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PERIPROCEDURAL STROKE IS ASSOCIATED WITH A HIGH INHOSPITAL MORTALITY IN CLINICAL PRACTICE. RESULTS OF THE EURO HEART SURVEY ON PCI

i2 Poster Contributions

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Incidence and impact of periprocedural stroke on outcome in patients with PCI. Results of the EuroHeart Survey on PCI.

Background: - Stroke is a rare, but serious complication of PCI. Little is known about the incidence and outcome of stroke after PCI in clinical practice. Therefore we evaluated a large contemporary PCI registry to determine the fate of patients with periprocedural stroke.

Methods: - Between 2005 and 2008, 46,888 consecutive patients undergoing PCI were enrolled into the PCI-Registry of the Euro Heart Survey Programme (176 centres in 33 ESC countries) to document patients' characteristics, PCI details and hospital complications in different PCI indications. Procedural features and inhospital complications were collected with a standardized case record form and processed centrally.

Results: - Stroke occurred in 152 (0.3 %) of patients with PCI. Stroke occurred more often in patients with ACS (0.5%) than in elective PCI (0.1%). The procedural features and in-hospital results of patients with and without stroke are given in the table. Independent predictors of the occurrence of stroke were age > 75 yrs, prior stroke, diabetes, concomitant valvular heart disease, cardiogenic shock, and ACS.

	Stroke (n=152)	No stroke (n=46736)	p-value
Age (yrs)	70.0	64.1	0.0001
Female	38.1 %	25.6 %	0.001
Renal impairment	6.3 %	3.5 %	0.09
ACS	76.6 %	50.4 %	0.0001
Cardiogenic shock	11.2%	1.7 %	0.01
Multivessel PCI	16.2 %	18.2%	0.1
GP IIb/IIIa inhibitor	36.2 %	24.6 %	0.02
Inhospital mortality	21.1 %	1.3%	0.0001
Major bleeding	10.1 %	0.7%	0.001

Conclusions: - In clinical practice in Europe stroke as a complication of PCI occurs rarely. However, periprocedural stroke is associated with a high mortality of over 20%. Therefore further research and new treatment strategies to improve the outcome of these patients are urgently needed.