Clinical manifestation of acute myocardial infarction, classified by age group and gender

Behzad Taghipour¹, Erika Sivarajan Froelicher², Hamid Sharif Nia^{3*}, Yiong Huak Chan⁴, Samia R. Toukhsati⁵, Mohammad Ali Soleimani⁶, Ali Akbar Haghdoost⁷

- 1- BScN, Nursing of Emam Khomeini Hospital of Amol, Amol, Iran
- 2- Professor, Department of Health Sciences, Sifa University, Izmir, Turkey and Professor Emeritus, Department of Physiological Nursing, School of Nursing, and Department of Epidemiology & Biostatistics, School of Medicine, University of California San Francisco, San Francisco, California, USA
- 3- PhD of Nursing, Assistant Professor, Faculty of Nursing and Midwifery of Amol, Mazandaran University of Medical Science, Sari, Iran
- 4- PhD of Mathematics, Head, Biostatistics Unit, Yong Loo Lin School of Medicine, National University Health System, Singapore.
- 5- PhD, Department of cardiology, Austin Health, Heidelberg Vic 3084, Australia.
- 6- PhD of Nursing, Assistant Professor, Assistant Professor, School of Allied Medical Sciences, Qazvin university of Medical Sciences, Qazvin, Iran
- 7-PhD of Epidemiology, Professor of Modeling in Health Research Center, Institute of Future Studies in Health, Kerman University of Medical Sciences, Kerman, Iran
- *Corresponding Author: Dr. Hamid Sharif Nia E mail: H.sharifnia@mazums.ac.ir

Introduction: Cardiovascular disease, particularly myocardial infarction, is the most common cause of death in many countries. Myocardial infarction in young individuals has fewer clinical signs and symptoms, and has a different prognosis than in older individuals with cardiovascular disease. The purpose of the study was to evaluate clinical manifestations of acute myocardial infarction as classified by age and gender.

Material and Methods: This descriptive cross - sectional study was conducted in a coronary care unit of a regional urban medical center in northern Iran (Amol). A total of 366 patients with a diagnosis of acute myocardial infarction were recruited from January to June 2015. The patients were interviewed using a two-part questionnaire that included demographic information, past medical history, and current symptoms. Medical data (including laboratory tests on admission) and clinical details (symptom onset of acute myocardial infarction and sites of involvement) were also collected.

Results: Multivariate logistic analyses were performed to identify the respective risk predictors in post MI patients classified by age and gender. The risk predictors for elderly patients were dyspnea, OR=1.76 (95% CI 1.01, 3.06), weakness OR=2.35 (95% CI 1.31, 4.21), nausea OR=1.83 (95% CI 1.04, 3.20), vomiting OR=2.48 (95% CI 1.34, 4.57), fatigue OR=1.87 (95% CI 1.02, 3.39), belching, OR=2.13 (95% CI 1.08, 4.20) and hiccups OR=2.81 (95% CI 1.25, 6.30). Sub group analysis in older female patients identified weakness OR=3.13 (95% CI 1.11, 8.85), and belching, OR=34.70 (95% CI 3.86, 312.2) as risk