**THE OBESITY PARADOX ALSO OCCURS AMONG HISPANIC PUERTO RICAN PATIENTS PRESENTING WITH ACUTE CORONARY SYNDROMES**

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*Objective*: To evaluate the relationship between body mass index (BMI) and in-hospital mortality of Hispanics Puerto Rican patients with acute coronary syndrome (ACS).Background: Studies favor an association between higher BMI and lower mortality, this is part of the obesity paradox phenomenon. We evaluated this phenomenon in Hispanic, Puerto Rican, patients with ACS.

*Methods*: In this cross-sectional study, medical records from 3,993 patients with ACS during a 3-year period from 12 hospitals in Puerto Rico were reviewed. Study variables were: socio-demographics, comorbidities, cardiac symptoms, treatments, and inpatient complications. A p < 0.05 was considered statistically significant.

*Results*: Patients, mostly male, were classified by BMI as follows: 28% normal weight, 41% overweight, 20% obese, and 11% morbidly obese. Obese and morbidly obese groups were youngest; and had higher prevalence of HTN, DM II, and asthma (p < .001). Treatment for ACS [ACE inhibitors (p=.03), beta blockers (p=.23), aspirin (p=.07), plavix (p=.003), lipid lowering agents (p=.004), and enoxaparin (p=.006)], cardiac catheterization (p<.0001), and CABG (p=.008) were more often given to morbidly obese group compared to others. After adjusting by confounders, morbidly obese [OR=.41; CI 95% (0.21-0.75)], obese [OR=.59; CI 95%(0.38-0.88)], and overweight [OR=.56; CI 95%(0.40-0.78)] groups had lower in-hospital mortality compared to normal weight patients.

Conclusions: Our results are consistent with prior studies in other ethnicities regarding the occurrence of the obesity paradox in ACS. Further studies are required to identify the pathophysiological mechanism behind this phenomenon.