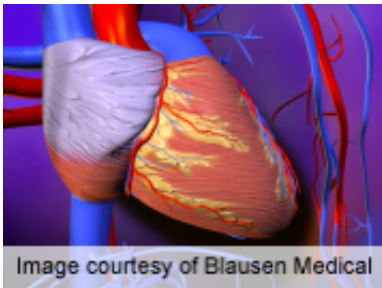


# Clinical outcomes similar for elderly with PCI, CABG

August 27 2013

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For older patients with unprotected left main coronary artery disease, clinical outcomes are similar with percutaneous coronary intervention and coronary artery bypass grafting, according to research published in the Sept. 1 issue of *The American Journal of Cardiology*.

(HealthDay)—For older patients with unprotected left main coronary artery disease, clinical outcomes are similar with percutaneous coronary intervention (PCI) and coronary artery bypass grafting (CABG), according to research published in the Sept. 1 issue of *The American Journal of Cardiology*.

Mahboob Alam, M.D., from the Baylor College of Medicine in Houston, and colleagues performed aggregate data meta-analyses of the clinical outcomes in studies comparing PCI with CABG for patients with a mean age of 70 years or older, and with unprotected left main [coronary artery disease](#). A total of 10 studies involving 2,386 patients (909 undergoing PCI and 1,477 undergoing CABG) were included.

The researchers found that presentation with acute coronary syndrome was more likely among patients in the PCI group (59.6 percent) versus those in the CABG group (44.8 percent). PCI correlated with a significantly shorter hospital stay. At 30 days, and 12 and 22 months, there were no significant differences between PCI and CABG for all-cause mortality, nonfatal [myocardial infarction](#), and major adverse cardiac and cerebrovascular events. PCI correlated with significantly lower rates of strokes at 30 days and 12 months (odds ratio, 0.14 for both), and with significantly higher rates of repeat revascularization at 22 months (odds ratio, 4.34). Subgroup analysis of patients aged 75 years and older resulted in consistent findings.

"In conclusion, older patients (age  $\geq$ 70 years) with unprotected left main coronary artery disease had comparable rates of all-cause mortality, nonfatal myocardial infarction, and major adverse cardiac and cerebrovascular events after PCI or CABG," the authors write.

One author disclosed financial ties to Merck.

**More information:** [Abstract](#)  
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Citation: Clinical outcomes similar for elderly with PCI, CABG (2013, August 27) retrieved 15 February 2023 from <https://medicalxpress.com/news/2013-08-clinical-outcomes-similar-elderly-pci.html>

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