CLINICAL AND EPIDEMIOLOGICAL CHARACTERISTICS OF ACUTE CORONARY SYNDROME AND TREATMENT OUTCOME IN THE JABLANICA DISTRICT

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Cardiovascular diseases (CVD) were the main cause of death in Serbia in 2010. Of all CV deaths in 2010, 21.4% were caused by ischemic heart disease. Of all the fatalities from ischemic heart disease, 54.6% resulted from the acute coronary syndrome (ACS), whereas 45.4% were caused by other heart diseases.

The study aimed to establish the prevalence of ACS, to analyse the risk factors, forms of clinical presentation, and outcomes of the patients with ACS treated from 2006 to 2010 in the coronary unit (CU) in Leskovac.

The number of newly affected in the Jablanica district was significantly lower than the total number of the newly affected in Serbia. The average age of the patients with ACS, treated in the CU in Leskovac, was always lower than the average age of patients treated in the CUs in Serbia, but it was statistically significantly lower in 2006. Smoking, positive family anamnesis (71.4%), physical inactivity (61.5%), and stress (51%) of the patients with ACS treated in the CU in Leskovac were significantly present in comparison to all CU in Serbia. The most present form of ACS in the CU in Leskovac was myocardial infarction with ST elevation (STEMI) (69.7%). Rarely present form of ACS was myocardial infarction without ST elevation (NSTEMI) (24.4%), whereas the rarest form of ACS was unstable angina pectoris (UAP) (10.1%). In the CU in Leskovac, the number of STEMI was statistically and significantly higher, whereas the number of UAP was statistically and significantly lower in comparison to all CU in Serbia. The greatest percentage of patients with ACS was recovered (70.1%) both in all CU in Serbia and Leskovac (83.5%). The number of recovered patients in Leskovac was statistically and significantly higher.

Recognizing the factors of risk (FR) and their elimination and modification in healthy people is the basis for CVD prevention. Prompt using of measures for correction of cardiovascular factors of risk represents the best form of treatment and fight against this disease. *Acta Medica Medianae 2017;56(1):9-16.*

Key words: *ACS (acute coronary syndrome), STEMI (myocardial infarction with ST elevation), NSTEMI (myocardial infarction without ST elevation), UAP (unstable angina pectoris).*