

PARTICULARITIES OF DIGESTIVE BLEEDING IN CARDIAC PATIENT

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Poster

Oesophagus

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A prospective study of 378 patients found that gastrointestinal bleeding in cardiac patients was associated with higher rates of transfusion, ICU admission, recurrence, and mortality compared to non-cardiac patients.

KEY POINTS

- Cardiac patients with gastrointestinal bleeding required blood transfusion more frequently than non-cardiac patients (51.06% vs 28.7%, $p=0.002$) and had longer hospital stays (6 days vs 4 days).
- ICU admission was needed in 25.53% of cardiac patients versus 7.55% of non-cardiac patients ($p=0.00$), and mortality was higher in cardiac patients (4.25% vs 1.2%, $p=0.002$).
- Among 47 cardiac patients with gastrointestinal bleeding, 79.16% of those on vitamin K antagonists were overdosed at presentation.
- Recurrence of bleeding was more common in cardiac patients than non-cardiac patients (17% vs 4.83%, $p=0.00$).
- This material is most relevant for gastroenterologists and cardiologists managing anticoagulated patients and assessing bleeding risk.

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