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THE SECURITY, MEDIUM-TERM AND LONG-TERM EFFECTS OF SIX FRENCH TRANSRADIAL PERCUTANEOUS CORONARY INTERVENTION FOR PATIENTS WITH UNPROTECTED LEFT MAIN CORONARY ARTERY LESIONS

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Objectives To study the clinical security, medium-term and long-term effects of six French transradial percutaneous coronary intervention for patients with unprotected left main coronary artery lesions.

Methods Our study investigated 61 patients with unprotected left main coronary artery lesions treated by six French transradial percutaneous coronary intervention in our hospital between January 2008 and December 2009. The mean age of these patients was 66.03 ± 10.02 (total scope: 44–87). Of the 61 cases, 40 had hypertension and 14 had diabetes mellitus. 22 patients had a history of smoking. The average left ventricle ejection fraction was $(62.96 \pm 12.15)\%$ (total scope: 28–86) and the average plasma creatinine level was $(82.92 \pm 18.30) \mu\text{mol/l}$ (total scope: 44–130). Patients enrolled in the study underwent clinical evaluation of MACE after the procedure (The deadline is 31 October 2011).

Results Procedural success was achieved in all cases. A total of 67 stents were implanted. No in-hospital death occurred. Mean clinical follow-up period was (26.25 ± 5.92) months (total scope: 19–44 months). MACE developed in six cases (9.8%) during the follow-up period, including 2 death (3.3%) and four case of target lesion revascularisation (6.6%). Compared with low-risk group (SYNTAX score ≤ 32 , (From the study of SYNERGY between percutaneous coronary intervention with TAXUS and cardiac surgery trial)), MACE was increased in the high-risk group of the patients (SYNTAX score > 32).

Conclusions Six French transradial percutaneous coronary intervention for patients with unprotected left main coronary artery lesions is safe, feasible and highly successful, bringing about medium-term or long-term good outcomes. Patients in the low-risk group (SYNTAX score ≤ 32) have better clinical prognosis compared with high-risk group (SYNTAX score > 32).