Evaluation of the prognostic ability of serum uric acid for elderly acute coronary syndrome patients with diabetes mellitus: a prospective cohort study

Key words: uric acid, very old, acute coronary syndrome, diabetes mellitus, prognosis

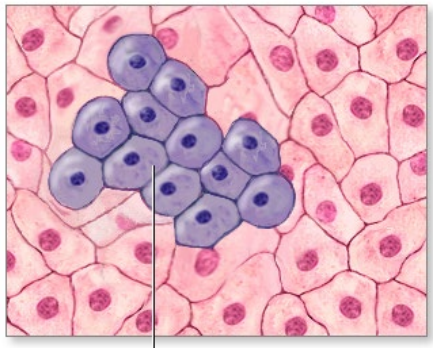


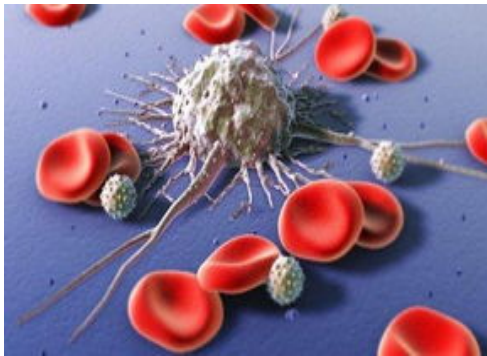
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Research Summary

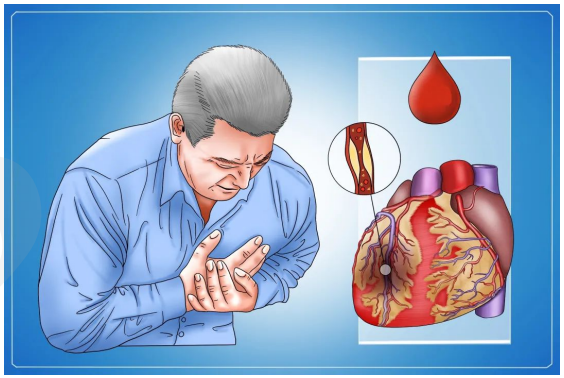
- This study evaluated the prognostic power of serum uric acid (UA) in predicting adverse events in elderly acute coronary syndrome (ACS) patients with diabetes mellitus (DM).
- By analyzing the relationship between UA level and long-term clinical outcomes in patients with DM and non-DM.
- Serum UA level is a strong independent predictor of long-term all-cause death and MACE in very old ACS patients with DM.


Proliferation of cancer cells

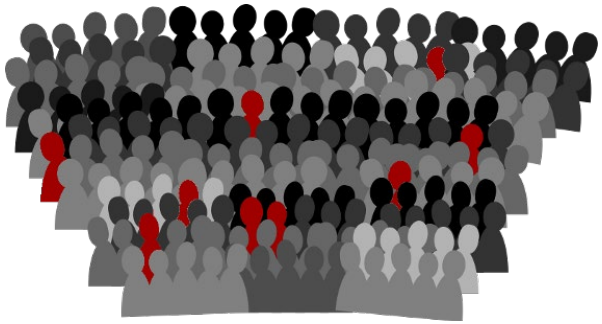


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Innovation points



- **Special object:** very old acute coronary syndrome patients with diabetes mellitus.



- **large sample size:** A total of 718 subjects.



- **Long follow-up time:** the follow-up time was 40~120 months (median: 63 months; interquartile range: 51~74 months).

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Innovation points

A series of comprehensive tables and figures were generated to summarize the relationship between long-term prognosis and uric acid levels in very old ASC patients with DM.

Table 1 | Study population: clinical characteristics in octogenarians

Table 2 | Long-term prognosis in ACS octogenarians based on UA tertiles.

Figure 1 | Correlation of UA between eGFR and EF in ACS patients with DM.

Figure 2 | All-cause mortalities in the four groups for DM and NON-DM patients, according to the triplicate of uric acid concentration.

Figure 3 | Kaplan–Meier survival curves of long-term survival rates for the diabetic patient study group.

Figure 4 | ROC curves of UA for discrimination between surviving and deceased patients, for ACS patients with DM and Non-DM.

