Data description

Shown below are the meaning of Feature and then the specific name of the feature used in the Ass 2 PartB.csv.

1. Record ID (ID).
2. Age (AGE).
3. Gender (SEX):
   0 – female
   1 – male
4. Quantity of myocardial infarctions in the anamnesis (INF_ANAM):
   0 – zero
   1 – one
   2 – two
   3 – three and more
5. Exertional angina pectoris in the anamnesis (STENOK_AN):
   0 – never
   1 – during the last year
   2 – one year ago
   3 – two years ago
   4 – three years ago
   5 – 4-5 years ago
   6 – more than 5 years ago
6. Functional class (FC) of angina pectoris in the last year (FK_STENOK)[2]:
   0 – there is no angina pectoris
   1 – I FC
   2 – II FC 3 – III FC.
   4 – IV FC
7. Coronary heart disease (CHD) in recent weeks, days before admission to hospital (IBS_POST):
   0 – there was no CHD
   1 – exertional angina pectoris
   2 – unstable angina pectoris
8. Heredity on CHD (IBS_NASL):
   0 – isn’t burdened
   1 – burdened
9. Presence of an essential hypertension (GB):
   0 – there is no essential hypertension
   1 – Stage 1
   2 – Stage 2
   3 – Stage 3
10. Symptomatic hypertension (SIM_GIPERT):
   0 – no
   1 – yes
11. Duration of arterial hypertension (DLIT_AG):
   0 – there was no arterial hypertension

1 – one year
2 – two years
3 – three years
4 – four years
5 – five years
6 – 6-10 years
7 – more than 10 years

12. Presence of chronic Heart failure (HF) in the anamnesis (ZSN_A):
    0 – there is no chronic heart failure
    1 – I stage
    2 – IIA stage (heart failure due to right ventricular systolic dysfunction)
    3 – IIA stage (heart failure due to left ventricular systolic dysfunction) 4 – IIB stage (heart failure due to left and right ventricular systolic dysfunction)
13. Observing of arrhythmia in the anamnesis (nr11):
    0 – no
    1 – yes
14. Premature atrial contractions in the anamnesis (nr01):
    0 – no
    1 – yes
15. Premature ventricular contractions in the anamnesis (nr02):
    0 – no
    1 – yes
16. Paroxysms of atrial fibrillation in the anamnesis (nr03):
    0 – no
    1 – yes
17. A persistent form of atrial fibrillation in the anamnesis (nr04):
    0 – no
    1 – yes
18. Ventricular fibrillation in the anamnesis (nr07):
    0 – no
    1 – yes
19. Ventricular paroxysmal tachycardia in the anamnesis (nr08):
    0 – no
    1 – yes
20. First-degree AV block in the anamnesis (np01):
    0 – no
    1 – yes
21. Third-degree AV block in the anamnesis (np04):
    0 – no
    1 – yes
22. LBBB (anterior branch) in the anamnesis (np05):
    0 – no
    1 – yes
23. Incomplete LBBB in the anamnesis (np07):
    0 – no
    1 – yes
24. Complete LBBB in the anamnesis (np08):
    0 no

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1 – yes

25. Incomplete RBBB in the anamnesis (np09):
    0 – no
    1 – yes
26. Complete RBBB in the anamnesis (np10):
    0 – no
    1 – yes
27. Diabetes mellitus in the anamnesis (endocr_01):
    0 – no
    1 – yes
28. Obesity in the anamnesis (endocr_02):
    0 – no
    1 – yes
29. Thyrotoxicosis in the anamnesis (endocr_03):
    0 – no
    1 – yes
30. Chronic bronchitis in the anamnesis (zab_leg_01):
    0 – no
    1 – yes
31. Obstructive chronic bronchitis in the anamnesis (zab_leg_02):
    0 – no
    1 – yes
32. Bronchial asthma in the anamnesis (zab_leg_03):
    0 – no
    1 – yes
33. Chronic pneumonia in the anamnesis (zab_leg_04):
    0 – no
    1 – yes
34. Pulmonary tuberculosis in the anamnesis (zab_leg_06):
    0 – no
    1 – yes
35. Systolic blood pressure according to Emergency Cardiology Team (S_AD_KBRIG) (mmHg).
36. Diastolic blood pressure according to Emergency Cardiology Team (D_AD_KBRIG) (mmHg).
37. Systolic blood pressure according to intensive care unit (S_AD_ORIT) (mmHg).
38. Diastolic blood pressure according to intensive care unit (D_AD_ORIT) (mmHg).
39. Pulmonary edema at the time of admission to intensive care unit (O_L_POST):
    0 – no
    1 – yes
40. Cardiogenic shock at the time of admission to intensive care unit (K_SH_POST):
    0 – no
    1 – yes
41. Paroxysms of atrial fibrillation at the time of admission to intensive care unit, (or at a prehospital stage) (MP_TP_POST):

