

HCA Healthcare

## Scholarly Commons

---

Cardiology

Research & Publications

---

3-24-2020

### Differences in Outcomes of ST-segment Elevation Myocardial Infarction in African American Women versus Women from other races: A United States National Study.

Tasleem Katchi

*HCA Healthcare*, [Tasleem.katchi@hcahealthcare.com](mailto:Tasleem.katchi@hcahealthcare.com)

Sanja Virani

Shaun Smithson

*HCA Healthcare*, [shaun.smithson@hcahealthcare.com](mailto:shaun.smithson@hcahealthcare.com)

Bryan Curry

*HCA Healthcare*, [bryan.curry@hcahealthcare.com](mailto:bryan.curry@hcahealthcare.com)

Follow this and additional works at: <https://scholarlycommons.hcahealthcare.com/cardiology>



Part of the [Cardiology Commons](#), [Clinical Epidemiology Commons](#), and the [Women's Health Commons](#)

---

#### Recommended Citation

Katchi T, Virani S, Smithson S, Curry B. Differences in Outcomes of ST-segment Elevation Myocardial Infarction in African American Women versus Women from other races: A United States National Study. *J Am Coll Cardiol*. 2020 March;75(11 Supplement 1):1542. [https://www.onlinejacc.org/content/accj/75/11\\_Supplement\\_1/1542.full.pdf](https://www.onlinejacc.org/content/accj/75/11_Supplement_1/1542.full.pdf)

This Abstract is brought to you for free and open access by the Research & Publications at Scholarly Commons. It has been accepted for inclusion in Cardiology by an authorized administrator of Scholarly Commons.

## **Difference in Outcomes of ST-segment Elevation Myocardial Infarction in African American Women versus Women from other races: A United States National Study.**

**Background:** Mortality from cardiovascular diseases has traditionally been higher in women compared to men. Racial differences in outcomes of ST-Segment Elevation Myocardial Infarction (STEMI) can be due to variable baseline characteristics as well as access to healthcare. We used the National Inpatient Sample (NIS) 2012 to evaluate the disparities in outcomes of STEMI in African American (AA) women versus women from other races.

**Methods:** We used the 2012 NIS database to identify all women hospitalized with STEMI. Differences in revascularization strategies and STEMI outcomes in AA women versus women from other races were analyzed using T-test for equality of means.

**Results:** In the year 2012, 4540 AA women were hospitalized with STEMI compared to 41,735 women from other races. The average age of presentation for the two groups was 63.29 and 68.10 respectively. Coronary angiography was performed in 83% of women from both groups. Percutaneous coronary intervention was performed in 64.87% of AA women and 67.26% of women from other races ( $p = 0.001$ ), whereas coronary artery bypass grafting was performed in 4.19% and 4.83% respectively ( $p = 0.05$ ). Mortality was 10% for AA women compared to 9% for women from other races ( $p = 0.11$ ).

**Conclusion:** Based on the 2012 NIS data, statistically significant differences exist in the revascularization strategies for AA women hospitalized with STEMI compared to women from other races. Despite this, a statistical difference in mortality between the two populations was not seen.