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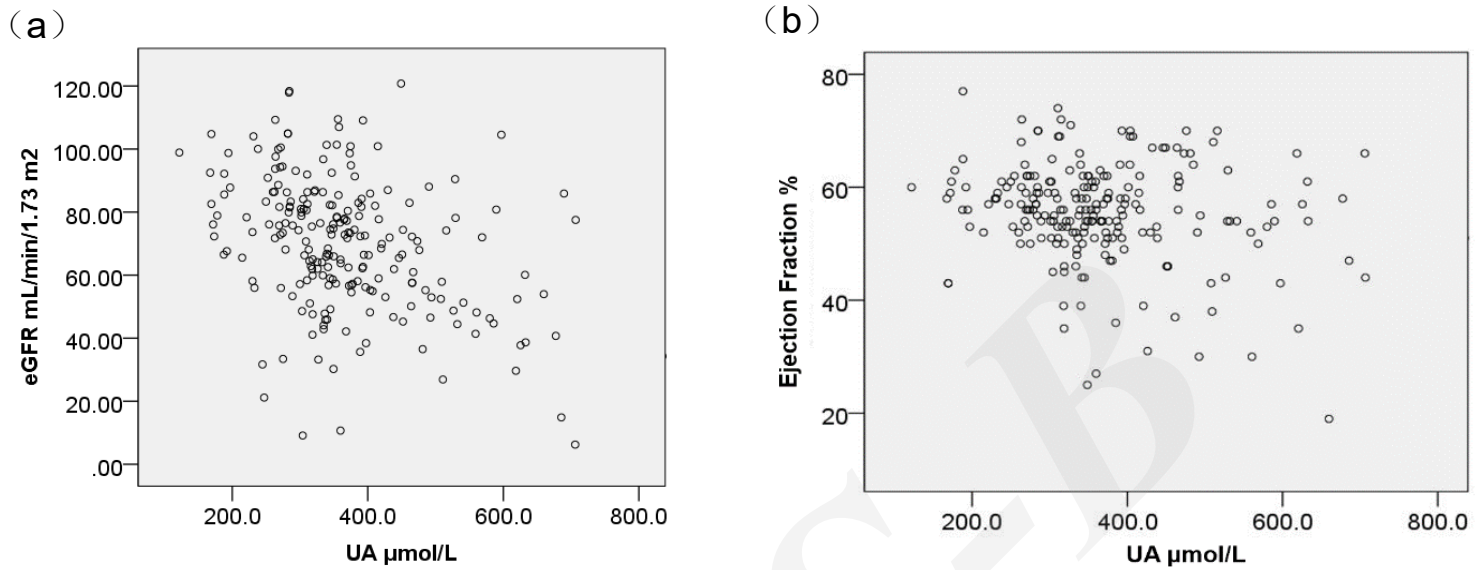


Fig. 1 Correlation of UA between eGFR (a) and EF (b) in ACS patients with DM

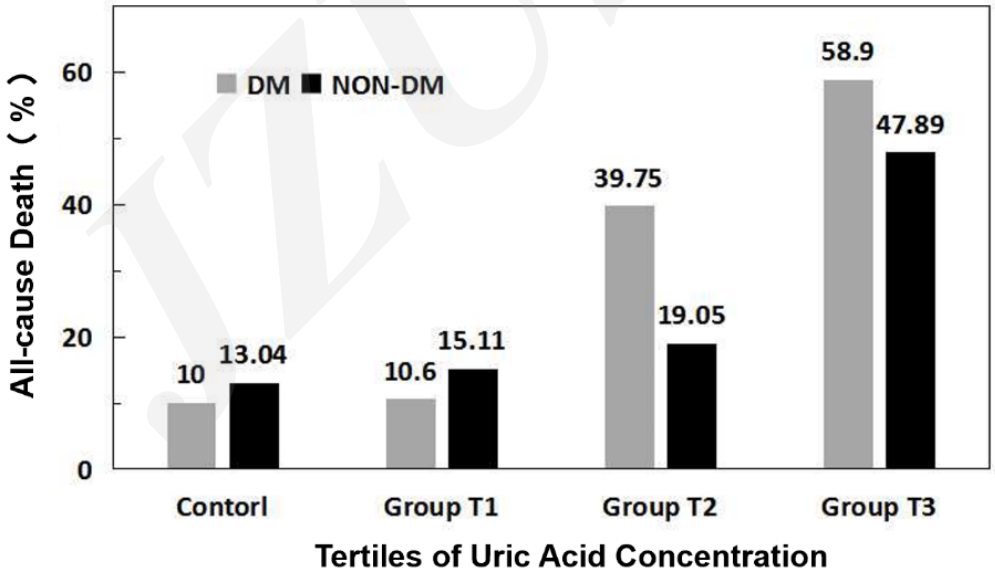


Fig. 2 All-cause mortalities in the four groups for DM and NON-DM patients, according to the triplicate of uric acid concentration

