EFFECT OF INCOMPLETE REVASCULARISATION BY PERCUTANEOUS CORONARY INTERVENTION ON THE OUTCOME AND PROGNOSIS IN AGED PATIENTS WITH MULTIVESSEL CORONARY ARTERY DISEASE TRIMETAZIDINE

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Objective To evaluate the influence of trimetazidine on efficiency and exercise tolerance in aged patients with multivessel coronary artery disease undergoing incomplete revascularisation by percutaneous coronary intervention (PCI).
Methods Seventy three aged patients with multivessel coronary artery disease complicated undergoing incomplete revascularisation by PCI were divided into trimetazidine group (n=38) and routine therapy group (n=35). MACE events, angina frequency, angina duration and number of CCS class were follow-up at 12 months after PCI.

Results The incidence of MACE after 12 months follow-up showed there were significantly differences between two groups, p<0.05. Angina and CCS class were all significantly reduced in trimetazidine group compared to routine therapy group (p<0.05). LVEF and mean distance of 6-min walk test were significantly increased in trimetazidine group after 12 months than those at baseline (p<0.5). The distance of 6-min walk-test in trimetazidine group was longer than that in routine therapy group (p<0.05).

Conclusion Trimetazidine could reduce the frequency of angina pectoris events and myocardial damage during PCI. It also improves left ventricular function during follow-up after PCI.
Effect of incomplete revascularisation by percutaneous coronary intervention on the outcome and prognosis in aged patients with multivessel coronary artery disease

trimetazidine

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