Does the Timing of Cardiogenic Shock Occurrence or Onset During Hospitalization and Time of Admission Affect 30-Day Mortality?

**Primary and secondary cardiogenic shock were associated with comparable risk of 30-day all-cause mortality; however, off-hours admission was independently associated with improved risk of 30-day all-cause mortality in cardiogenic shock.**

**STUDY DESIGN**

Prospective single center study of cardiogenic shock (CS) from any cause from 2019 to 2021 evaluated all-cause 30-day mortality for:

- CS on admission (1°) vs onset during hospitalization (2°)
- CS admitted on-hours vs off-hours

**RESULTS**

Risk of 30-day mortality did not differ in 1° CS vs 2° CS

2° CS associated with risk of 30-day mortality following acute myocardial infarction (HR 2.09; 95% CI, 1.13 to 3.89)

CS admitted during off-hours associated with improved risk of all-cause mortality (HR 0.49; 95% CI, 0.30 to 0.82)

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Primary and secondary cardiogenic shock were associated with comparable risk of 30-day all-cause mortality; however, off-hours admission was independently associated with improved risk of 30-day all-cause mortality in cardiogenic shock.

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