



## INTRODUCTION

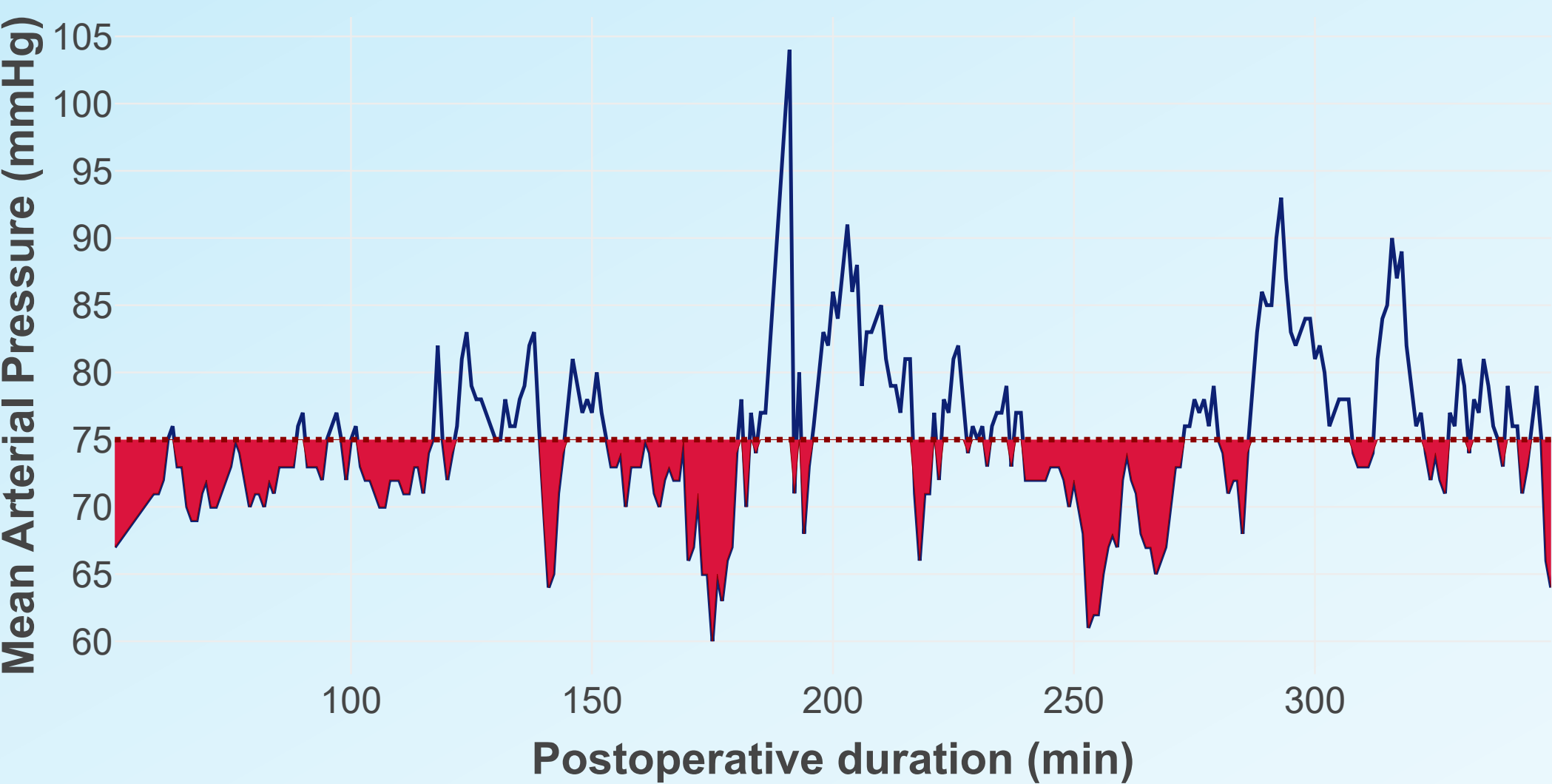
- Intraoperative hypotension is associated with postoperative **morbidity and mortality**.
- Postoperative hypotension might potentially be as harmful, as it is **often missed on surgical wards**.
- Different characterizations of postoperative hypotension with **multiple MAP thresholds** were explored to assess its association with myocardial injury.

