

**A STUDY ON PROGNOSTIC VALUE OF ADMISSION GLYCOSYLATED  
HEMOGLOBIN AND BLOOD GLUCOSE IN NONDIABETIC PATIENTS  
WITH ST- SEGMENT ELEVATION MYOCARDIAL INFARCTION.**

**ABSTRACT**

**BACKGROUND:** In non-diabetic patients, HbA1C could be utilised for risk stratification of CAD and its severity; independent of traditional cardiovascular risk factors.

**OBJECTIVES :** To determine the association between both acute hyperglycemia or stress hyperglycemia if present , that is denoted by the admission blood glucose at the time of presentation and chronic hyperglycemia which is denoted by HbA1c and short term clinical outcome in non-diabetic patients with STEMI.

**METHOD:** Fifty non-diabetic patients admitted in the intensive care medicine unit with acute ST elevation MI, treated with fibrinolysis were included in the study. HbA1C was done along with other routine investigations. Echocardiogram was done for all the patients. They were followed up during the whole days of hospital stay and were watched for any complications.

**RESULTS:** The complications of STEMI were found more in Abnormal HbA1c group (OR 4.84). Cardiogenic shock found more in diabetic group (OR 12.27). Abnormal admission RBS did not correlate significantly with STEMI complications.

**CONCLUSION:** HbA1c should be available for all patients presenting with STEMI regardless of previous glycemic status. It predicts the complications of STEMI unlike admission RBS.

**KEYWORDS**

HbA1C, Myocardial Infarction, RBS vs HbA1c, HbA1c in STEMI, STEMI, Complications STEMI, India