<u>Differences in clinical characteristics, management and outcomes between men and women with type 2 myocardial infarction stratified by mechanism of injury</u>

Abstract

Objective: To evaluate sex differences in clinical characteristics, management and outcomes in type 2 myocardial infarction stratified by mechanism of injury.

Methods: A secondary analysis of a stepped-wedge, cluster-randomised controlled trial including patients with the adjudicated diagnosis of type 2 myocardial infarction using the Fourth Universal Definition of Myocardial Infarction from 10 hospitals in Scotland from 2013-2016. Patients were grouped into a cardiovascular and non-cardiovascular mechanism of injury.

Results: There were 1115 patients in the final study population. In the cardiovascular group, men were younger than women (73 years vs 79 years; p < 0.001), had more cardiovascular comorbidity, were more likely to be prescribed a new beta- blocker (27% vs 21%; p = 0.045) and be discharged on a statin (66% vs 58%; p = 0.022). In the non-cardiovascular group men were more likely to be prescribed a new proton pump inhibitor (12% vs 4%; p = 0.018). We observed no sex differences in outcomes according to mechanism of injury.

Conclusions: There are sex differences in clinical characteristics and management in type 2 myocardial infarction according to mechanism of injury, particularly those with a cardiovascular mechanism, however the differences in outcome seen in type 1 infarction are not evident.