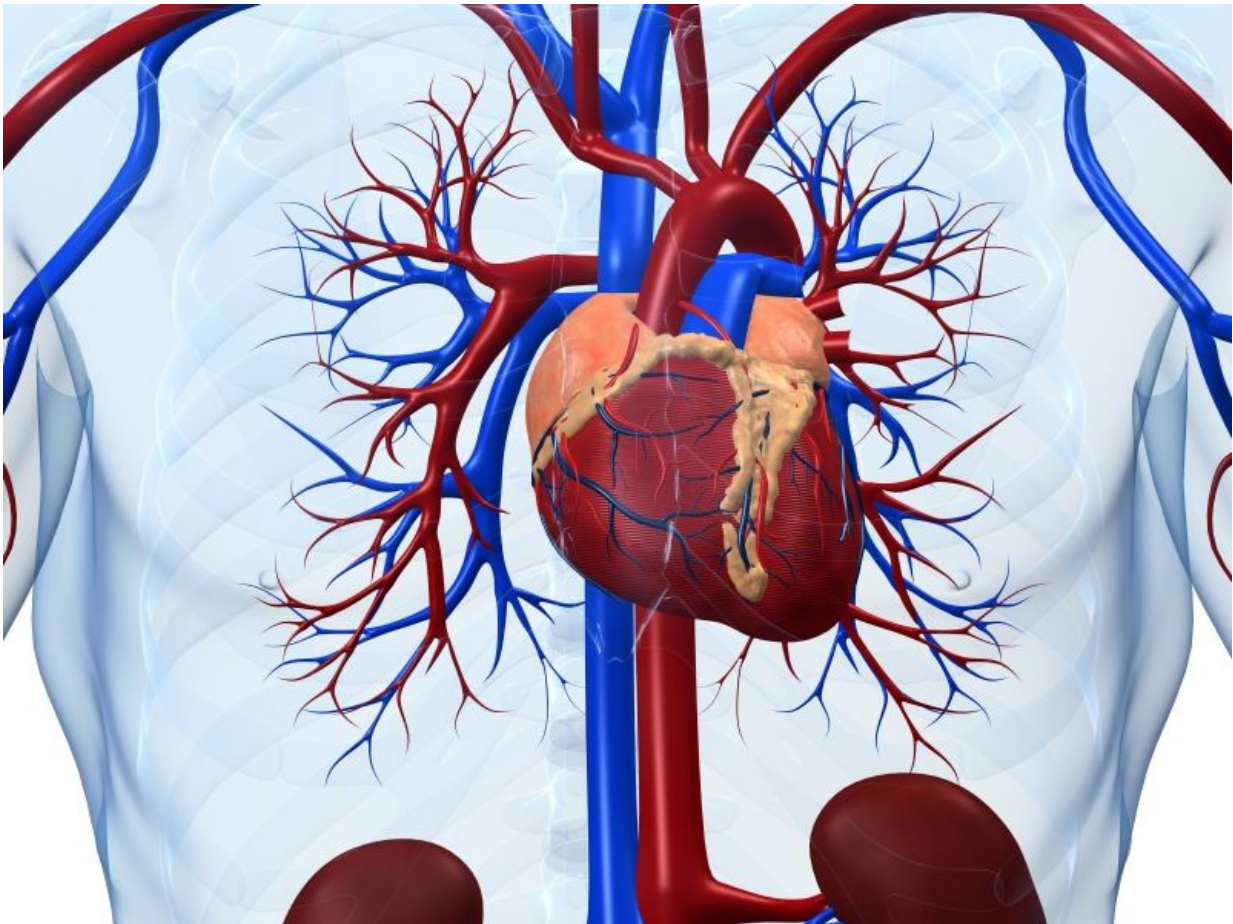


Early administration of beta-blockers ups survival in ACS

February 22 2016



(HealthDay)—For patients with acute coronary syndromes (ACS), early

administration of β -blockers is associated with increased short-term survival and improved left ventricular function, according to a study published in the March 1 issue of *The American Journal of Cardiology*.

Raffaele Bugiardini, M.D., from the University of Bologna in Italy, and colleagues examined whether earlier administration of oral β -blocker therapy correlates with increased short-term survival and improved left ventricular function in [patients](#) with ACS. Data were included for 5,259 eligible patients enrolled in the International Survey of Acute Coronary Syndromes in Transitional Countries registry.

The researchers found that oral β -blockers were administered soon after hospital admission (≤ 24 hours) in 1,377 patients and later during hospital stay for 3,882 patients. Early β -blocker therapy correlated with reduced in-hospital mortality and reduced incidence of severe [left ventricular dysfunction](#) (odds ratios, 0.41 and 0.57, respectively). When patients with Killip class III/IV were included as dummy variables, significant mortality benefits with early β -blocker therapy disappeared. Propensity score-matched analyses confirmed these results.

"In patients with ACS, earlier administration of oral β -blocker therapy should be a priority with a greater probability of improving [left ventricular](#) function and in-hospital survival rate," the authors write.

"Patients presenting with acute pulmonary edema or cardiogenic shock should be excluded from this early treatment regimen."

More information: [Abstract](#)
[Full Text \(subscription or payment may be required\)](#)

Copyright © 2016 [HealthDay](#). All rights reserved.

Citation: Early administration of beta-blockers ups survival in ACS (2016, February 22)

retrieved 25 April 2024 from

<https://medicalxpress.com/news/2016-02-early-administration-beta-blockers-ups-survival.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.