

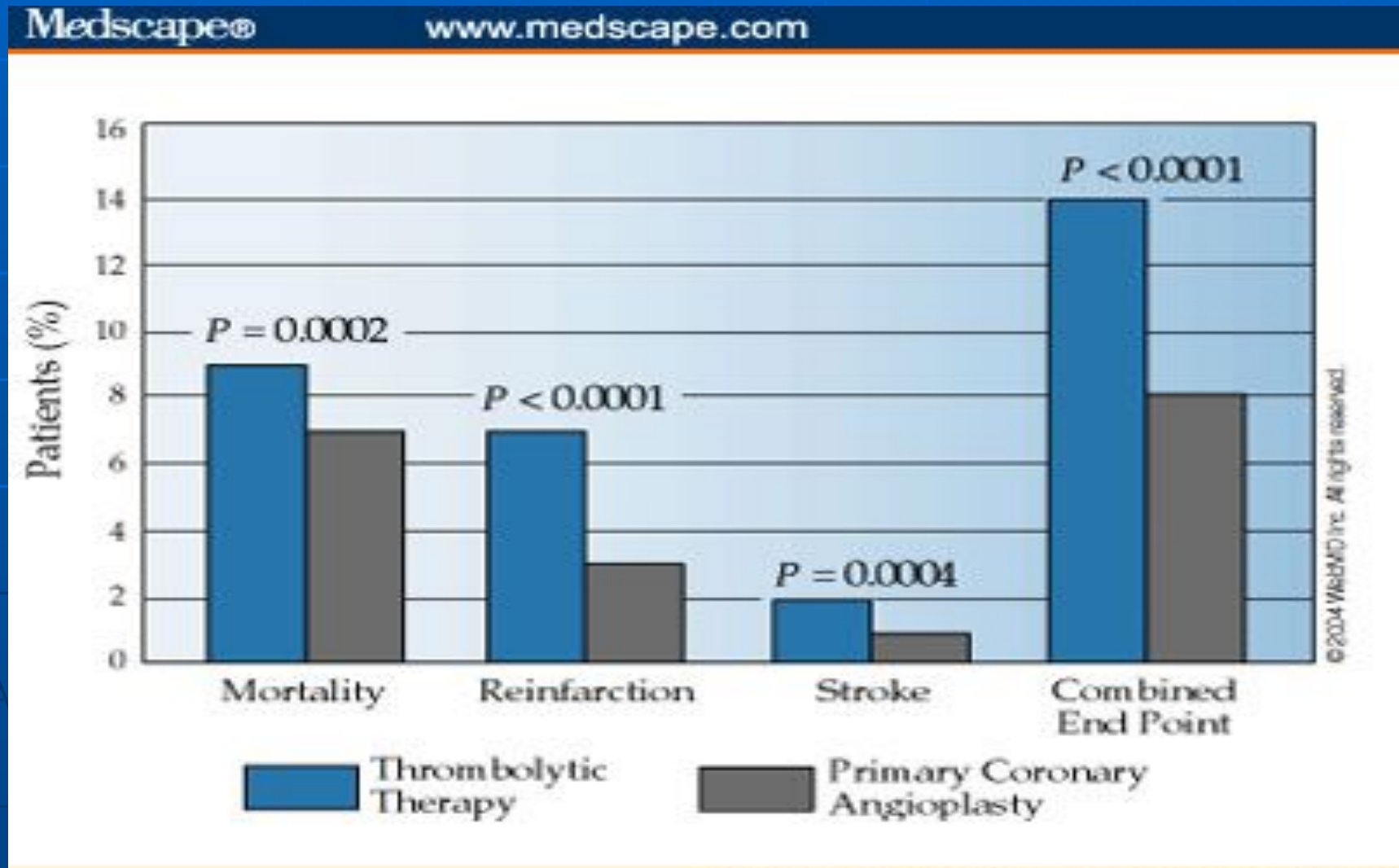
Медикаменты, ангиопластика, хирургия: как найти баланс

