

International Doctoral School Medical University of Lodz

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IRON DEFICIENCY AS AN IMPORTANT FACTOR IN PATIENTS WITH MYOCARDIAL INFARCTION

Cardiovascular diseases, despite the continuous development of the health care sector responsible for them, are the main cause of death in Poland, accounting for almost 35% of all cases [1]. The most common one is coronary artery disease, the most dangerous form of which are acute coronary syndromes. Todays medicine focuses on modyfying risk factors of a disease - one of which could be iron deficiency. Iron plays a key role in transport, oxygen storage, erythropoiesis and is a component of oxidative enzymes and oxygen chain proteins responsible for, among others, for intracellular respiration. Its deficiency may be a crucial prognostic factor in patients with acute myocardial infarction.



To examine the prognostic value of iron deficiency in patients with acute myocardial infarction during follow-

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YEAR	2019	2016	2019	2018	2018				
STUDY TYPE	PROSPECTIVE OBSERVATIONAL	PROSPECTIVE OBSERVATIONAL	RETROSPECTIVE	PROSPECTIVE OBSERVATIONAL COHORT	PROSPECTIVE OBSERVATIONAL COHORT				
POPULATION	420	244 -> 226	817	252	836				
ID (%)	237 (56%)	139 -> 102 (57%->46%)	298 (36%)	N/D	243 (29.1%)				
OBSERVATION TIME	ACS-RELATED HOSPITALISATION	30 DAYS	2 YEARS	IQR: 2–5,4 YEARS	4 YEARS				
CONCLUSIONS	ID IN ACS IS Associated with Better IN- Hospital Prognosis.	ID IS ASSOCIATED WITH WORSE EXERCISE TOLERANCE AND LESSER QUALITY OF LIFE IN PATIENTS WITH ACS.	ID IS AN INDEPENDENT PREDICTOR OF DEATH AND DEVELOPMENT OF HEART FAILURE IN ACS PATIENTS	LOWER TSAT LEVELS ARE INDEPENDENTLY ASSOCIATED WITH AN INCREASED RISK OF LONG- TERM MORTALITY.	IRON DEFICIENCY IS STRONGLY ASSOCIATED WITH UNFAVOURABLE MEDIUM-TERM OUTCOMES, INDEPENDENTLY OF SYSTOLIC HEART FUNCTION, THE EXTENT OF MYOCARDIAL NECROSIS AND ANAEMIA.				
] unspecified, 'WHO Factsher] S. R. Pasricha, J. Tye-Din, M D.1016/S0140-6736(20)3259] N. Cosentino et al., 'Iron de eb. 2020, doi: 10.1016/j.ijcar] O. Meroño et al., 'Iron Defic nglish Edition), vol. 70, no. 5] C. Silva et al., 'Prognostic i D.1016/j.repce.2020.09.005.] J. González-D'Gregorio et al D.2217/bmm-2018-0021.] T. Zeller et al., 'Adverse out ACS - ACUTE CON DEFICIENT	et on Cardiovascular Diseases'. A. U. Muckenthaler, and D. W. Swin 4-0. ficiency in patients with ST-segme d.2019.07.083. iency Is a Determinant of Function 5, pp. 363–370, May 2017, doi: 10 mpact of iron deficiency in acute of I., 'Iron deficiency and long-term n iccome prediction of iron deficiency COTONARY SYN ICY TSAT - tr	REFE hkels, 'Iron deficiency', The La ent elevation myocardial infar hal Capacity and Health-relate 1016/j.rec.2016.10.004. coronary syndromes', Revista I hortality in elderly patients with in patients with acute corona ABBRE drome AN cansferrin sa	RENCES ncet, vol. 397, no. 10270. Lancet ction undergoing primary percuta ad Quality of Life 30 Days After an Portuguesa de Cardiologia (Engli th acute coronary syndrome', Bio ry syndrome', Biomolecules, vol. VIATIONS AI – acute my aturation Fe	Publishing Group, pp. 233–248 aneous coronary intervention', In n Acute Coronary Syndrome', Rev sh Edition), vol. 40, no. 8, pp. 52 mark Med, vol. 12, no. 9, pp. 983 8, no. 3, Sep. 2018, doi: 10.3390 /ocardial infa ER – ferritin c	5, Jan. 16, 2021. doi: t J Cardiol, vol. 300, pp. 14–19, rista Española de Cardiología 25–536, Aug. 2021, doi: 7–999, Sep. 2018, doi: D/biom8030060. Arction ID - oncentration				
IQR - interguartile range QoL - guality of life									

N	27	19	70%	8	30%
MALE	19,00	15	79%	4	21%
AGE	66,92	67,42		65,75	
BMI (MEDIAN)	27,08	26,79		28,98	
HYPERTENSION	19	13	68%	6	32%
DIABETES	8	6	75%	2	25%
SMOKING	13	7	54%	6	46%
STEMI	12	8	67%	4	33%
EARLIER PCI	4	3	75%	1	25%
MULTIVESSEL DISEASE	18	12	67%	6	33%

ACCOMPLISHMENTS



Local Bioethics Committee approval

- Case presentation during "Wrocław Cardiology Forum"
- Case presentation during "PolEcho 2024 Conference"
- Pending Approval of Review Article "Iron deficiency as a possible important factor in patients with myocardial infarction - state of the art"