## METHODS

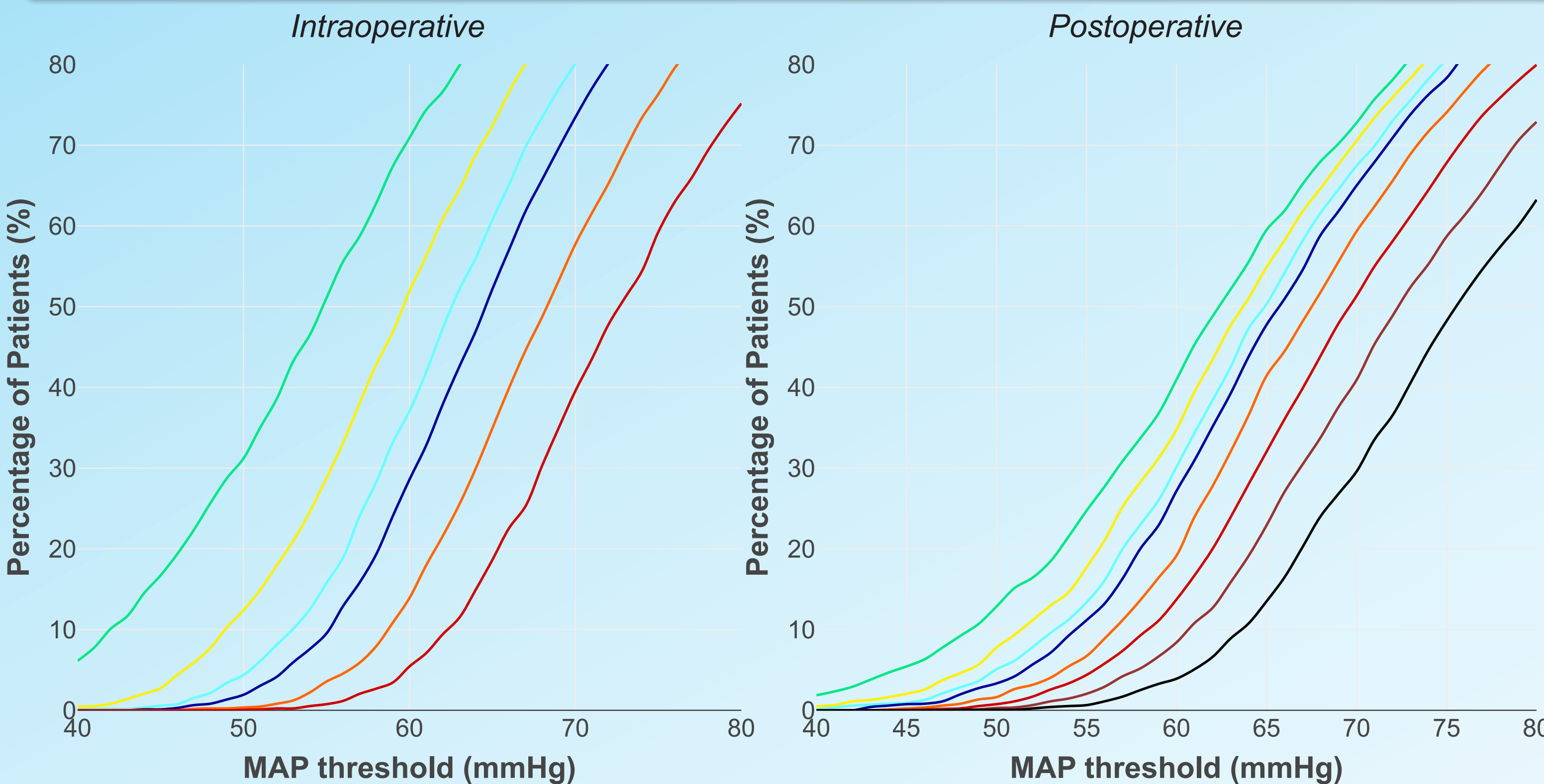
Prospective observation cohort registry  
Moderate-major noncardiac surgery  
(n = 4795)

Postoperative hemodynamics  
24 hours  
(n = 1711)