Беленький Дмитрий Ильич

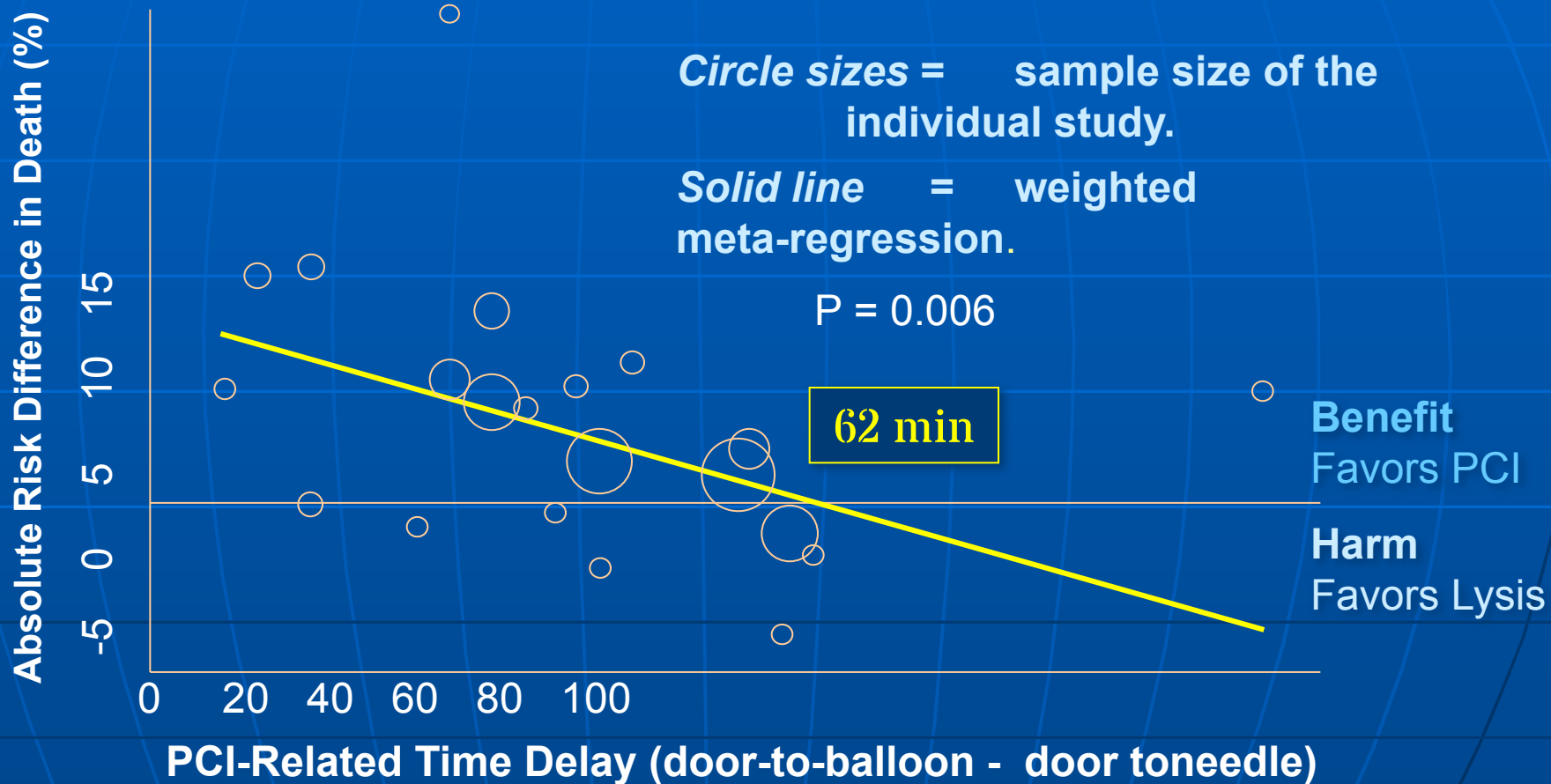
Проблемы

- Стабильная стенокардия
- ОКС без элевации ST
- ОКС с элевацией ST

Первичная ангиопластика в сравнении с тромболизисом



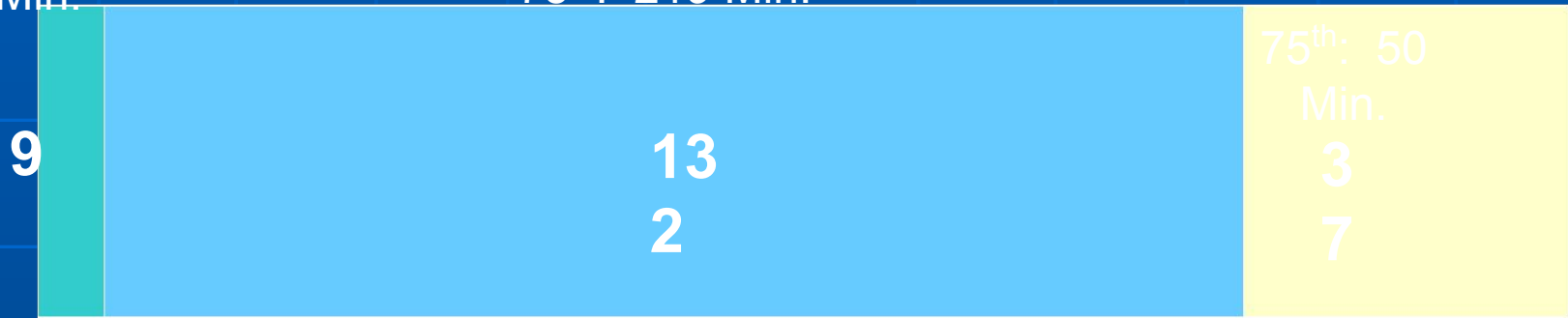
Mortality rates with primary PCI as a function of PCI-related time delay



For Every 10 min delay to PCI: 1% reduction in mortality difference towards lytics

