

## Prognostic Value of Serum Antiphospholipid Antibodies in Patients with ST-Segment Elevation Myocardial Infarction

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Hypercoagulability in patients with primary Antiphospholipid syndrome (APS) predisposes to high rates of thromboembolic events and restenosis of the coronaries causing significant morbidity and mortality. Although the association between the APS and Acute Myocardial infraction (AMI) is very rare about 4%. Treatment of patients with APS represent a clinical challenge. Current study was designed to investigate the correlation between antiphospholipid antibodies (aPL) in prediction of the complication-associated AMI in Aswan governorate. Fifty AMI patients were compared to thirty controls. Serum aPLs was assessed using commercial ELISA kits. In patients; data revealed that mean Lupus anticoagulant was 59.2 U/mL, IgM and IgG anticardiolipin was 1.14 U/mL and 1.26 U/mL respectively. In addition the mean of antiphosphatidyl inositol (aPI) was 11.68 U/mL. On follow-up; Lupus and aCA IgM showed weak correlation with cases that showed further complications, while aCA-IgG showed protective effects ( $P=0.001/ r=-0.463$ ) and aPI-IgM moderate correlation with the complications ( $P=0.048/ r=0.281$ ). It's concluded that aCAs play distinct roles in the pathogenesis of AMI reduced levels of aCA-IgG has protective effects while the aCA-IgM indicate a poor prognosis, and that aPI is a good marker for prediction of recurrence of cardiovascular events among patients.