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0 – no
1 – yes

42. Paroxysms of supraventricular tachycardia at the time of admission to intensive care unit, (or at a pre-hospital stage) (SVT_POST):
    0 – no
    1 yes
43. Paroxysms of ventricular tachycardia at the time of admission to intensive care unit, (or at a pre-hospital stage) (GT_POST):
    0 – no
    1 – yes
44. Ventricular fibrillation at the time of admission to intensive care unit, (or at a pre-hospital stage) (FIB_G_POST):
    0 – no
    1 – yes
45. Presence of an anterior myocardial infarction (left ventricular) (ECG changes in leads V_1 – V_4) (ant_im):
    0 – there is no infarct in this location
    1 – QRS has no changes
    2 – QRS is like QR-complex
    3 – QRS is like Qr-complex
    4 – QRS is like QS-complex
46. Presence of a lateral myocardial infarction (left ventricular) (ECG changes in leads V_5 – V_6 , I, AVL) (lat_im):
    0 – there is no infarct in this location
    1 – QRS has no changes
    2 – QRS is like QR-complex
    3 – QRS is like Qr-complex
    4 – QRS is like QS-complex
47. Presence of an inferior myocardial infarction (left ventricular) (ECG changes in leads III, AVF, II). (inf_im):
    0 – there is no infarct in this location
    1 – QRS has no changes
    2 – QRS is like QR-complex
    3 – QRS is like Qr-complex
    4 – QRS is like QS-complex
48. Presence of a posterior myocardial infarction (left ventricular) (ECG changes in V_7 – V_9, reciprocity changes in leads V_1 – V_3) (post_im):
    0 – there is no infarct in this location
    1 – QRS has no changes
    2 – QRS is like QR-complex
    3 – QRS is like Qr-complex
    4 – QRS is like QS-complex
49. Presence of a right ventricular myocardial infarction (IM_PG_P):
    0 – no
    1 – yes

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50. ECG rhythm at the time of admission to hospital – sinus (with a heart rate 60-90) (ritm_ecg_p_01):
    0 – no
    1 – yes
51. ECG rhythm at the time of admission to hospital – atrial fibrillation (ritm_ecg_p_02):
    0 – no
    1 – yes
52. ECG rhythm at the time of admission to hospital – atrial (ritm_ecg_p_04):
    0 – no
    1 – yes
53. ECG rhythm at the time of admission to hospital – idioventricular (ritm_ecg_p_06):
    0 no
    1 yes
54. ECG rhythm at the time of admission to hospital – sinus with a heart rate above 90 (tachycardia) (ritm_ecg_p_07):
    0 – no
    1 – yes
55. ECG rhythm at the time of admission to hospital – sinus with a heart rate below 60 (bradycardia) (ritm_ecg_p_08):
    0 – no
    1 – yes
56. Premature atrial contractions on ECG at the time of admission to hospital (n_r_ecg_p_01):
    0 – no
    1 – yes
57. Frequent premature atrial contractions on ECG at the time of admission to hospital (n_r_ecg_p_02):
    0 – no
    1 – yes
58. Premature ventricular contractions on ECG at the time of admission to hospital (n_r_ecg_p_03):
    0 – no
    1 – yes
59. Frequent premature ventricular contractions on ECG at the time of admission to hospital (n_r_ecg_p_04):
    0 – no
    1 – yes
60. Paroxysms of atrial fibrillation on ECG at the time of admission to hospital (n_r_ecg_p_05):
    0 – no
    1 – yes
61. Persistent form of atrial fibrillation on ECG at the time of admission to hospital (n_r_ecg_p_06):
    0 – no
    1 – yes
62. Paroxysms of supraventricular tachycardia on ECG at the time of admission to hospital (n_r_ecg_p_08):