Door to Balloon Times Among Patients Transferred in NRMI 4

Door to Data:	Data to Cath Lab Arrival:	Cath Lab to Balloon:
50 th : 9 Min.	50 th : 132 Min.	50 th : 37 Min.
25 th : 4 Min.	25 th : 88 Min.	25 th : 28 Min
75 th : 16 Min.	75 th : 219 Min.	75 th : 50 Min.

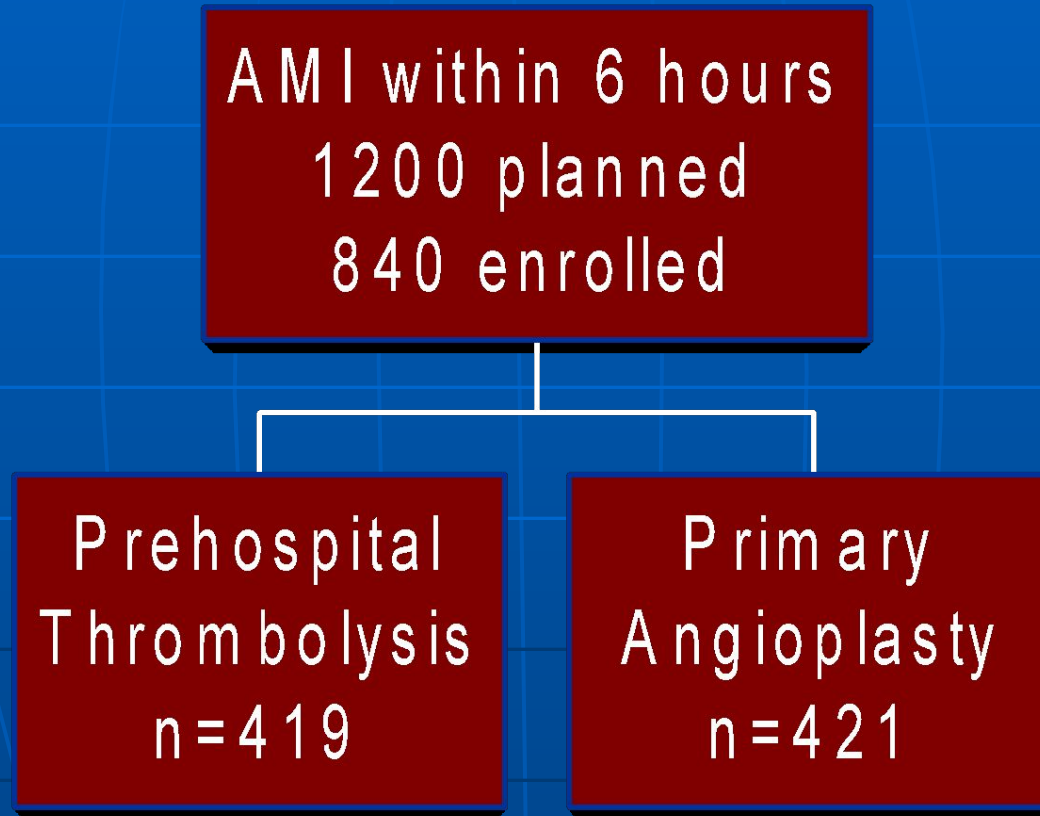


Total Door 1 to Balloon Time: 185 minutes (25th: 137; 75th: 276)

