

P6448

## Major cardiovascular events free survival in the long term follow up of “real world” diabetic patients with stable coronary artery disease at the beginning of the 21st century. The CICCOR Registry

M. Ruiz Ortiz, J.J. Sanchez Fernandez, C. Ogayar Luque, E. Romo Penas, M. Delgado Ortega, D. Mesa Rubio, A. Rodriguez Almodovar, J.C. Castillo Dominguez, M. Anguita Sanchez, L. Mateos De La Haba, F. Carrasco Avalos, J. Lopez Aguilera, A. Lopez Granados, J.M. Arizon Del Prado, M. Pan Alvarez-Ossorio

*Cardiology Department. University Hospital Reina Sofia, Cordoba, Spain*

**Funding Acknowledgement:** This work has been partially financed by an investigational grant by Boehringer Ingelheim

**Background:** Safety trials of antidiabetic drugs have included a main end-point of cardiovascular morbidity and mortality. However, “real world” data on long term prognosis of diabetic patients with stable coronary artery disease (sCAD) are limited. This study aimed to assess long-term incidence of major cardiovascular events in this population and to identify clinical predictors of this end-point.

**Methods:** The CICCOR registry is a prospective, monocentric, cohort study. From February 1, 2000 to January 31, 2004, all consecutive patients with sCAD attended at two outpatient cardiology clinics in a city of the south of Spain were included in the study and prospectively followed. Patients with type 2 diabetes mellitus were selected for this analysis. None of these patients received sodium-glucose cotransporter-2 inhibitors at first visit, as they were not commercially available at that time. Survival free of major cardiovascular events (combined end-point: acute myocardial infar-

tion, stroke, or cardiovascular death) and variables associated with this end-point were investigated.

**Results:** The study sample included 394 patients (mean age 68±9 years, 61% male). After up to 17 years of follow-up (median 9 years, IQR 4–14 years, only 2 patients lost in follow-up, with a total of 3517 patients-years of observation), 66 had an acute myocardial infarction, 55 had a stroke and 165 died for cardiovascular causes. Survival free of major cardiovascular events was 88%, 70%, 57%, 47% and 32% at 3, 6, 9, 12 and 15 years. Multivariate predictors of the combined end-point are shown in the table.

**Conclusions:** Probability of major event-free survival was only 47% at 12 years in this “real world” cohort of diabetic patients with sCAD followed in the first 17 years of this century in a single center in the south of Spain. Simple clinical variables can identify patients at higher risk of events.

Predictors of major cardiovascular event

Variable	Hazard Ratio (95% CI)	p value
Age (year)	1.06 (1.04–1.08)	<0.0005
Tobacco use		0.02
Never smoker	1 (reference)	
Ex-smoker	1.43 (1.02–1.99)	0.04
Active smoker	2.23 (1.16–4.30)	0.02
Functional Class ≥II (angina)	1.57 (1.14–2.16)	0.006
Resting heart rate (10 bpm increase)	1.12 (1.01–1.24)	0.04
Diuretic treatment at first visit	1.71 (1.26–2.30)	0.001