**GRADUAL DECLINE IN IN-HOSPITAL MORTALITY OF PATIENTS UNDERGOING PERCUTANEOUS CORONARY INTERVENTION IN DIABETES AND NON-DIABETES PATIENTS**

**M.R. Movahed**, M. Hashemzadeh, M. Hashemzadeh

The Southern Arizona VA Health Care System, University of Arizona Sarver Heart Center, Long Beach VA Health Care System, Tucson, AZ, USA

Background: We recently published gradual decline in the percutaneous coronary intervention (PCI) related in-hospital mortality over recent years. The goal of this study was to evaluate this trend in diabetes vs. non-diabetes patients in the United States. Method: The Nationwide Inpatient Sample (NIS) database was utilized to calculate the age-adjusted incident rate of PCI related mortality from 1988 to 2006 based the diagnosis of type 2 diabetes mellitus (DM) using ICD-9 coding.

Results: A total population of 504,371 patients underwent PCI between 1996-2006 were available for our study. We found that age adjusted incidence of PCI related mortality declined gradually in diabetes or non-diabetes patients over the year studied with lowest level seen in 2006. PCI related mortality in DM was 94 per 100,000 in 1988 with gradual decline to the lowest incidence of 24 per 100.000 in 2006 (p<0.01). Similar decline was seen in non-diabetes population (73 per 100,000 in 1988 vs. 36 per 100,000 in 2006). Conclusion: PCI related mortality has been declining over the last few decades in DM and non- DM patients. This suggests that improvement in the care of patients undergoing PCI has translated in a better outcome regardless of important comorbidities.