Percent of Patients with Door to Balloon Time ≤ 90 Min.:
 Sample Size: 1,346, Time Period: January 2002 – December 2002
3.0%

CAPTIM

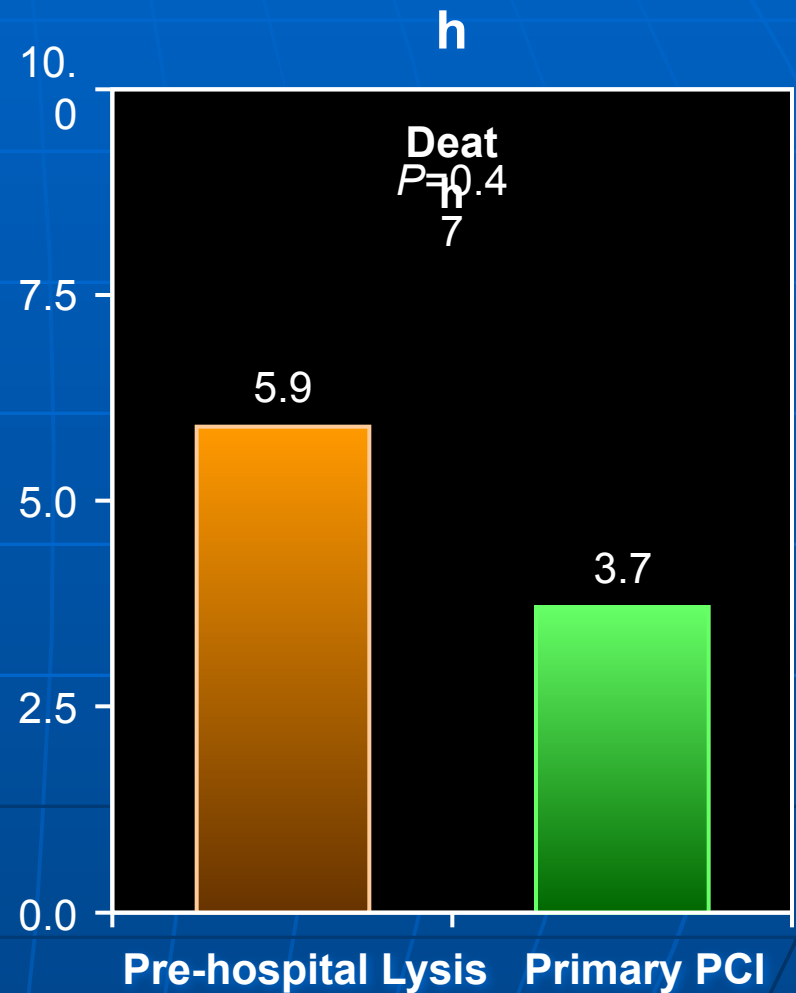
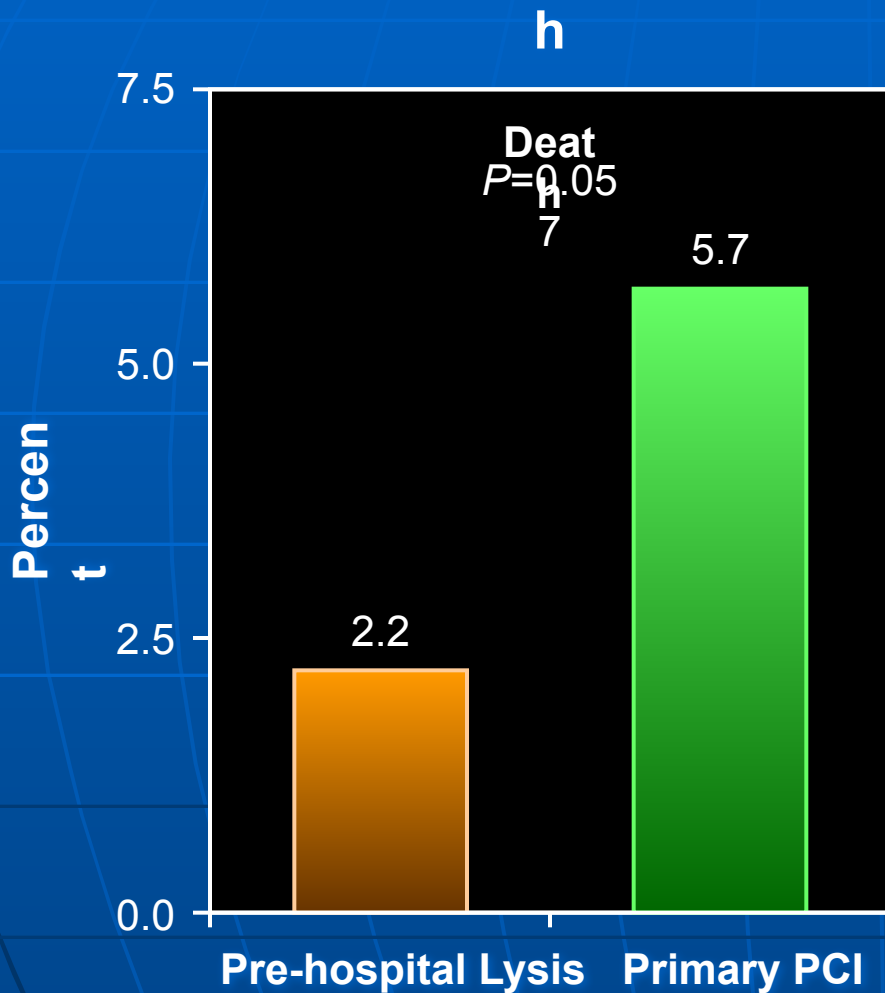
Comparison of Angioplasty and Prehospital Thrombolysis in Acute Myocardial Infarction



