

Age, creatinine, ejection fraction predict post-MI survival

April 20 2015



(HealthDay)—A simple age, creatinine, and ejection fraction (ACEF) score can predict one-year mortality risk in myocardial infarction 30-day survivors who underwent percutaneous coronary intervention, according to a study published in the May 1 issue of *The American Journal of Cardiology*.

Jang Hoon Lee, M.D., from Kyungpook National University Hospital in Daegu, South Korea, and colleagues examined whether the ACEF score could predict one-year mortality for 12,000 post-[myocardial infarction](#) 30-day survivors who underwent [percutaneous coronary intervention](#). Twelve risk factors were selected and ranked based on their area under the curve (AUC) value.

The researchers found that the best AUC value was indicated by age,

[ejection fraction](#), and serum creatinine levels. Nonsurvivors had a significantly higher ACEF score (1.95 ± 0.82 versus 1.28 ± 0.5); the ACEF score independently predicted one-year mortality (adjusted hazard ratio, 2.26). A prediction model including 12 risk factors had the best accuracy (AUC, 0.8), but this was not significantly different from the ACEF score (AUC, 0.79). For the ACEF_{LOW}, ACEF_{MID}, and ACEF_{HIGH} groups, the adjusted hazard ratios for one-year mortality were 1 (reference), 3.11, and 10.38, respectively.

"The ACEF score may be a novel valid model to stratify the one-year mortality risk in 30-day survivors who underwent percutaneous [coronary intervention](#) after myocardial infarction," the authors write.

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