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Effect of the Type of Stent on Results of CABG in Multivessel Disease Patients

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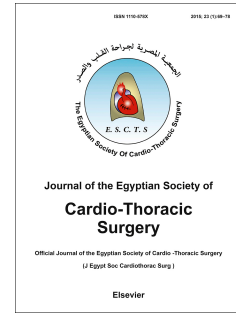
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Short Title: CABG after PCI

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Abstract:

BACKGROUND: (PCI) before (CABG) increased recently. Patients referred for CABG with severe pathology affecting their results. Studies compared CABG with PCI, effect of previous PCI on after coming CABG, while no recorded studies addressed effect of the type of stent on the after coming CABG.

PATIENTS AND METHODS: Data of 200 CABG patients with previous PCI done at the National Heart Institute and other centers between 2011 and 2015, are observed prospectively, and compared with mean follow-up of 12 months. The patients were divided into two groups: Group I (n = 100, mean age 52.20 years, 9 women) underwent CABG after (BMS) and group II (n = 100, mean age 50.25, 18 women) had prior (DES PCI) before CABG.

RESULTS: Group I: the mean number of stents was 1.95 versus 2.98 in group II (P <0.05). Patients with DES PCI presented for CABG with higher incidence of previous MI (P = 0.004) and unplanned CABG (P = 0.0000001). The total number of grafts was significantly higher in the BMS PCI group 3.12±0.73 versus 2.46±0.85 in Group II (P value=0.00001). Postoperative inotropes, morbidity and hospital stay were higher in the DES PCI group (P value=0.02, 0.01 and 0.000595 respectively). Post-operative echo showed better EF, RSWMA and dimensions in group I. Morbidities and mortality were higher in patients with prior DES PCI. Postoperative echo emphasized better benefit from CABG in patients of group I (post BMS PCI).

CONCLUSION: DES PCI showed negative impact on the outcome of after coming CABG.

KEYWORDS: Coronary arteries bypass grafting (CABG); percutaneous coronary intervention (PCI); SYNTAX; Drug Eluting Stent (DES); Bare Metal Stent (BMS)

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