

Revascularization cuts mortality, MACE in coronary CTO

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(HealthDay)—For patients with coronary chronic total occlusion (CTO) and well-developed collateral circulation, revascularization is associated with reduced risk of cardiac mortality and major adverse cardiac events (MACE), according to a study published in the Feb. 1 issue of *JACC: Cardiovascular Interventions*.

Woo Jin Jang, M.D., from Sungkyunkwan University School of Medicine in Seoul, South Korea, and colleagues compared the long-term clinical outcomes of [patients](#) with CTO and well-developed collateral circulation. Data were analyzed for 738 patients with Rentrop grade 3 collateral circulation. The incidence of [cardiac death](#) and MACE (composite of cardiac death, myocardial infarction, and repeat [revascularization](#)) was compared for 502 patients who underwent revascularization and medical therapy versus 236 who underwent

medical therapy alone.

The researchers found that the incidence of cardiac death and MACE was significantly lower in the revascularization group versus the medication group (hazard ratios, 0.29 and 0.32; both P

"In patients with coronary CTO and well-developed collateral circulation, aggressive revascularization may reduce the risk of [cardiac mortality](#) and MACE," the authors write.

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