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One year prognosis of unspecified chest pain

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Prognosis of unspecified chest pain is important given the high frequency of chest pain leading to emergency medical care. The 1-yr prognosis of patients (aged 20-89 years) discharged with a primary diagnosis of unspecified chest pain (ICD-10, R072-R074) in 2010-2012 was evaluated using Norwegian health care administrative data sources. For evaluation of incident events, patients with a prior 2-yr history of chest pain or cardiovascular disease (CVD) were excluded. Nelson-Aalen cumulative hazards of incident ischemic heart disease (IHD) and monthly hazards of mortality following discharge were evaluated. Mortality was also compared to the general population by standard mortality ratios (SMR). There were 59,569 patients identified; the majorities were referred to hospital or outpatient clinics by community emergency medical centers. The hazards of mortality and the percent of deaths attributed to cardiovascular disease (CVD) were highest within the first 2 months post discharge. Cumulative hazards of IHD for men aged 45-64 and 65-74 years was 12% and 20%, and for women 6% and 10%, respectively by age group. Men and women under 65 yrs. of age had significantly higher non-CVD mortality than expected: SMR (95% CI) for men > 65 yrs. of age was 1.35 (1.2-1.6); for men < 65 yrs. of age was 1.53 (1.21-1.91); and for women < 65 yrs. of age the SMR was 1.54 (1.17-1.98). The prognostic data indicates that patients discharged with unspecified chest pain are an at-risk group in terms of early post-discharge mortality, incident IHD, and non-CVD mortality.

Biography

Egeland holds a PhD in Chronic Disease Epidemiology from the University of Pittsburgh, Pennsylvania with considerable expertise in epidemiological methods and analyses of complex data in cross-disciplinary research involving cardio-metabolic diseases, reproduction, and nutritional health. She currently works as Senior Researcher at the Norwegian Institute of Public Health and is an Adjunct Professor at the Dept. of Global Public Health and Primary Care, University of Bergen, Norway. She has over 135 publications including book chapters; is currently engaged in registry-based research, and leads several research projects spanning disciplines in life-course epidemiology.

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