

White blood cell count predicts infarct size in STEMI

19 December 2013



primary percutaneous coronary intervention," the authors write.

Two authors disclosed financial ties to the medical device industry.

More information: [Abstract](#)
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(HealthDay)—For patients with anterior wall ST-segment elevated myocardial infarction (STEMI), elevated white blood cell count (WBCc) on presentation is associated with increased infarct size, according to a study published in the Dec. 15 issue of *The American Journal of Cardiology*.

Tullio Palmerini, M.D., from Policlinico S. Orsola in Bologna, Italy, and colleagues examined whether elevated WBCc correlates with increased infarct size measured with cardiac [magnetic resonance imaging](#) 30 days after primary [percutaneous coronary intervention](#). Data were from 407 participants with STEMI and proximal or mid-left anterior descending coronary artery occlusion from the Intracoronary Abciximab and Aspiration Thrombectomy in Patients With Large Anterior Myocardial Infarction trial. Participants were stratified according to WBCc tertiles.

The researchers observed an increase in infarct size (percentage of total left ventricular mass) at 30 days across tertiles of increasing WBCc (median for tertiles I versus II versus III, 11.2 versus 17.5 versus 19.1 percent; P

"In conclusion, in patients with anterior wall STEMI, an elevated admission WBCc is a powerful independent predictor of infarct size measured with cardiac magnetic resonance imaging 30 days after

APA citation: White blood cell count predicts infarct size in STEMI (2013, December 19) retrieved 1 December 2020 from <https://medicalxpress.com/news/2013-12-white-blood-cell-infarct-size.html>

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