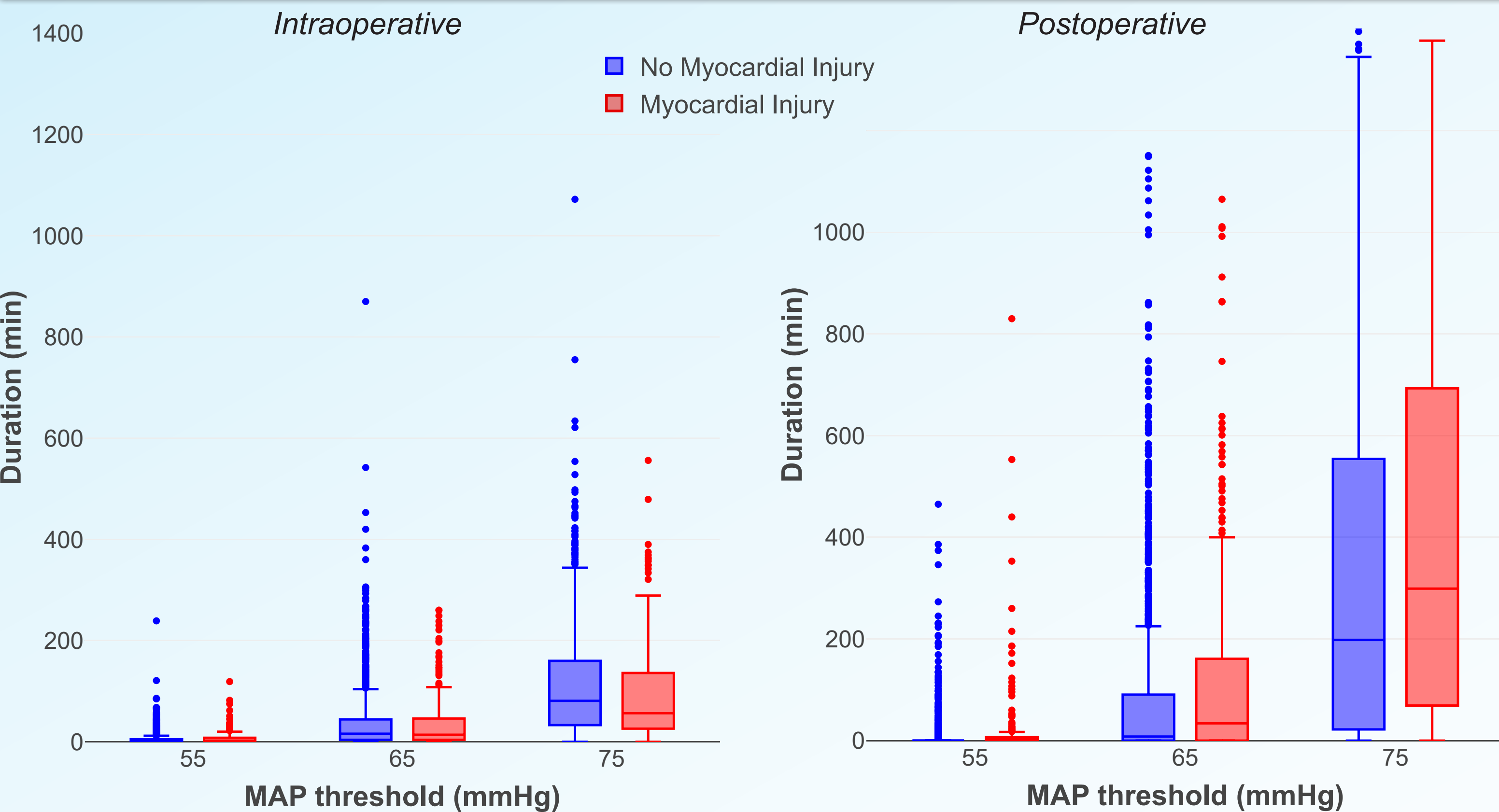
Postoperative Hypotension  
Lowest MAP  
Duration  
Area  
Time Weighted Average



