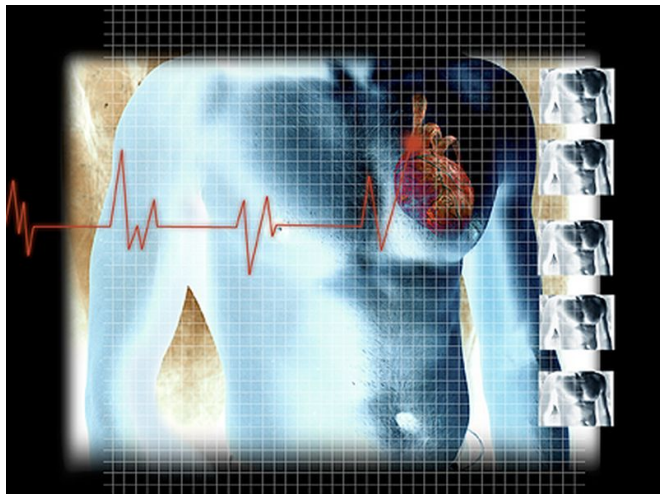


Six variables can predict mortality risk in cardiogenic shock

14 April 2017



"The IABP-SHOCK II risk score can be easily calculated in daily clinical practice and strongly correlated with mortality in patients with infarct-related CS," the authors write. "It may help stratify patient risk for short-term [mortality](#) and might, thus, facilitate clinical decision making."

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(HealthDay)—Six variables can be combined to predict short-term mortality risk in patients with cardiogenic shock (CS), according to a study published in the April 18 issue of the *Journal of the American College of Cardiology*.

Janine Pöss, M.D., from the University Heart Center in Lübeck, Germany, and colleagues developed a risk prediction score for short-term mortality in [patients](#) with CS after acute [myocardial infarction](#), derived from the Intraaortic Balloon Pump in Cardiogenic Shock (IABP-SHOCK II) trial.

The researchers found that age >73 years, prior stroke, glucose at admission >10.6 mmol/L, creatinine at admission >132.6 µmol/L, Thrombolysis In Myocardial Infarction flow grade 5 mmol/L were independent predictors of 30-day mortality and were used as parameters. The observed 30-day mortality rates for low, intermediate, and high risk score categories were 23.8, 49.2, and 76.6 percent, respectively (P

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