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0 – no
1 – yes

63. Paroxysms of ventricular tachycardia on ECG at the time of admission to hospital (n_r_ecg_p_09):
    0 – no
    1 – yes
64. Ventricular fibrillation on ECG at the time of admission to hospital (n_r_ecg_p_10):
    0 – no
    1 – yes
65. Sinoatrial block on ECG at the time of admission to hospital (n_p_ecg_p_01):
    0 – no
    1 – yes
66. First-degree AV block on ECG at the time of admission to hospital (n_p_ecg_p_03):
    0 – no
    1 – yes
67. Type 1 Second-degree AV block (Mobitz I/Wenckebach) on ECG at the time of admission to hospital (n_p_ecg_p_04):
    0 – no
    1 yes

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68. Type 2 Second-degree AV block (Mobitz II/Hay) on ECG at the time of admission to hospital (n_p_ecg_p_05):
    0 – no
    1 – yes
69. Third-degree AV block on ECG at the time of admission to hospital (n_p_ecg_p_06):
    0 – no
    1 – yes
70. LBBB (anterior branch) on ECG at the time of admission to hospital (n_p_ecg_p_07):
    0 – no
    1 – yes
71. LBBB (posterior branch) on ECG at the time of admission to hospital (n_p_ecg_p_08):
    0 – no
    1 – yes
72. Incomplete LBBB on ECG at the time of admission to hospital (n_p_ecg_p_09):
    0 – no
    1 – yes
73. Complete LBBB on ECG at the time of admission to hospital (n_p_ecg_p_10):
    0 – no
    1 – yes
74. Incomplete RBBB on ECG at the time of admission to hospital (n_p_ecg_p_11):
    0 – no
    1 – yes
75. Complete RBBB on ECG at the time of admission to hospital (n_p_ecg_p_12):
    0 – no
    1 – yes
76. Fibrinolytic therapy by Celiasum 750k IU (fibr_ter_01):
    0 – no
    1 – yes
77. Fibrinolytic therapy by Celiasum 1m IU (fibr_ter_02):
    0 – no
    1 – yes
78. Fibrinolytic therapy by Celiasum 3m IU (fibr_ter_03):
    0 – no
    1 – yes
79. Fibrinolytic therapy by Streptase (fibr_ter_05):
    0 – no
    1 – yes
80. Fibrinolytic therapy by Celiasum 500k IU (fibr_ter_06):
    0 – no
    1 – yes
81. Fibrinolytic therapy by Celiasum 250k IU (fibr_ter_07):
    0 – no
    1 – yes
82. Fibrinolytic therapy by Streptodecase 1.5m IU (fibr_ter_08):
    0 – no
    1 – yes

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83. Hypokalemia (< 4 mmol/L) (GIPO_K):
    0 – no
    1 – yes
84. Serum potassium content (K_BLOOD) (mmol/L).
85 Increase of sodium in serum (more than 150 mmol/L) (GIPER_Na):
    0 no
    1 – yes
86. Serum sodium content (Na_BLOOD) (mmol/L).
87. Serum AlAT content (ALT_BLOOD) (IU/L).
88. Serum AsAT content (AST_BLOOD) (IU/L).
89. Serum CPK content (KFK_BLOOD) (IU/L).
90. White blood cell count (billions per liter) (L_BLOOD).
91. ESR (Erythrocyte sedimentation rate) (ROE) (мм).
92. Time elapsed from the beginning of the attack of CHD to the hospital (TIME_B_S):
    1 – less than 2 hours
    2 – 2-4 hours
    3 – 4-6 hours
    4 – 6-8 hours
    5 – 8-12 hours
    6 – 12-24 hours
    7 – more than 1 days
    8 – more than 2 days
    9 – more than 3 days
93. Relapse of the pain in the first hours of the hospital period (R_AB_1_n):
    0 – there is no relapse
    1 – only one
    2 – 2 times
    3 – 3 or more times
94. Relapse of the pain in the second day of the hospital period (R_AB_2_n):
    0 – there is no relapse
    1 – only one
    2 – 2 times
    3 – 3 or more times
95. Relapse of the pain in the third day of the hospital period (R_AB_3_n):
    0 – there is no relapse
    1 – only one
    2 – 2 times
    3 – 3 or more times
96. Use of opioid drugs by the Emergency Cardiology Team (NA_KB):
    0 – no
    1 – yes
97. Use of NSAIDs by the Emergency Cardiology Team (NOT_NA_KB):
    0 – no
    1 – yes
98.Use of lidocaine by the Emergency Cardiology Team (LID_KB):
    0 – no