Primary Composite Endpoint- Death, Reinfarction, Disabling Stroke

CAPTIM - 1 Year Results

Sx to Treatment Analysis



Материалы МУЗ МКБ СМП № 2 за 2005 г

ОИМ
n-691

КШ
n-82(12%)

Умерло n-39(53%)

Acute myocardial infarction

≤ 36 hrs

Shock

≤ 12 hrs

Randomization

≤ 6 hrs

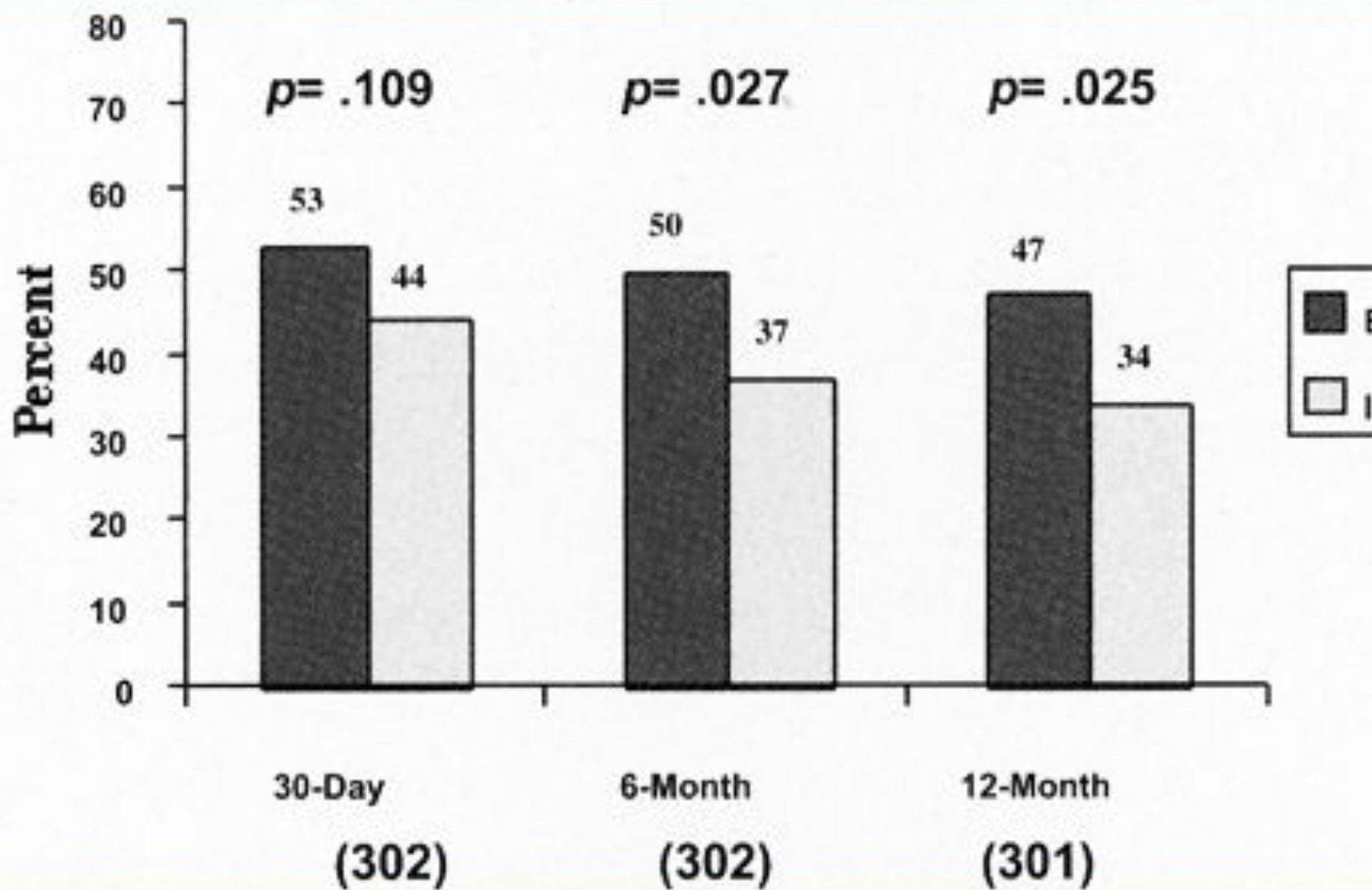
Emergency revascularization

- IABP/ pharmacologic support
- Possible prior thrombolysis
- Emergency early PTCA/CABG

≥ 54 hrs

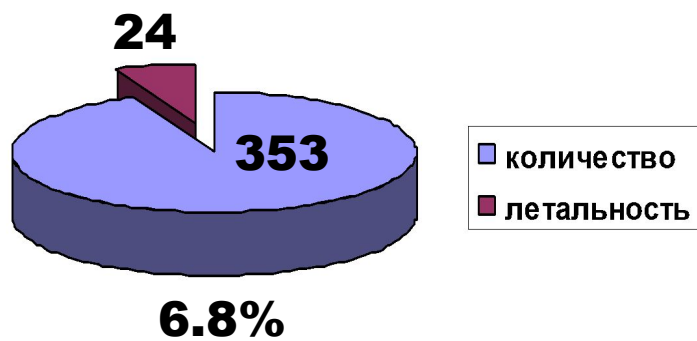
Initial medical stabilization

- IABP/ pharmacologic support
- Thrombolysis unless absolute contraindication
- Possible delayed revascularization

