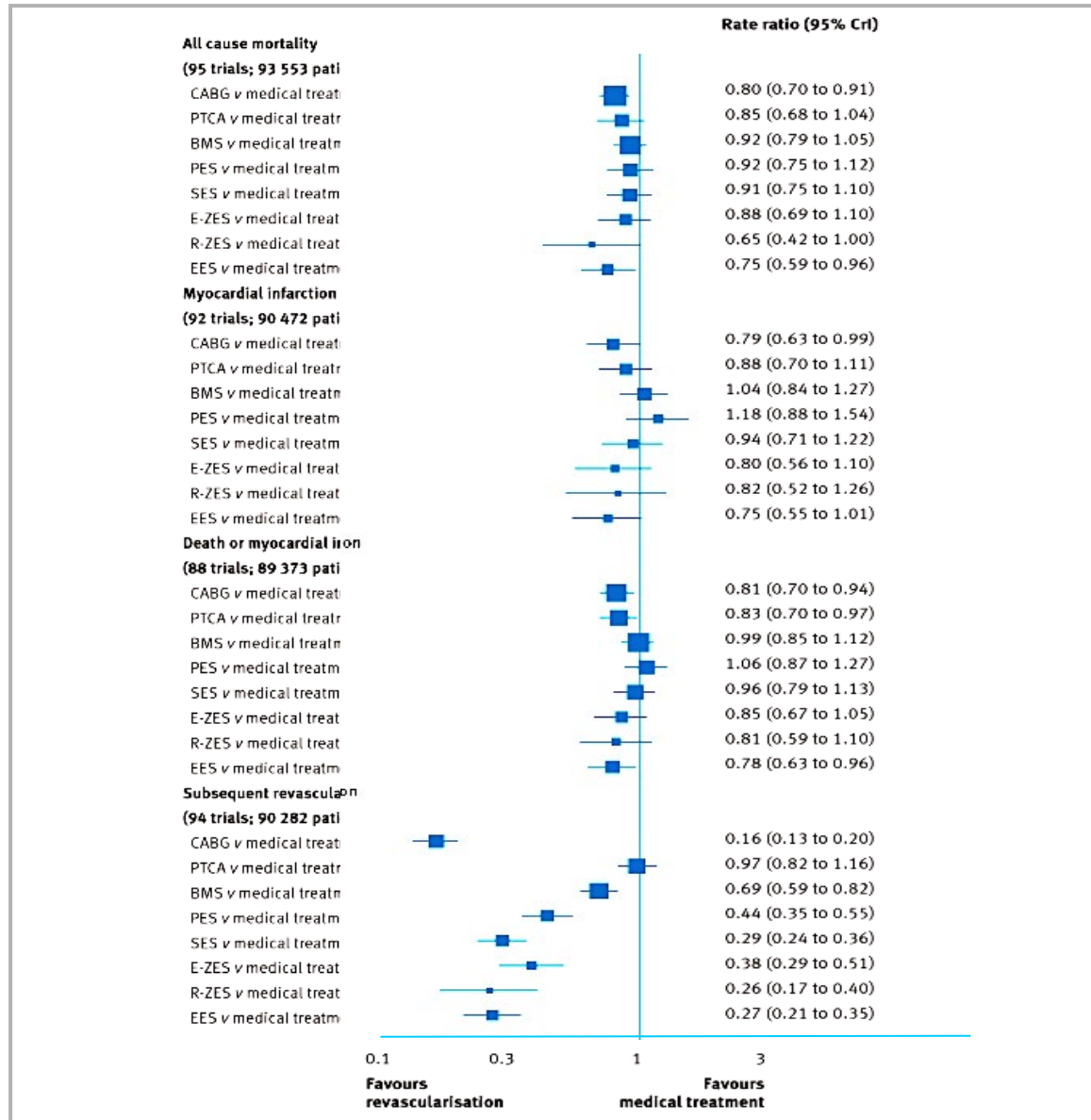


PCI in Patient with Symptomatic Chronic Coronary Syndrome

