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The influence of smoking cessation-related weight gain on cardiovascular risk in patients treated with drug-eluting stent after acute coronary syndrome

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Aim: Aim of this study was to analyse association of smoking cessation influence on long-term clinical outcomes in patients with an acute coronary syndrome (ACS).

Introduction: Smoking and obesity are important cardiovascular risk factors. Patients often put on weight after quitting smoking.

Methods: 137 consecutive ACS patients of the Department of Coronary Heart Disease John Paul II Hospital in Cracow admitted between 2011 and 2013 were enrolled in the study. They had no previous history of Coronary Heart Disease and underwent Percutaneous Coronary Intervention with implantation of at least one Drug Eluting Stent. Telephone follow-up was carried out after a minimum time of 3 years. Patients were divided into 2 groups: patients who stopped smoking (91) and non-smokers (46) which were compared according to weight gain, increased of the BMI, morbidity of diabetes mellitus (DM), reasons of admission to hospital, occurrence of another ACS, stroke and neoplasm.

Results: The population consisted of 66% males, 34% females mean age 67 SD 11.29. Patients who used to smoke were significantly younger than non-smokers (64.,99 vs. 71.37; $P = 0.048$). Both groups did not statistically differ in terms of gender and frequency of DM. The ex-smokers were admitted more frequently due to STEMI while in the non-smokers NSTEMI and Unstable Angina predominated. The weight and BMI in both groups did not differ on the date of ACS. However after 3 years there was a statistically significant difference: ex-smokers put on weight on average 1.3 kg while non-smokers lost 2.17 kg ($p = 0.01$). There was no association between the patients' history of smoking and occurrence of stroke, malignancy or another ACS.

Conclusion: Smoking cessation does not appear to influence long-term clinical outcomes after ACS. However it associates with weight gain which obviously increases cardiovascular risk. Our findings need further investigation and follow-up in a larger cohort of ACS patients.

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PS059

Neonatal abstinence syndrome – Retrospective review

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Aim: To evaluate the characteristics of newborns diagnosed with neonatal abstinence syndrome (NAS) and the characteristics of their mothers in Vojvodina from 2012 to 2016., as well as the interrelationship of certain features.

Introduction: NAS is a collection of symptoms and signs that occur as a result of the sudden interruption of fetal exposure to certain substances (methadone, heroin, buprenorphine, etc.) that were used or abused by the mother during pregnancy.[1,2] It is manifested in a multitude of symptoms including central nervous system irritability, over-activity of the vegetative nervous system and dysfunction of the gastrointestinal tract.[3,4] The occurrence of NAS is closely related to the maintenance therapy of pregnant opioid addicts.[1]

Methods: This study analyzed medical records of women who gave birth at the Clinic of Ginaecology and Obstetrics in Novi Sad, whose children were diagnosed with NAS after birth, as well as the medical records of newborns treated at the Neonatology Department of the Institute for Child and Youth Health Care of Vojvodina diagnosed with NAS. Medical records included data from the medical history of the newborn and personal and gynaecological medical history of their mothers.

Results: A total of 41 cases of NAS were registered. An increase in incidence was noticed during the five-year period of about 15%. Mothers were mostly unemployed (80.49%). Slightly more than half of respondents (57.5%) during pregnancy were on one of substitution treatment modalities. The majority of newborns with NAS (75.61%) were male. The clinical picture was significantly more expressed in children whose mothers consumed methadone, compared to mothers who consumed heroin during pregnancy ($p = 0.0002$).

Conclusion: The incidence of diagnosed NAS cases is growing. Representation of male newborns with NAS is three times higher than female newborns. Methadone cause more NAS symptoms than heroin.

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Associations of epicardial adipose tissue thickness and cardiometabolic risk factors in STEMI patients treated with percutaneous coronary intervention

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Aim: To evaluate EAT thickness in STEMI patients treated with percutaneous coronary intervention (PCI) and its associations with body mass index (BMI), blood lipids and acute left ventricular dysfunction.