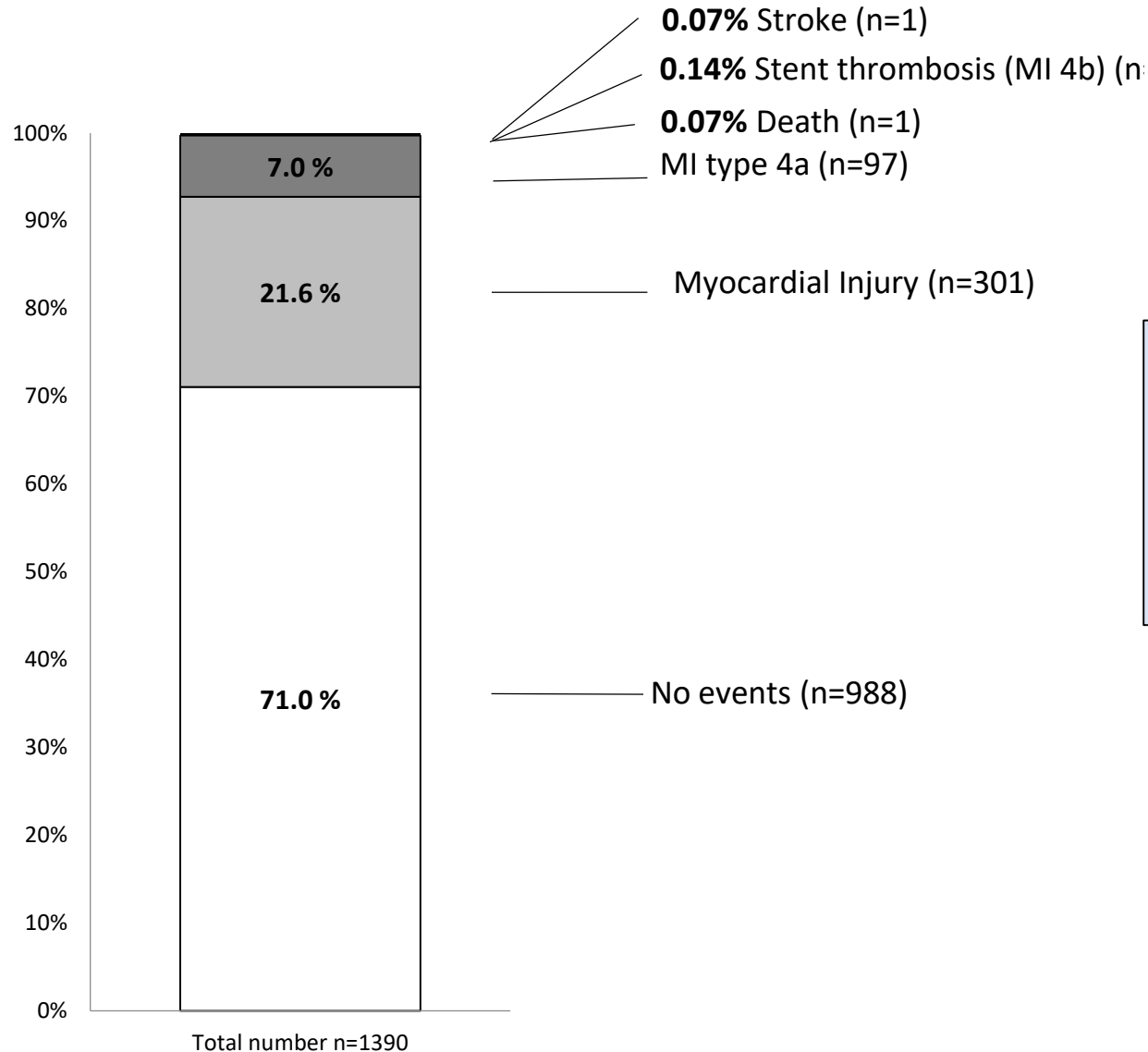


Periprocedural myocardial infarction and injury in elective coronary stenting

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- Evaluate the incidence, factors and prognostic of periprocedural myocardial infarction and myocardial injury in elective percutaneous coronary intervention (PCI).
- Prospective cohort study at the Institute of Cardiology of Pitié-Salpêtrière hospital
- Inclusion of 1390 patients who underwent elective PCI between January the 1st, 2014 and December 31st, 2015