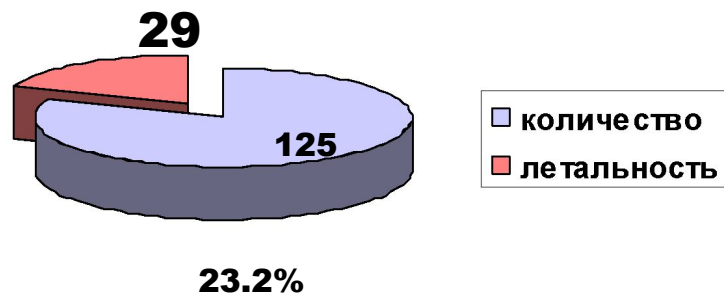


Зависимость летальности от возраста

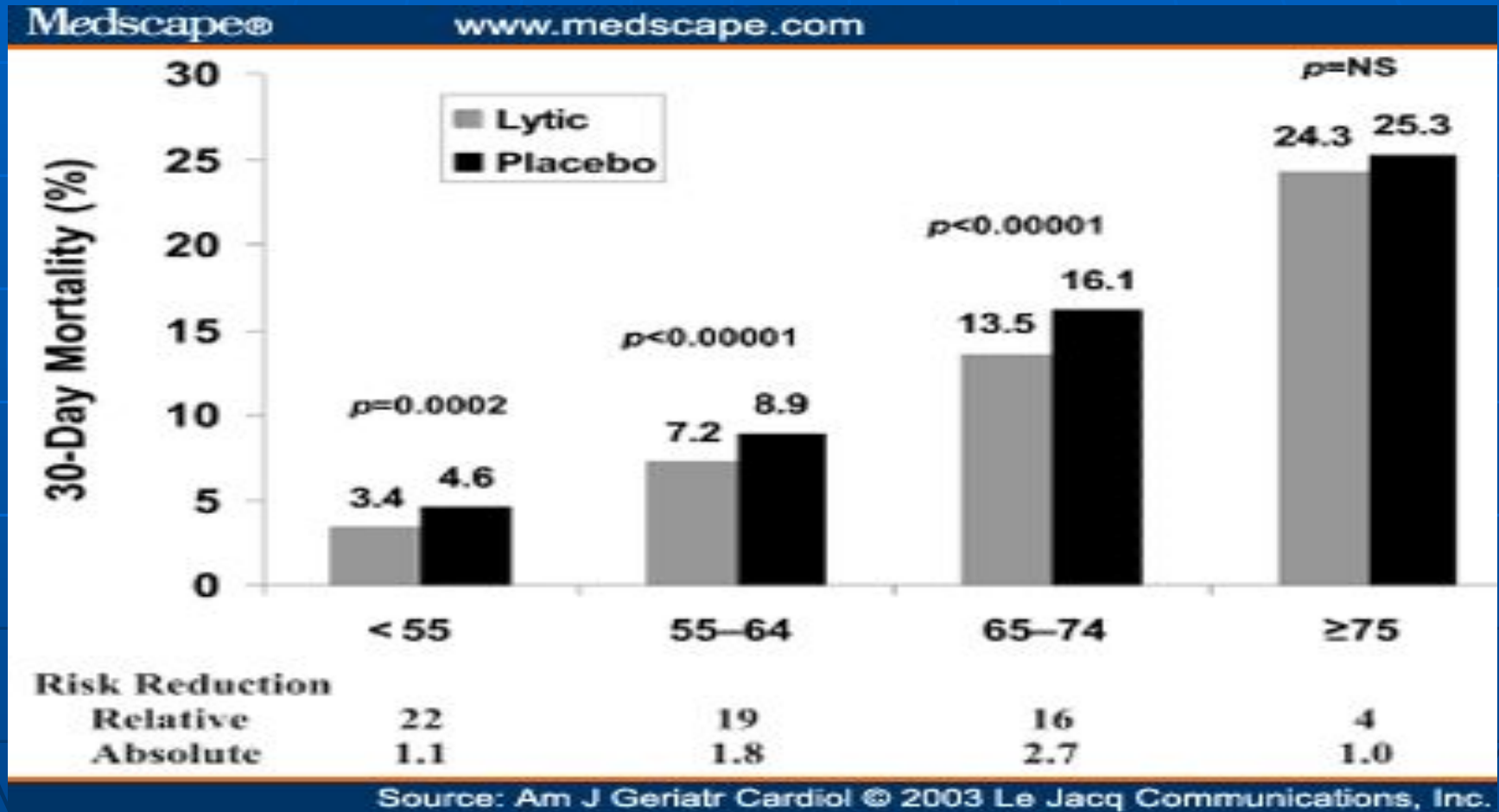
до 70



старше 70



Эффективность тромболизиса в зависимости от возраста



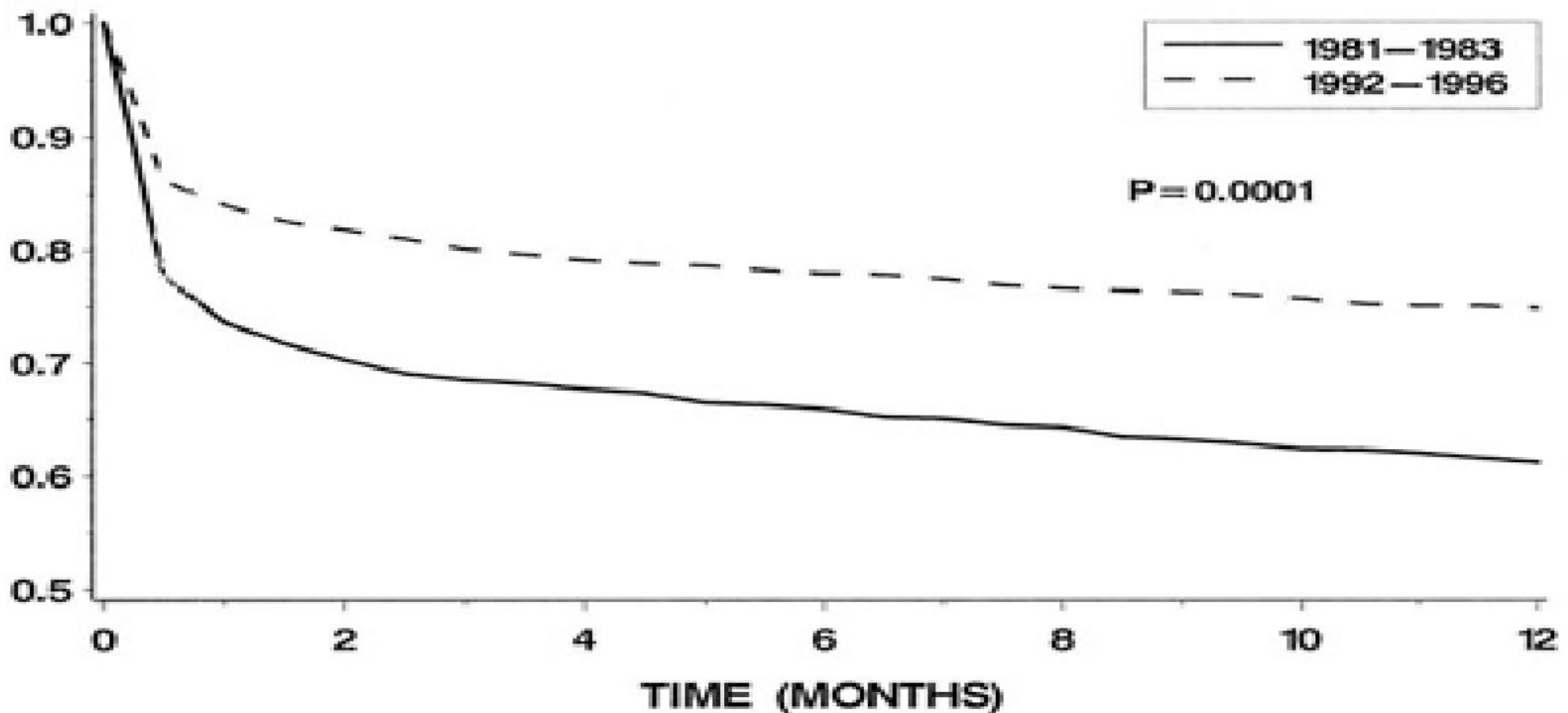
Увеличение летальности у больных РЕ-ИМ

	ОИМ n-478	РЕ-ИМ n-23	P
Летальность	11,8%	26,1%	0,02

Кривые Каплана-Мейера выживаемости больных Ре-ИМ

Medscape® www.medscape.com

SURVIVAL



Patients At Risk:

1981-1983	1415	994	957	932	909	882	865
1992-1996	1093	894	864	851	837	827	818

Summary: Selection of the Optimal Reperfusion Options for the STEMI Patient: 2004

Full Dose Fibrinolytic Monotherapy

- Door to balloon (D-B) > 90 min
- Lack of access to skilled PCI center
- $(D-B) - (D-N) > 1$ h
- < 3 h from symptom onset

Invasive Strategy

- Cardiogenic shock (age < 75)
- Bleeding risk
- Diagnosis in doubt (pericarditis/aneurysm)
- Door to balloon < 90 min
- Skilled PCI center available, defined by:
 - Operator experience > 75 cases/yr
 - Team experience > 36 primary PCI/yr
- Age > 75