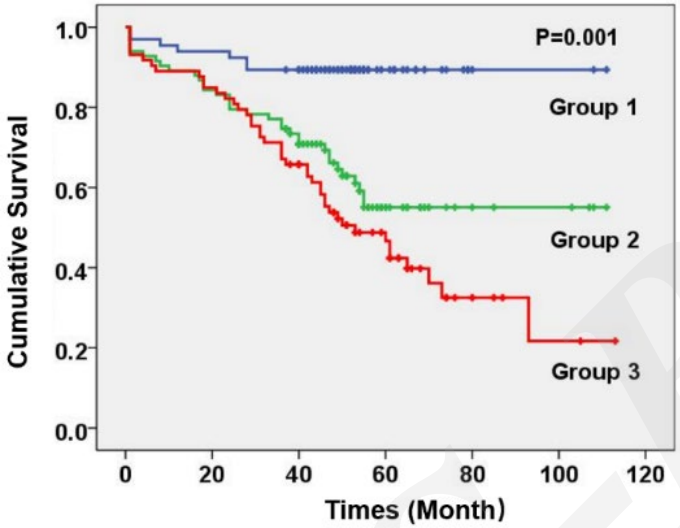


Fig. 3 Kaplan–Meier survival curves of long-term survival rates for the diabetic patient study group

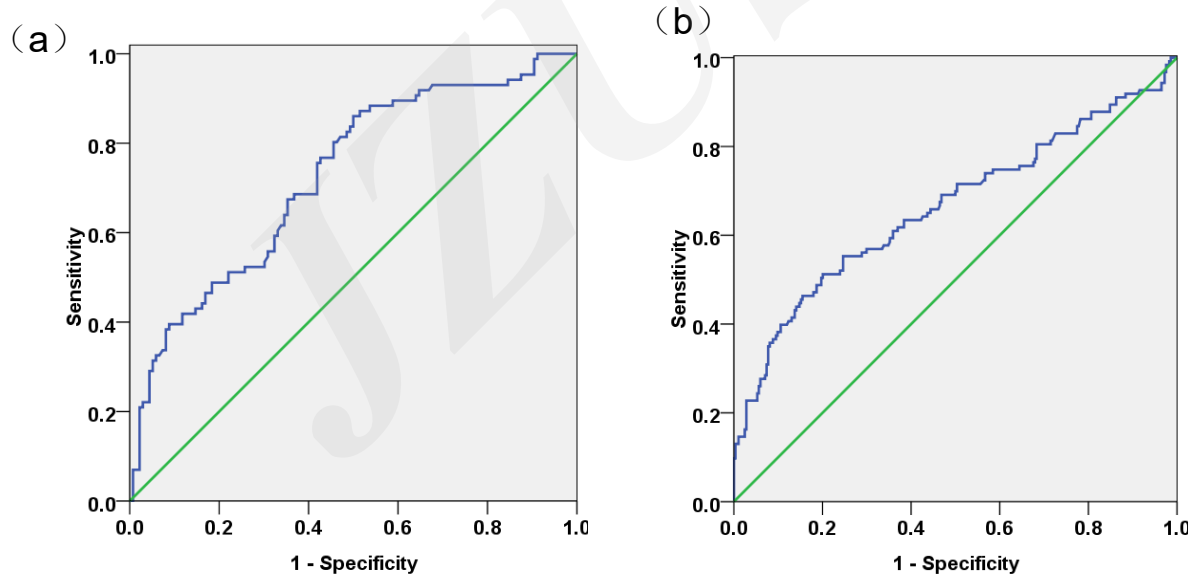


Fig. 4 ROC curves of UA for discrimination between surviving and deceased patients, for ACS patients with DM (a) and Non-DM (b)