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1 – yes

99. Use of liquid nitrates in the ICU (NITR_S):
    0 – no
    1 – yes
100. Use of opioid drugs in the ICU in the first hours of the hospital period (NA_R_1_n):
    0 – no
    1 – once
    2 – twice
    3 – three times
    4 – four times
101. Use of opioid drugs in the ICU in the second day of the hospital period (NA_R_2_n):
    0 no
    1 – once
    2 – twice
    3 – three times
102. Use of opioid drugs in the ICU in the third day of the hospital period (NA_R_3_n):
    0 – no
    1 – once
    2 – twice
103. Use of NSAIDs in the ICU in the first hours of the hospital period (NOT_NA_1_n):
    0 – no
    1 – once
    2 – twice
    3 – three times
    4 – four or more times
104. Use of NSAIDs in the ICU in the second day of the hospital period (NOT_NA_2_n):
    0 – no
    1 – once
    2 – twice
    3 – three times
105. Use of NSAIDs in the ICU in the third day of the hospital period (NOT_NA_3_n):
    0 – no
    1 – once
    2 – twice
106. Use of lidocaine in the ICU (LID_S_n):
    0 – no
    1 – yes
107. Use of beta-blockers in the ICU (B_BLOK_S_n):
    0 – no
    1 – yes
108. Use of calcium channel blockers in the ICU (ANT_CA_S_n):
    0 – no
    1 – yes
109. Use of a anticoagulants (heparin) in the ICU (GEPAR_S_n):
    0 – no
    1 – yes

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110. Use of acetylsalicylic acid in the ICU (ASP_S_n):
    0 – no
    1 – yes
111. Use of Ticlid in the ICU (TIKL_S_n):
    0 – no
    1 – yes
112. Use of Trental in the ICU (TRENT_S_n):
    0 – no
    1 – yes

Complications and outcomes of myocardial infarction:

113. Atrial fibrillation (FIBR_PREDS):
    0 – no
    1 – yes
114. Supraventricular tachycardia (PREDS_TAH):
    0 – no
    1 yes

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115. Ventricular tachycardia (JELUD_TAH):
    0 – no
    1 – yes
116. Ventricular fibrillation (FIBR_JELUD):
    0 – no
    1 – yes
117. Third-degree AV block (A_V_BLOK):
    0 – no
    1 – yes
118. Pulmonary edema (OTEK_LANC):
    0 – no
    1 – yes
119. Myocardial rupture (RAZRIV):
    0 – no
    1 – yes
120. Dressler syndrome (DRESSLER):
    0 – no
    1 – yes
121. Chronic heart failure (ZSN):
    0 – no
    1 – yes
122. Relapse of the myocardial infarction (REC_IM):
    0 – no
    1 – yes
123. Post-infarction angina (P_IM_STEN):
    0 – no
    1 – yes
124. Lethal outcome (cause) (LET_IS):
    0 – unknown
    1 – cardiogenic shock
    2 – pulmonary edema
    3 – myocardial rupture
    4 – progress of congestive heart failure
    5 – thromboembolism
    6 – asystole
    7 – ventricular fibrillation

Table of abbreviations

FC is the functional class of angina pectoris in the last year according to [2].
CHD is coronary heart disease.
HF is heart failure.
ECG is electrocardiogram.
AV is atrioventricular block.
LBBB is left bundle branch block.

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RBBB is right bundle branch block.
QRS is QRS complex in ECG