URGENCIAS CARDIOVASCULARES EN PACIENTES CON DIAGNOSTICO DE DIABETES Y DE NOVO EN UNA IPS DE MAGANGUÉ (BOL) ENTRE ENERO DEL 2021 Y JULIO 2023

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RESUMEN

La relación entre la diabetes y el riesgo cardiovascular se ha estudiado ampliamente; la mortalidad asociada a la entre estas dos entidades sigue siendo un problema clínico y de salud pública.

Objetivo: Evaluar urgencias cardiovasculares en pacientes con diagnóstico de diabetes y de novo en una IPS de Magangué (Bol) entre Enero del 2021 y Julio 2023.

Metodología: Se realizó un estudio analítico en una clínica de Magangué, Bolívar, entre 2021 y 2023. Se incluyeron todos los pacientes que ingresaron por urgencia

cardiovascular, de los cuales el 29% tenían diabetes mellitus. Se hizo descripción sumarial de las variables cuantitativas y categóricas. Se emplearon pruebas estadísticas como el test de Wilcox y Chi-cuadrado para evaluar diferencias entre grupos de pacientes. Se aplicó un modelo de regresión logística multivariado para identificar factores asociados a mortalidad cardiovascular, se calculó el Odds Ratios ajustados con intervalos de confianza al 95%. Se consideró significativo un valor de $p < 0.05$. Se utilizó el software estadístico R-CRAN versión 4.3.2.

Resultados: Se estudiaron 452 pacientes ingresados por urgencias cardiovasculares. La mayoría eran mujeres de 63 años en promedio. Las principales comorbilidades fueron dislipidemia, infarto agudo de miocardio, obesidad e hipertensión. La cefalea fue el motivo de consulta más común. En pacientes con DM 2, los casos previos mostraron más comorbilidades y problemas renales, mientras que los casos nuevos tenían peor control glucémico. La presión arterial sistólica fue mayor en sobrevivientes que en fallecidos. La obesidad aumentó significativamente el riesgo de mortalidad cardiovascular.

Conclusión: Los factores tradicionales siguen siendo un factor importante a monitorear y hay que fortalecer la atención primaria para minimizar los eventos catastróficos detectando en mayor medida las personas en riesgo de DM2 y disminuir su incidencia

Palabras clave: Diabetes mellitus; Urgencias cardiovasculares; Control glucémico; Obesidad; Mortalidad.

ABSTRACT

The relationship between diabetes and cardiovascular risk has been extensively studied; the mortality associated with these two conditions remains a clinical and public health concern.

Objective: To assess cardiovascular emergencies in patients with pre-existing and newly diagnosed diabetes at a healthcare facility in Magangué, Bolívar, between January 2021 and July 2023.

Methods: An analytical study was conducted at a clinic in Magangué, Bolívar, spanning from 2021 to 2023. All patients admitted for cardiovascular emergencies were included, with 29% having diabetes mellitus. Descriptive summaries were made for quantitative and categorical variables. Statistical tests including Wilcoxon and Chi-square were used to evaluate differences between patient groups. A multivariate logistic regression model was applied to identify factors associated with cardiovascular mortality, calculating adjusted odds ratios with 95% confidence intervals. A p-value <0.05 was considered significant. R-CRAN software version 4.3.2 was used for statistical analysis.

Results: A total of 452 patients admitted for cardiovascular emergencies were studied. The majority were females with an average age of 63 years. The most

prevalent comorbidities were dyslipidemia, acute myocardial infarction, obesity, and hypertension. Headache was the most common reason for consultation. Among patients with type 2 diabetes, pre-existing cases exhibited more comorbidities and renal issues, while new cases had poorer glycemic control. Survivors had higher systolic blood pressure compared to non-survivors. Obesity significantly increased the risk of cardiovascular mortality.

Conclusion: Traditional risk factors remain crucial for monitoring, emphasizing the need to strengthen primary care for early detection and reduction of catastrophic events in individuals at risk for type 2 diabetes.

Key Words: Diabetes mellitus; Cardiovascular emergencies; Glycemic control; Obesity; Mortality.

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