**RISK OF ANXIETY DISORDERS IN PATIENTS WITH ACUTE MYOCARDIAL INFARCTION: A NATIONWIDE POPULATION-BASED COHORT STUDY**

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*Objectives*: This study investigated the association between psychiatrist-diagnosed psychiatric disorders and cardiovascular prognosis after an acute myocardial infarction (MI).

*Background*: Most studies focusing on anxiety have used rating scales or self-report methods rather than clinical diagnostic interviews to identify anxiety following an MI. To date, no study has assessed clinical diagnosis of anxiety disorders after an acute MI in comparison with patients without MI.

*Methods*: Data were obtained from Taiwan’s National Health Insurance Research Database from 1997 through 2010. We identified 1,396 newly diagnosed patients with acute myocardial infarction and 13,960 age- and sex-matched non-AMI controls for comparison. The primary endpoint was the diagnosis of GAD during follow-up. The differences in demographic and clinical characteristics between both cohorts were analyzed and the risk factors for GAD were assessed using Cox proportional hazards models.

*Results*: During the first 2 years of follow-up, patients with MI exhibited a significantly higher risk of anxiety disorders (adjusted hazard ratio [HR] = 5.06, 95% confidence interval [CI]: 4.61–5.54) than those without MI did. The risk of anxiety disorders was higher in women and patients aged 45–64 years. Patients with post-MI anxiety had a 9.37-fold higher risk of recurrent MI than those without MI did after adjustment for age, sex, socioeconomic status, and comorbidities.

*Conclusions*: This nationwide population-based cohort study provides evidence that MI increases the risk of anxiety disorders during the first 2 years post-MI, and post-MI anxiety disorders are associated with a higher risk of recurrent MI. Further studies are needed to identify the bidirectional causal relationship between MI and anxiety or depressive disorders.