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LONG-TERM CLINICAL OUTCOME OF PATIENTS WITH ACUTE MYOCARDIAL INFARCTION COMPLICATED BY CARDIOGENIC SHOCK OR CARDIAC ARREST WHO RECEIVED EXTRACORPOREAL MEMBRANE OXYGENATION ASSISTED PRIMARY PERCUTANEOUS CORONARY INTERVENTION

Poster Contributions

Poster Hall B1

Monday, March 16, 2015, 9:45 a.m.-10:30 a.m.

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Background: Few data are available on the long-term clinical outcome of patients with acute myocardial infarction (AMI) complicated by propound cardiogenic shock or cardiac arrest who receive extracorporeal membrane oxygenation (ECMO) assisted primary percutaneous coronary intervention (PCI). This study investigated the long-term clinical outcome in these patients.

Methods: We analyzed 40 patients with AMI complicated by propound cardiogenic shock or cardiac arrest who received ECMO assisted primary PCI between January 2008 to September 2014 in Cheju Halla General Hospital. All patients were placed on percutaneous arterio-venous ECMO as a rescue device in catheterization room. Data on in-hospital survival and on three-years follow-up were collected.

Results: The mean age of the population (28 male and 12 female) was 63.8 ± 13.4 years, all patients presented with propound cardiogenic shock or cardiac arrest refractory to medical therapy due to AMI (28 STEMI and 12 Non-STEMI). Median duration of ECMO support was 2 (1-3) days. Twentyfour patients (60%) died in hospital. Sixteen patients (40%) were discharged from the hospital, with a 87.5% (14/16 pts) survival at three-years follow-up.

Conclusion: AMI patients complicated by propound cardiogenic shock or cardiac arrest are associated with high mortality. In our experience the ECMO assisted primary PCI is an effective strategy and provides a reasonable chance of survival in these patients. and the initial survival benefit of these patients persisted at 3 years.