



## CHF and various risk factors

**Monirul Haque**

Jamjoom Pharmaceutical Pvt Ltd, Jeddha Saudia Arabia

### Abstract:

**Introduction:** Congestive heart failure (CHF) is a relatively common condition in stroke patients. Limited information is known regarding CHF in patients with an acute ischemic stroke (AIS).

**Objective:** We evaluated clinical characteristics, predisposing factors, and outcomes in stroke patients with history of CHF.

**Methods:** We prospectively included AIS patients admitted to the institutions participating in the Registry of the Canadian Stroke Network (RCSN) between 2014 and 2019. History of chronic congestive heart failure (CHF) determined from medical records, physical examination and investigations. Primary outcome was death or disability at discharge (modified Rankin scale equal to or greater than 3). Secondary outcomes included admission ICU, disposition, length of hospital stay, death at 3 months and at 1 year and 30 day hospital readmissions. Logistic regression and survival analyses were performed to determine the association of risk factors with the outcomes of interest.

**Results:** Among 12686 patients with AIS, CHF was found in 1152 (9.1%) of patients. Mean age was  $78.5 \pm 11$  years. CHF patients were more likely to have hypertension, diabetes mellitus, hyperlipidemia, coronary artery disease, atrial fibrillation, valvular heart disease and peripheral vascular disease. CHF more likely presented with a severe stroke (25.8% vs 14.1%,  $p < 0.0001$ ) and cardioembolic stroke subtype (42.2% vs 21.3%,  $p < 0.0001$ ). CHF was associated with higher risk of death at 30-days (24.2% vs 11.2%;  $p < 0.0001$ ) and at 1-year (44% vs 20.6%;  $p < 0.0001$ ) and disability at discharge (70.3% vs 56%;  $p < 0.0001$ ). Mean length of stay was longer in stroke patients with CHF ( $15.51 \pm 23.91$  vs  $12.65 \pm 19.76$ ;  $p = 0.013$ ). In the multivariate analysis, CHF (OR 1.18; 95%CI 1.01- 1.37) was an independent predictor of death and disability after



adjusting age, stroke severity, and other comorbid conditions.

**Conclusions:** In this large cohort study, CHF occurred in 9.1% of AIS patients. Stroke patients with CHF had poorer outcomes and longer hospitalization. Furthermore, after adjusting age, stroke severity and comorbidity, CHF was an independent predictor of death and disability. Still need fund for more intensive research.

### Biography:

Monirul Haque is a Pharmacist by profession and a writer by passion, he aspires to live a professionally integrated life that not only reflects my career position but also offer a great chance in significantly contributing towards organizational growth and profitability. Determined to work efficiently for the betterment of the company and demonstrate my professionally inclined working skills in a brilliant manner acceptable to all

### Publication of speakers:

1. Poole DC, Hirai DM, Copp SW, Musch, et al. Muscle oxygen transport and utilization in heart failure: implications for exercise (in)tolerance. *Am J Physiol Heart Circ Physiol.* 2012;302:H1050-H1063. doi: 10.1152/ajpheart.00943.2011
2. O'Donnell DE, Laveneziana P, Webb K, Neder JA, et al. Chronic obstructive pulmonary disease: clinical integrative physiology. *Clin Chest Med.* 2014;35:51-69. doi: 10.1016/j.ccm.2013.09.008.

International Conference on cardiology | 19-20, March 2020 | London, UK

**Citation:** Monirul Haque; CHF and various risk factors; Cardiology Summit on 2020; March 2020 | London, UK