I have no conflict of interest for this presentation

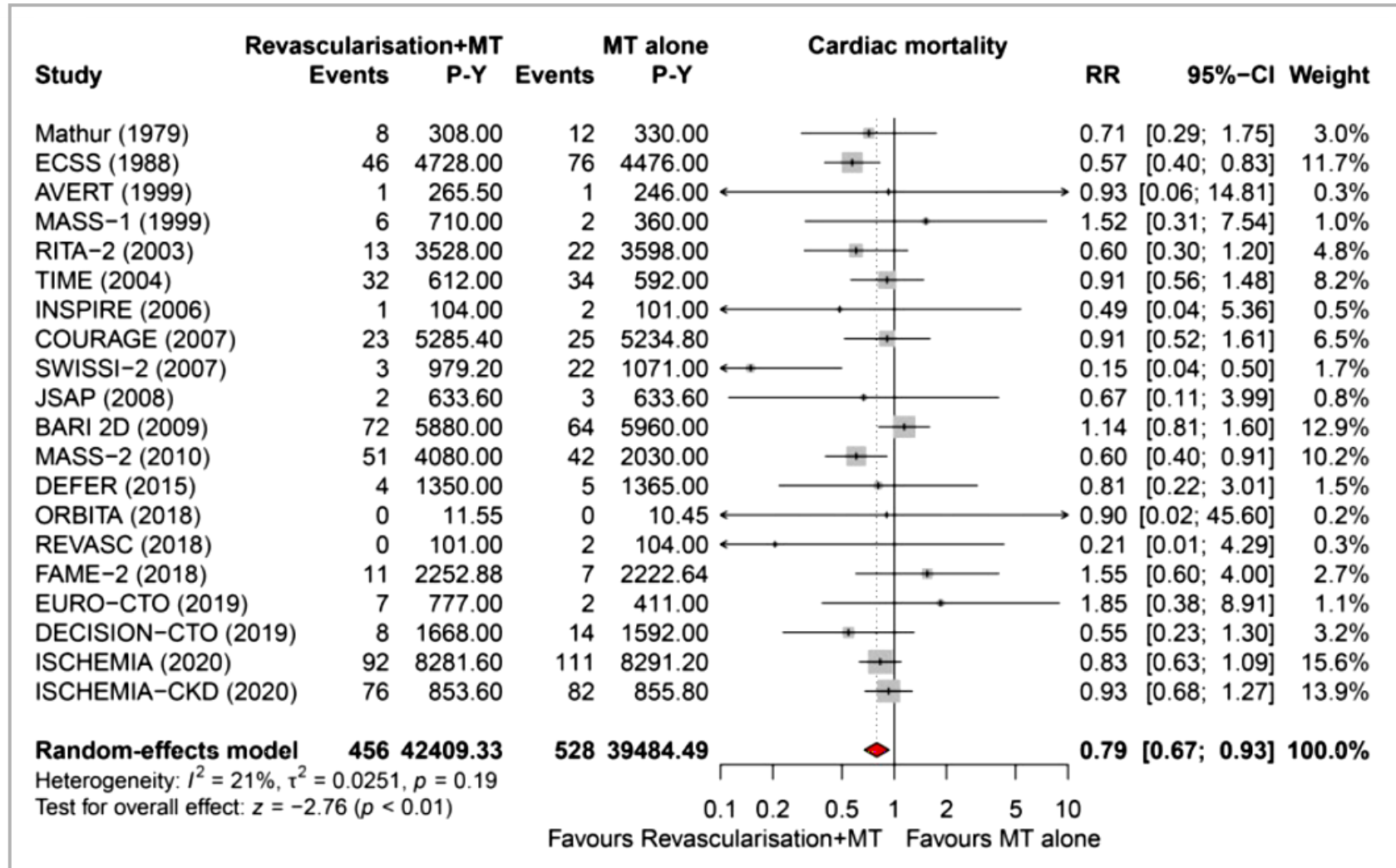
NETANÁLISIS

(> 90.000 pacientes)