### 1. Hypotension Incidence

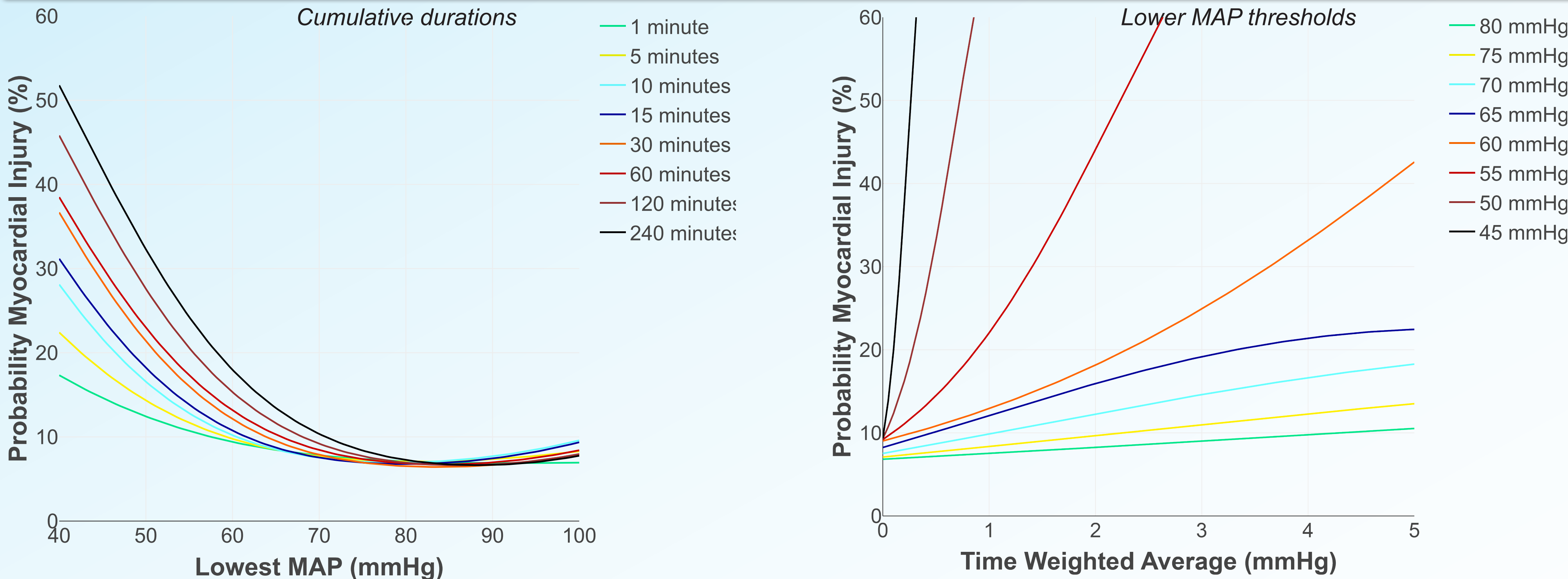


### 2. Hypotension prevalence stratified by myocardial injury

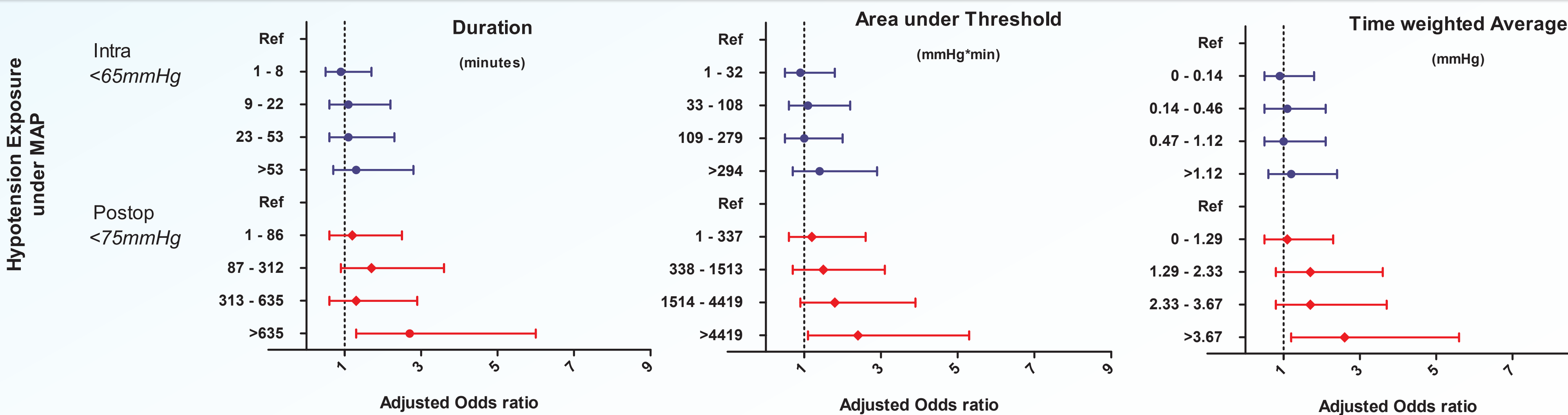


## RESULTS

### 3. Increased risk of myocardial injury based on



### 4. Multivariate analyses: hypotension characterizations



\* Multivariate logistic models adjusted for age, gender, high-risk surgery, emergency procedures, intra- and postoperative heart rate, prior history of hypertension, insulin dependent diabetes mellitus, coronary artery disease, congestive heart failure, cerebrovascular disease, renal disease, estimated blood loss and length of surgery

## CONCLUSIONS

- Postoperative Hypotension was **common**
- Durations **below 75mmHg** increased the **risk** of myocardial injury
- Postoperative hypotension was independently **associated with myocardial injury**

