

Lower hospital mortality for acute MI during heart meeting

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(HealthDay)—Thirty-day mortality is lower for hospitalization with

acute myocardial infarction during Transcatheter Cardiovascular Therapeutics meeting dates, according to a study published online March 9 in the *Journal of the American Heart Association*.

Anupam B. Jena, M.D., Ph.D., from Harvard Medical School in Boston, and colleagues analyzed 30-day mortality among Medicare beneficiaries hospitalized with acute myocardial infarction from Jan. 1, 2007, to Nov. 31, 2012, in major teaching hospitals. Mortality was compared during dates of a major annual interventional cardiology meeting (Transcatheter Cardiovascular Therapeutics) versus identical non-meeting days in the five weeks before and after.

The researchers found that patients admitted during meeting versus non-meeting dates had lower unadjusted and adjusted 30-day mortality rates (unadjusted: 15.3 versus 16.7 percent; $P = 0.04$; adjusted: 15.4 versus 16.7 percent; $P = 0.05$). Between the dates, the rates of interventional cardiologist involvement were similar (59.5 versus 59.8 percent of hospitalizations; $P = 0.88$), as were rates of percutaneous coronary intervention (30.2 versus 29.1 percent; $P = 0.20$). Patients with non-ST-segment-elevation myocardial infarction not receiving [percutaneous coronary intervention](#) had the largest mortality reductions (16.9 versus 19.5 percent adjusted 30-day mortality; $P = 0.008$).

"Hospitalization with [acute myocardial infarction](#) during Transcatheter Cardiovascular Therapeutics meeting dates was associated with lower 30-day [mortality](#), predominantly among patients with non-ST-segment-elevation myocardial infarction who were medically managed," the authors write.

One author disclosed financial ties to the pharmaceutical industry; two authors disclosed ties to Precision Health Economics.

More information: [Abstract/Full Text](#)

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