**SAFETY AND EFFICACY OF EARLY VERSUS DELAYED INTERVENTION IN ACUTE CORONARY SYNDROMES WITHOUT ST-SEGMENT ELEVATION: A META-ANALYSIS OF RANDOMIZED TRIALS**

### i2 Poster Contributions
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**Session Title:** DES I and Acute Coronary Syndromes  
**Abstract Category:** PCI - ACS/NonStemi  
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**Authors:** Param P. Singh, Rohit Bhuriya, Updesh S. Bedi, Janos Molnar, Rohit Arora, Chicago Medical School/RFUMS, North Chicago, IL

**Background:** Current guidelines recommend routine invasive strategy in high risk patients with acute coronary syndromes without ST-segment elevation. However, controversy persists regarding the timing of coronary angiography and intervention. We conducted a meta-analysis of randomized trials to compare outcomes of early (within 0-24 hours) with delayed (between 20-120 hours) intervention in these patients.

**Methods:** A systematic review of literature revealed 4 randomized trials involving 3935 patients. The end points extracted were 30-day incidence of death, myocardial infarction (MI), major bleeding and recurrent ischemia. Combined relative risks (RR) across all the studies and 95% confidence intervals (CI) were computed. A two-sided alpha error <0.05 was considered to be statistically significant.

**Results:** Both groups had similar baseline characteristics. Compared with patients undergoing early intervention, risk of death (RR: 0.90, CI: 0.61-1.33; p=0.62), MI (RR: 1.11, CI: 0.68-1.82; p=0.65) and major bleeding (RR: 0.79, CI: 0.57-1.10; p=0.17) was similar in patients undergoing delayed intervention. However, incidence of 30-day recurrent ischemia was significantly less in early intervention group (RR: 0.47, CI: 0.32-0.69; p<0.001).

**Conclusion:** A strategy of early intervention is superior to delayed intervention in reducing the 30-day incidence of recurrent ischemia. However, there is no difference in 30-day incidence of death, MI or major bleeding between the two groups.

### Relative Risks of Early Versus Late PCI

<table>
<thead>
<tr>
<th>Event</th>
<th>Relative Risk (95% CI)</th>
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<tbody>
<tr>
<td>Death</td>
<td>0.909 (0.618 to 1.336)</td>
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<tr>
<td>MI</td>
<td>1.119 (0.688 to 1.822)</td>
</tr>
<tr>
<td>Major Bleeding</td>
<td>0.797 (0.575 to 1.106)</td>
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<tr>
<td>Recurrent Ischemia</td>
<td>0.479 (0.329 to 0.696)**</td>
</tr>
</tbody>
</table>

**p<0.001**