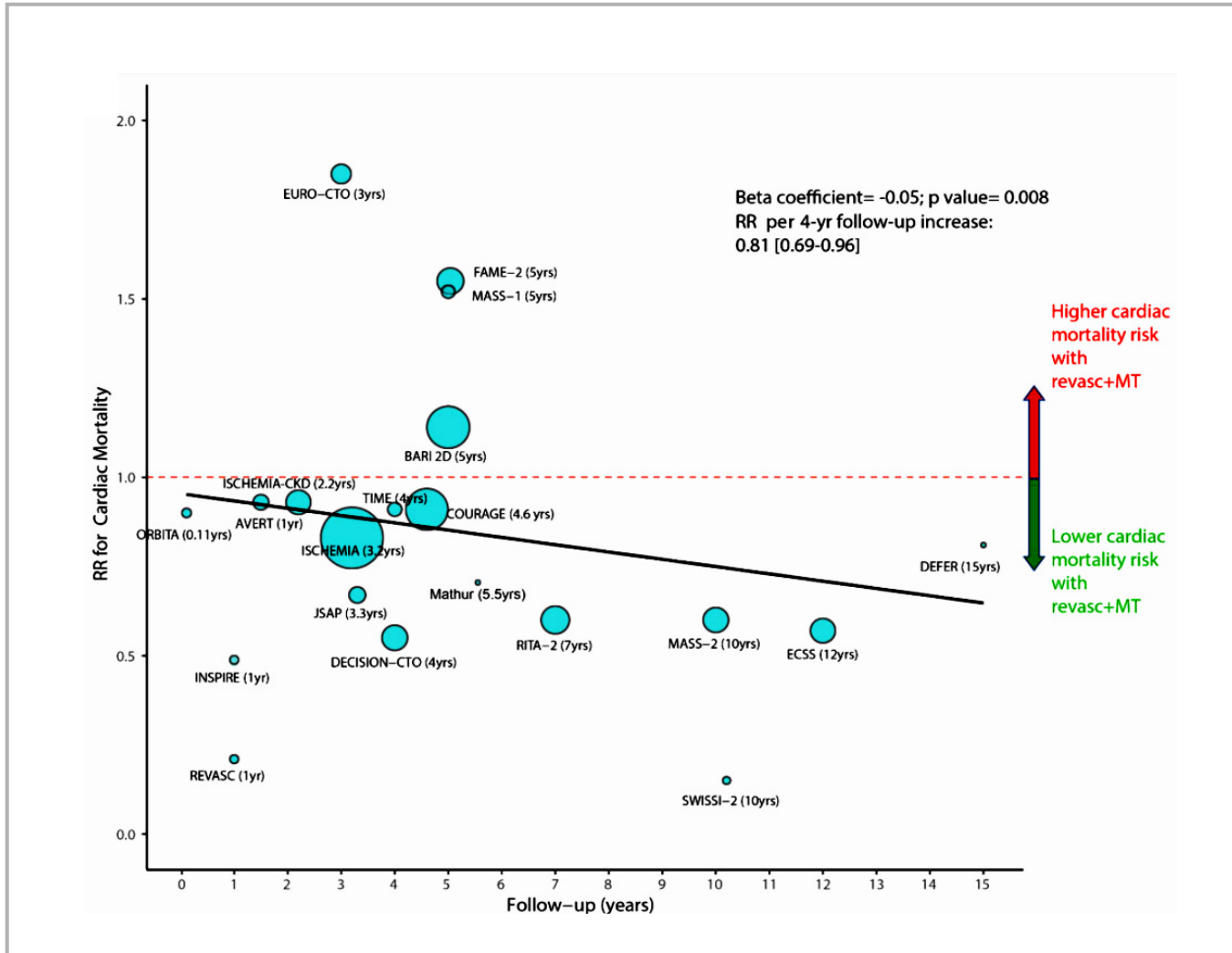
NETANÁLISIS

(19.806 pacientes)



