**Introduction:** Diabetes is a major global problem. Diabetes and pre-diabetes are risk factors for increased incidence of cardiovascular disease. In 2014, the prevalence of diabetes worldwide was estimated 9% among adults above 18 years of age (1). According to International Diabetes Foundation (IDF), 381 million people in 2013 had diabetes. As of 2014, an estimated 387 million people have diabetes worldwide (2). With type 2 diabetes making up about 90% of the cases, more than 80% of diabetes deaths occur in low- and middle-income countries (3). India has around 50.8 million patients and the prevalence is projected to touch 60.9 million in 2053 (4).

**Aim:** To study the prevalence of diabetes and pre-diabetes in patients with acute coronary syndrome (ACS) with no past history of diabetes or pre-diabetes.

**Design:** 75 patients with ACS with no past history of diabetes or pre-diabetes, were studied at N.K.P. Salve Institute Of Medical Sciences And Research Centre, to determine the prevalence of diabetes and pre-diabetes among these patients.

**Methods:** This cross-sectional study was carried out on 75 patients admitted in hospital with ACS. The inclusion criteria was patients who were diagnosed as ACS above the age of 30 years with no past history of diabetes or taking any anti-diabetic drugs. The exclusion criteria was a) Known cases of Diabetes, b) Patients with thyroid disease, end stage renal disease, cirrhosis of liver. Laboratory tests included fasting plasma glucose (FPG), 2-h plasma glucose (2hPG) after 75 g glucose, HbA1c and lipid profile, CBC, urine and serum creatinine, 12 lead ECG, 2D ECHO and Doppler of heart, troponin-T and CPK-MB.

**Results:** The study showed that in 75 patients with ACS, 53.3% were pre-diabetic, 32% were diabetic and 14.6% had normal glucose tolerance. In ACS patients, the ST elevated myocardial infarction (STEMI) group 40% had diabetes and 50% had pre-diabetes, the non-ST elevated myocardial infarction (non-STEMI) group 33.3% had diabetes and 58.3% had pre-diabetes and the unstable angina (UA) group 24.2% had diabetes and 54.5% had pre-diabetes.

**Conclusion:** Early detection of diabetic and pre-diabetic status is necessary to reduce risk of cardiovascular events. Pre-diabetes is more common than diabetes in patients presenting with ACS who were previously undiagnosed with diabetes.

**References**


