Int J Biol Med Res. 2013; 4(1): 2788-2791

Contents lists available at BioMedSciDirect Publications

International Journal of Biological & Medical Research

Journal homepage: www.biomedscidirect.com

Original Article

Prognostic importance of c - reactive protein levels in ischemic heart disease

Aithal KR [a], Mahabalshetti AD[b] Rajoor UG [c]

[a,c]*Associate professor, Department of Medicine, SDM college of medical sciences and hospital, Sattur, Dharwad-580009, state-Karnataka, India.*
[b]*Assistant professor, Department of Medicine, SDM college of medical sciences and hospital, Sattur, Dharwad-580009, state-Karnataka, India.*

ARTICLE INFO

Keywords:
C-reactive protein
Unstable angina
Acute myocardial Infarction

ABSTRACT

Objectives: C-reactive protein (CRP) is a highly sensitive marker of inflammation and tissue injury. This study aims to evaluate the changes in the CRP levels in the serum in patients with Ischemic Heart diseases and to evaluate the utility of CRP levels as a diagnostic and prognostic tool of myocardial ischemia and infarction. Methods: We carried out a case-control study over 18 months wherein the study groups are compared with healthy control group with respect to their CRP values on admission, after 48 hours and at the end of one week. Study group included Stable angina group (n=25), Unstable angina (UA) group (n=25) and AMI group (n=50) along with healthy control group (n=25). Results: The mean (± SD) age group in our study groups was matched with the control group. Males dominated the present study groups and control groups. In UA group, majority 80% of patients had raised CRP (1.776± 2.68 mg/dl) compared to control group and stable angina group. In AMI group all patients had a raised CRP (4.752± 4.56 mg/dl) on admission and these values were higher compared to UA group and control group ($p < 0.001$). In UA group 16% and in AMI group 66% developed complication and both these groups had significantly higher CRP levels on admission as compared to those patients who had no complications ($P < 0.001$). The patients who expired also had significantly higher CRP values (9.45 ± 5.435 mg/dl) on admission as compared to those without any complications ($P < 0.001$). Conclusions: Higher the CRP value on admission and 48 hours more is the risk of complications and death. Hence CRP values help in risk stratification and predicting the prognosis.

* Corresponding Author : **: Dr. Kiran Aithal**
Associate Professor, Department of Medicine,
SDM College of Medical Sciences and Hospital,
Manjushree nagar, Sattur, Dharwad-09. Karnataka
Email: drkiranaithal@yahoo.com