**ETHNIC VARIATIONS IN PRESENTATION AND DOOR TO BALLOON TIME IN PATIENTS WITH STEMI**

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Background: Given our highly diverse ethnic community, we sought to examine ethnic variations in symptom presentation, timing from symptom onset to presentation, and D2B time in patients presenting with ST-elevation myocardial infarction (STEMI) to our emergency department (ED).

Methods: This is a retrospective cohort analysis of patients presenting to New York Hospital of Queens ED with STEMI from June 2008 to December 2010. Based on self-reporting, patients were divided into five ethnic groups. Patient data collected includes demographic data, cardiac risk factors, presenting symptoms, time of symptom onset to presentation, door to EKG time, door to catheterization lab time, and D2B time.

Results: A total of 244 patients presented with STEMI and underwent PCI, of which 54% were Caucasian, 13% Hispanic, 4% African American, 11% South Asian, and 18% East Asian. South Asians presented younger (56±10 vs 62±13 years, p<0.01), and East Asians had a lower BMI (24.7±3.1 vs 27.3±5.1, p<0.01). Across the 5 ethnic groups, there were no significant differences in symptom presentation on arrival to the ED. No ethnic variability was observed in the timing of symptom onset to ED presentation. Additionally, there were no significant ethnic differences in door to EKG, door to catheterization lab, and D2B times.

Conclusions: Contrary to reports in the literature, we observed no differences in symptom presentation and timing of presentation from symptom onset to ED arrival across the five ethnic groups. Moreover, we observed no ethnic disparities in D2B times within our institution.