

A Study to Evaluate the Impact of Admission Hyperglycemia on In-Hospital Mortality and Morbidity in Non-Diabetic AMI Patients

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Abstract

Background: To evaluate the impact of admission hyperglycemia on in-hospital mortality and morbidity in non-diabetic AMI patients.

Materials and Methods: This study was conducted on 70 non-diabetic AMI patients. Patients were categorized based on admission glucose levels into normoglycemic, mild hyperglycemia, and severe hyperglycemia groups. In-hospital mortality, major adverse cardiovascular events (MACE), and length of stay were analyzed.

Results: Severe hyperglycemia was associated with significantly higher in-hospital mortality (18%) compared to mild hyperglycemia (4%) and normoglycemia (2%). The incidence of MACE, including heart failure and arrhythmias, was also higher in the severe hyperglycemia group. A dose-dependent relationship was observed between admission glucose levels and adverse outcomes.

Conclusion: Admission hyperglycemia is a significant prognostic factor in non-diabetic AMI patients, with severe hyperglycemia linked to increased mortality and morbidity. Early detection and management of hyperglycemia are essential for improving patient outcomes.

Keywords

Hyperglycemia, non-diabetic AMI, outcomes.