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### Perceived well-being after acute myocardial infarction according to diabetic status and its impact long-term mortality. The FAST-MI programme

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**Funding Acknowledgement:** Amgen, AstraZeneca, Bayer, Daiichi-Sankyo, Eli-Lilly, GSK, MSD, Novartis, Pfizer, Sanofi, Servier

**Background:** Little information is available regarding subjective well-being according to diabetic status in patients surviving an acute myocardial infarction (AMI).

**Aims and methods:** A health status questionnaire was sent to all patients participating in the nationwide French FAST-MI cohorts (2005, 2010 and 2015) one year after the acute episode of AMI, with a specific question on overall health condition (how do you feel: very well, well, fair, poor) (n=6082), and additional questions on the presence of any chest pain (n=4590), presence nuisance bleedings (n=3968), and reporting of perceived medication side-effects (n=2220). Answers were analysed according to diabetic status. We also analysed in the 2005 and 2010 cohorts whether subjective health status at one year was a correlate of 5-year mortality.

**Results:** Compared with non-diabetic patients (n=4692), those with diabetes (n=1390) had a poorer perceived health status (poor/fair health status: 40% vs 30%, P<0.001), more presence of chest pain (31% vs 23%, P<0.001), but less nuisance bleedings (47% vs 56%, P<0.001) and similar

reported medication side-effects (37% vs 41%, P=0.12). Using logistic regression analysis, diabetes was an independent correlate of poorer health status (any diabetes OR vs non-diabetic 1.29, 1.13–1.49, P<0.001; non-insulin-treated: 1.17, 1.00–1.36, P=0.05, insulin-treated: 1.58, 1.29–1.94, P<0.001). In diabetic patients, perceived health condition at one year was an independent correlate of 5-year death (Cox multivariate analysis): compared with patients reporting very good health, HR (95% CI) 2.16 (1.08–4.32) for good health, 3.06 (1.53–6.11) for fair health, and 3.63 (1.55–8.55) for poor health; in non-diabetic patients, 5-year survival was similar in those reporting good or very good health status, but lower in those reporting fair or poor health status (Figure).

**Conclusion:** Compared with non-diabetic patients, patients with diabetes described a poorer general health and more residual chest pain after AMI, but had less nuisance bleedings. Health condition reported one year after AMI was an independent correlate of subsequent long-term mortality, particularly for diabetic patients.

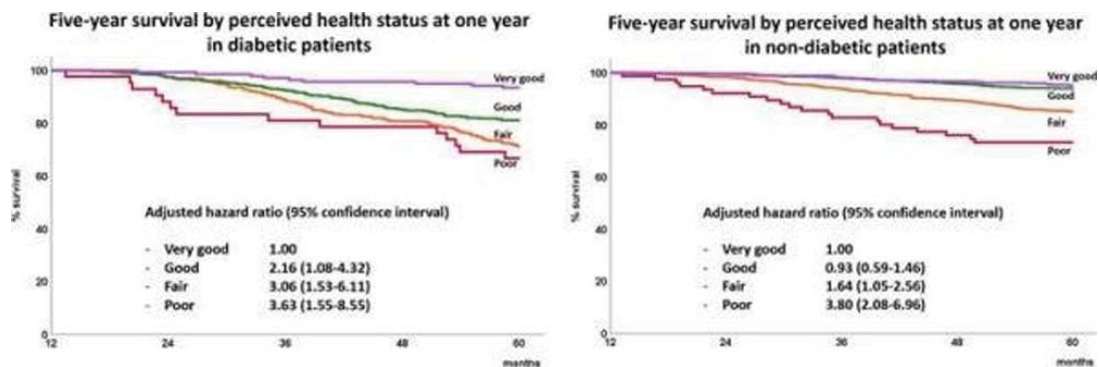


Figure 1. 5-year survival by health status