Abstract: P1638

Predictors of in-hospital and late mortality in acutely decompensated chronic heart failure.

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Background: Heart failure (HF) is a global pandemic, and the cause of the greater health expenditure on hospitalization.
Purpose: To determine, in patients admitted due to decompensated heart failure (dHF), the predictors of in-hospital and late all-cause mortality.
Methods: Retrospective and longitudinal observational study of consecutive patients admitted with a diagnosis of dHF in a General Hospital between 2000-2015. Primary objective was in-hospital and late mortality.
Results: A total of 3705 patients were included (76.9 + 10.1 years, 54.1% women). Diabetes was present in 1611 (43.5%) patients, hypertension in 3210 (86.6%), active smoking in 221 (6%), COPD in 989 (26.7%), neoplasms in 415 (11.2%), chronic renal failure (CRF) in 628 (17%), previous myocardial infarction (pMI) in 449 (12.1%), stroke in 416 (11.2%), previous heart failure (pHF) in 1015 (27.4%), atrial fibrillation in 1672 (45.1%). A total of 239 (6.5%) lived in a nursing home (NH). The rate of 6-months readmission due to heart failure was 473 (12.8%). The in-hospital all-cause mortality rate was 9.3% (345). During a median follow-up of 930 days (RI 230-2611), 2165 (58.4%) patients died.
The following variables were independent predictors of in-hospital mortality (Odds ratio, 95% CI): age 1.03 (1.02-1.05), basal creatinine 1.18 (1.01-1.39) and urea 1.014 (1.011-1.018) (model AUC 0.78 (0.75-0.81)). We identified the following predictors of late mortality (Hazard ratio, 95% CI): age 1.029 (1.022-1.035), diabetes mellitus 1.13 (1.02-1.25), COPD 1.15 (1.03-1.28), neoplasms 1.17 (1.008-1.361), pMI 1.19 (1.02-1.38), pHF 1.25 (1.12-1.39), NH 1.24 (1.03-1.49), readmission 1.73 (1.51-1.97), urea 1.003 (1.001-1.005) (model AUC 0.73 (0.71-0.75)).
Conclusions: In-hospital mortality was significantly associated with age and markers of renal function, while for late mortality the predictors were comorbidities, hospital readmissions and living in a nursing home.