# **Contemporary Trends in Treatment of STEMI**

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### **Background:**

The treatment of patients with STEMI has undergone dramatic changes over the past decade due to the results of large scale clinical trials which have shown the effectiveness of several modalities including short door to balloon time, radial approach, anti-platelet loading, aspiration thrombectomy and DES use.

## Aim:

The objectives of this study were to describe contemporary, as well as changing, in the use of these modalities in STEMI patients from a large data base registry.

#### Method and Results:

We used our Database of all pts treated using primary PCI for STEMI. Patients were grouped into four periods: 2001-2005; 2006-2007; 2008-2009; 2010-2012. Excluded pts were those with cardiogenic shock.

	2001-2005	2006-2007	2008-2009	2010-2012	Р
	N=770	N=383	N=366	N=416	Value
Age	611±13	60±12	61±13	61±13	0.5
Male	78%	85%	81%	84%	0.05
Anterior AMI	48%	47%	49%	40%	0.01
Door-Balloon [min]	102±120	90±92	108±120	90±78	0.2
Median [25-75%]	60[60-120]	60[60-120]	60[60-120]	60[36-120]	
Antiplatelt loading	40%	60%	69%	86%	0.001
Effient				33%	
Aspiration	4.3%	11.5%	35%	53%	0.001
DES use	8.3%	28%	3.7%	25%	0.001
2B/3A Antagonist	79%	73%	64%	55%	0.001
Angiomax	0.1%	8.6%	3.8%	7.5%	
Radial approach	3.5%	14.4%	11.7%	37%	0.001
Succssful PCI	94%	92%	98%	99%	0.001
One year					
Death	7%	6.3%	4.1%	3.1%	0.1
Re-MI	8.6%	3.7%	3.9%	2.2%	0.001

Stent thrombosis	3.9%	1.8%	1.4%	1.2%	0.003
TVR	15%	8.4%	12%	7.5%	0.01
CABG	5.7%	4.7%	3.3%	1.7%	0.08
MACE	23.5%	17.8%	16.7%	11.5%	0.009

<u>Conclusion:</u> The present results suggest marked increases over time in the use of evidence-based therapies in patients hospitalized with STEMI. The improvement of clinical outcomes may be related to the implementations of these modalities.