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NON-INVASIVE VENTILATION IN HOSPITALIZED ACUTE HEART FAILURE IS ASSOCIATED TO SHORT-TERM MORTALITY


Background: Some patients with acute heart failure (AHF) are initially treated with noninvasive ventilation (NIV). Today, it is not fully explored the prognosis of subjects hospitalized with AHF and treated with NIV.

Methods: We retrospectively evaluated subjects hospitalized with AHF between 2022 and 2023 in intensive care unit. We determined the association between NIV and mortality at 90-days using Cox proportional hazard and Kaplan-Meier analyses.

Results: We included 191 subjects who were hospitalized with AHF. Ninety-days mortality occurred in 24% subjects. Seventy-five subjects were treated with NIV (32%) and showed higher mortality when compared with for those without NIV (55% vs 35%, p<0.01). At 90-days, mortality was significantly associated with NIV (hazard ratio 2.3, 95% CI 1.3-4.0; p=0.005). Survival curves for mortality according to NIV use is in figure (logrank p= 0.004; chi-squared = 8.3). After adjustment for sex, age, BNP, renal and left ventricular functions, NIV treatment remained significantly associated to about 2-fold risk increase in mortality.

Conclusions: In subjects hospitalized with AHF the treatment with non-invasive ventilation was associated to short-term mortality independently from clinical parameters. This prognostic information should be weighted against structured trials in order to derive more specific clinical implications.