

ANALYSIS OF IN-HOSPITAL AND DELAYED CARDIOVASCULAR COMPLICATIONS AFTER ACUTE UPPER GASTROINTESTINAL BLEEDING

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Poster

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In a retrospective analysis of 1345 acute upper gastrointestinal bleeding patients, 1.7% developed in-hospital cardiovascular complications and 5.9% developed delayed cardiovascular complications within 6 months, with independent risk factors identified for each outcome.

KEY POINTS

- Independent risk factors for in-hospital cardiovascular complications were older age (HR 1.08), previous coronary disease (HR 2.98), elevated urea at admission (HR 1.007 per mg/dL), and rebleeding (HR 3.85).
- Previous heart failure was the independent risk factor for delayed cardiovascular complications within 6 months (HR 5.92).
- Patients who developed in-hospital cardiovascular complications had 36.4% in-hospital mortality compared to 10% in those without these complications (HR 5.15, $p=0.001$).
- Patients who developed delayed cardiovascular complications had 23.1% delayed mortality compared to 6.5% in those without these complications (HR 4.34, $p<0.001$).
- This study may be relevant for clinicians managing acute upper gastrointestinal bleeding patients, particularly for risk stratification and monitoring strategies.

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