Periprocedural events during elective PCI

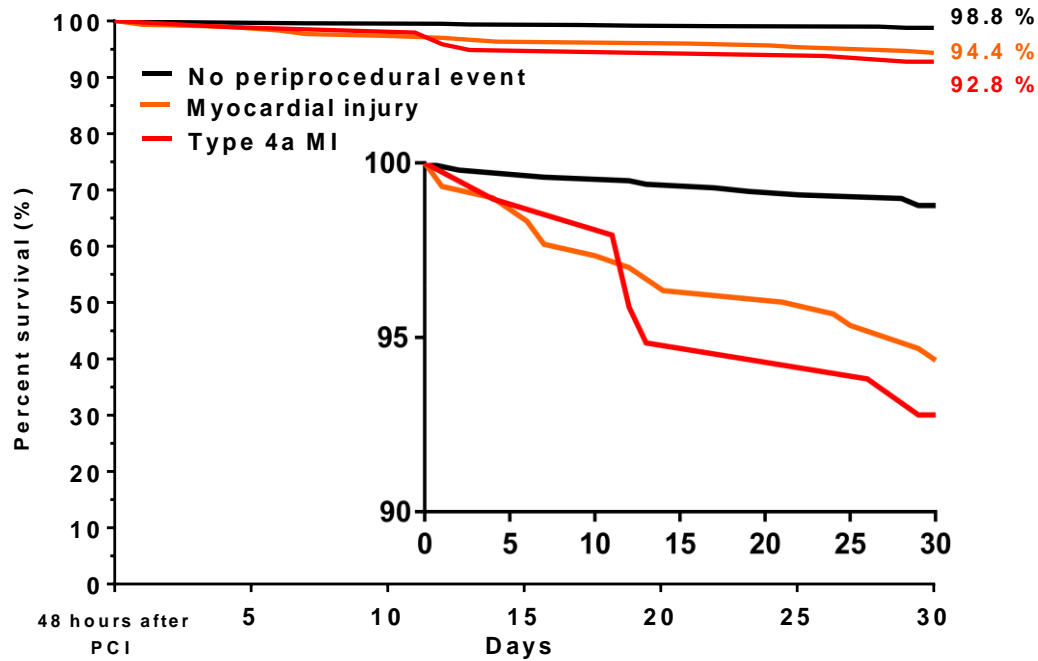


28.7 % of the patients admitted for elective PCI suffered from periprocedural MI and myocardial injury (n=398)

Prognosis of periprocedural MI and myocardial injury

At 30 days

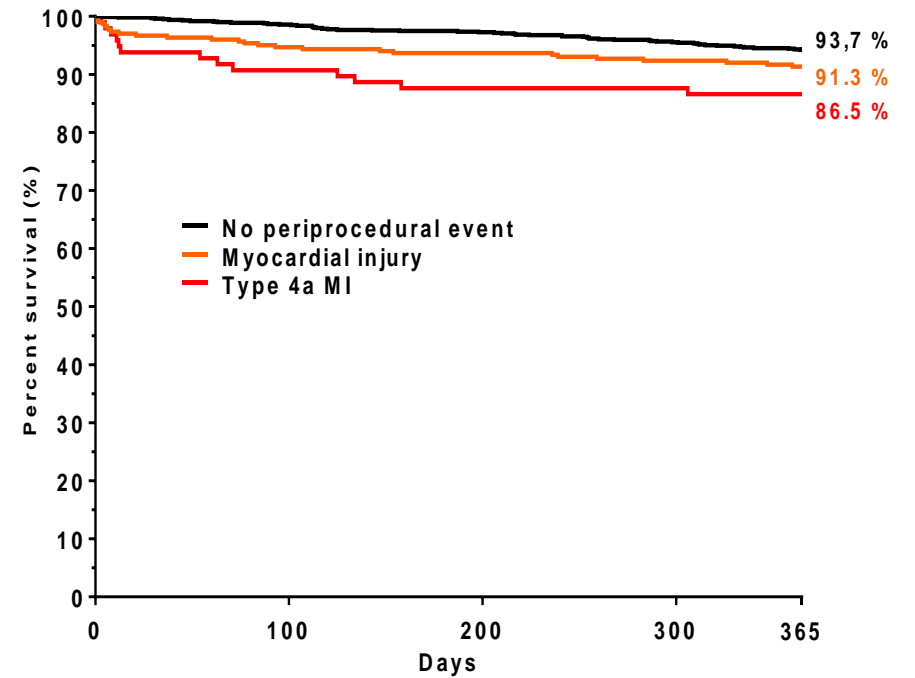
Type 4a + dommage Myocardique
 adHR : 3.8 ; 95%CI(1.9 – 6.9) p<0.001



No. at risk	48 hours after PCI	5	10	15	20	25	30
No periprocedural event	989		984		977		
Myocardial Injury	301		292		286		
Type 4a MI	97		92		90		

At 1 year

Type 4a + dommage Myocardique
 adHR = 1,7 ; 95%CI(1.1-2.6), p =0.004



No. at risk	0	100	200	300	365
No periprocedural event	989	974	961	944	923
Myocardial Injury	301	286	283	279	275
Type 4a MI	97	88	86	85	81

Conclusion

- **Periprocedural myocardial infarction and myocardial injury are frequent complications of elective PCI.**
- **They are associated to more recurrent ischemic events at 30 days and 1 year.**
- **Implementation in latest ESC guidelines.**



ESC

European Society
of Cardiology

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EXPERT CONSENSUS DOCUMENT

Fourth universal definition of myocardial infarction (2018)

*“However, it has recently been shown that the optimal hs-cTnT thresholds to predict cardiovascular events at 30 days and 1 year were very close **to the five-fold increase suggested by the Third Universal Definition of Myocardial infarction**”*