Abstract: P3581

Drug eluting stents are associated with better survival and outcomes than bare metal stent intervention for acute myocardial patients: a state wide registry

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Background: The use of drug eluting stents (DES) vs bare metal stents (BMS) during percutaneous acute myocardial infarction (AMI) is controversial.

Methods: To elucidate the potential differences in clinical outcomes between DES and BMS used during retrospective analysis of the Myocardial Infarction Data Acquisition System of the State of New Jersey subsequent median follow-up over 675 days.

Results: 5760 PCI were performed using 3000 BMS (52.08%) and 2760 DES (47.91%). Over a median associated with significant less total mortality (173 vs. 318; p<0.0001), cardiovascular death (98 vs with BMS. In the Cox multivariate analysis including age, sex, race, diabetes, hypertension, renal disease and left ventricular dysfunction the use of DES (vs BMS) was significantly correlated from cardiovascular mortality: adjusted HR 1.42 (1.17-1.72; p=0.0003) and HR 1.54 (1.20-1.98; p=

Conclusions: Use of DES is safe during PCI of AMI and offers better long term outcomes than BMS.