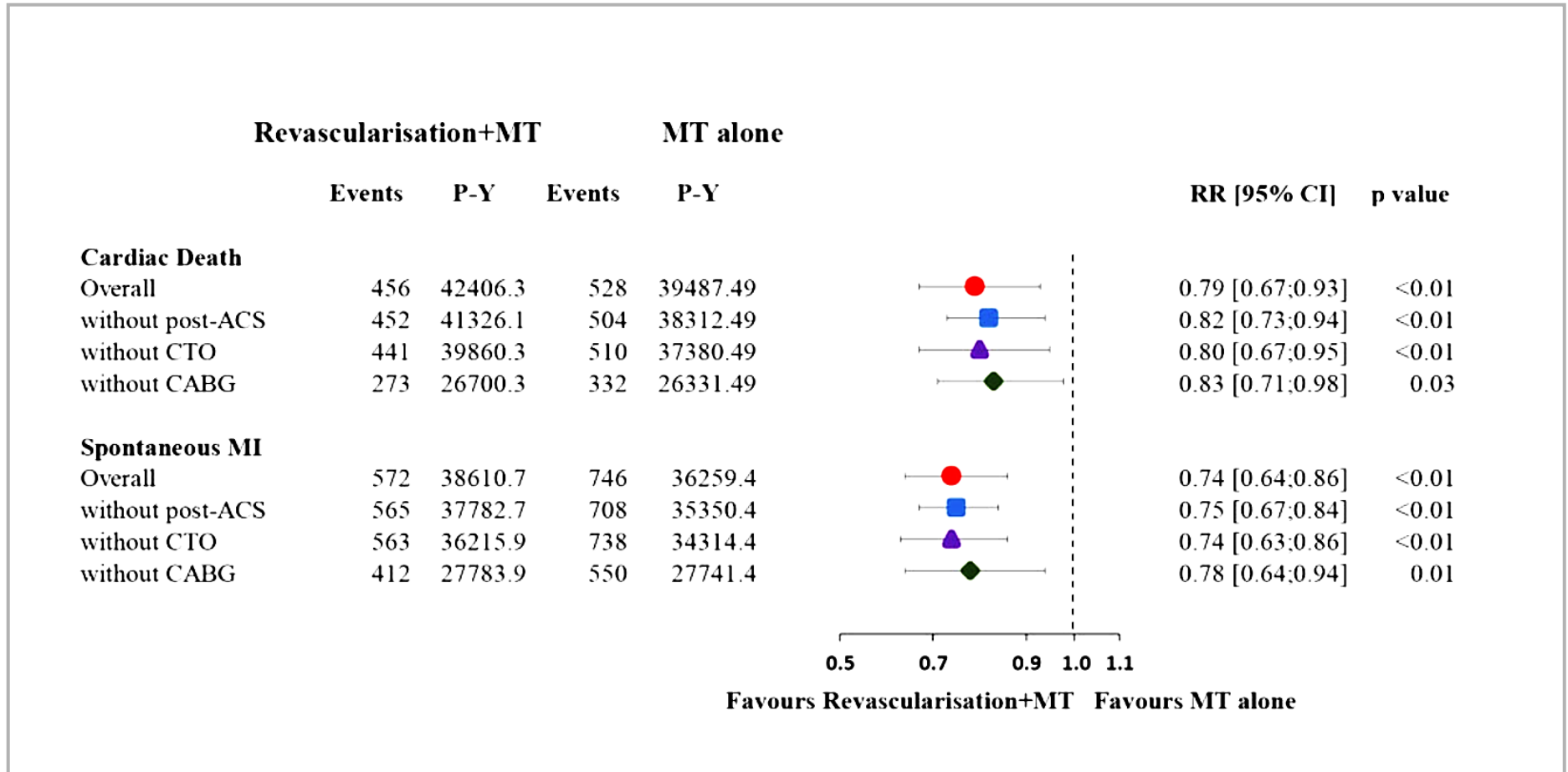
NETANÁLISIS

(19.806 pacientes)



