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Objectives To evaluate the therapy effect of the combination of thrombus-sucking catheter and Tirofiban intra-coronary injection in acute PCI.

Methods 125 acute coronary infarction patients who had undertook Coronal Artery Angiography (CAG) were divided into two groups (group A and groupB). Patients in group A were received more treatments of sucking 3–4 times by thrombus-sucking catheter and injecting Tirofiban 10–20 ml within coronary before stent implantation, while patients in group B were only stent implantation. Then there are comparisons between the two groups in items as following: the recovery rate of coronary blood perfusion during operation; the MBG ranks of cardiomyocyte chromosome, the decreasing rates of ST segment; the main adverse cardiac events (MACE)(including cardiac death revascularisation therapy once more and secondary onset of cardiac infarction, within 30 days, and the severe haemorrhage incidents occurred in hospital.

Results Although the conditions of patients in group A were more severe than in group B according to killip ranks of heart function and the assessments of the usages of intra-aortic balloon pump (IABP):group A is better than group B in the recovery rates of coronary blood perfusion to TIMI 3 and MBG 3 and the decreasing rates of segment, and those differences are significant ($p<0.05$). The occurrence rates of MACE within 30 days in group A is lower than in group B but the result has no significance; and the rates of severe haemorrhage incidents in group A is no more than in group B.

Conclusions The combination of thrombus-sucking catheter and Tirofiban intra-coronary injection in acute PCI, could improve the recovery rates of coronary blood perfusion, decrease the non-perfusion rate and ameliorate cardiac reperfusion without augmenting the occurrence rates of severe haemorrhage incidents.

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**THE APPLICATION OF THROMBUS SUCKING CATHETER
COMBINED WITH TIROFIBAN INTRA-CORONARY
INJECTION IN ACUTE PCI**

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