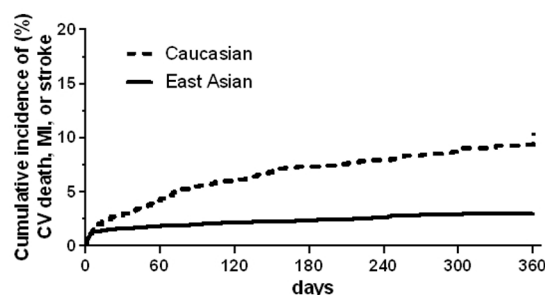
Background: Compared with Western, East Asian patients have shown a lower risk of ischemic event after PCI. Clinical evidences suggest East Asian vs. Western population has lower level of inflammation. We conducted a pooled analysis to evaluate relationship between inflammation and clinical outcomes across the races.

Methods: The cohort consisted of PCI-treated East Asians (n=3,865) and Europeans (n=1,258) receiving DAPT. Level of inflammation was evaluated with hs-CRP on-admission and the criteria of high inflammation (HI) was defined as 'hs-CRP \geq 2 mg/L'. MACE was defined as a composite of CV death, non-fatal MI, or ischemic stroke.

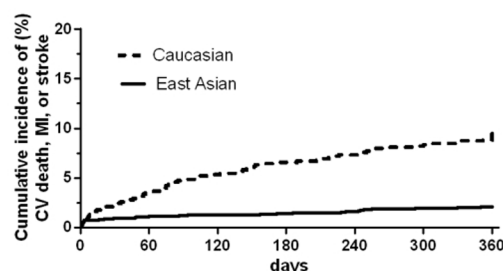
Results: Europeans showed significantly higher level of hs-CRP than East Asians (3.3 ± 8.0 vs. 2.0 ± 5.4 mg/L, $P<0.001$), and HI was more frequently observed in Europeans vs. East Asian (32.3% vs. 19.4%, $P<0.001$). After adjustment, HI rate was significantly lower in East Asian vs. Europeans (OR 0.23; 95% CI 0.17-0.31; $P<0.001$). During 1-year follow-up, MACE occurred in 10.4% and 4.3% among Europeans and East Asians, respectively (HR 2.40; 95% CI 1.91-3.02; $P<0.001$) (**Fig. A**); this difference was more prominent in patients without HI (HR 3.31; 95% CI 2.47-4.43; $P<0.001$) (**Fig. B and C**).

Conclusion: This analysis was the first to evaluate the influence of race on the level of inflammation and MACE in PCI-treated patients. Inflammation appeared important to explain

A) total cohort



B) hs-CRP \geq 2 mg/L



C) hs-CRP < 2 mg/L