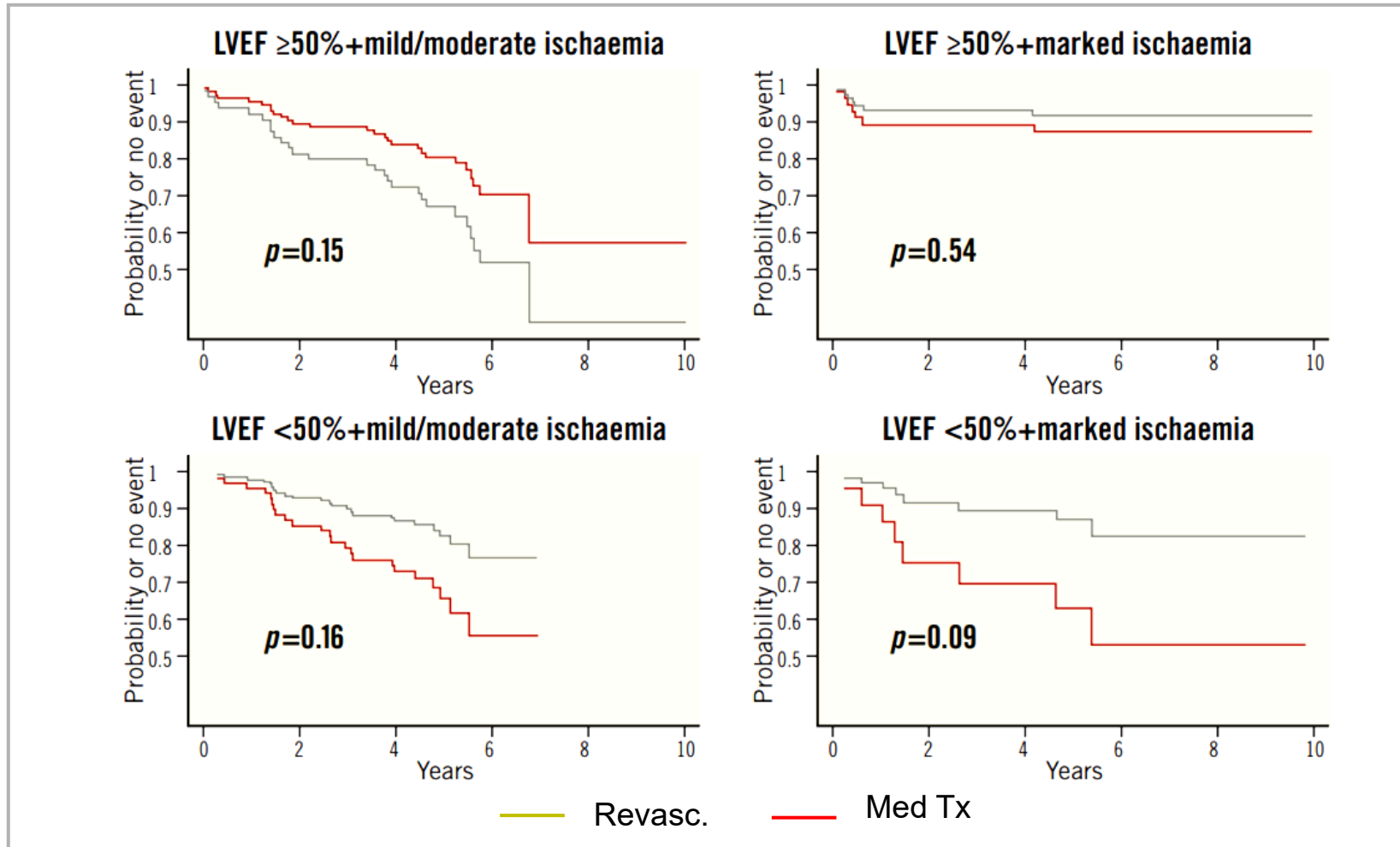
NETANÁLISIS

(19.806 pacientes)

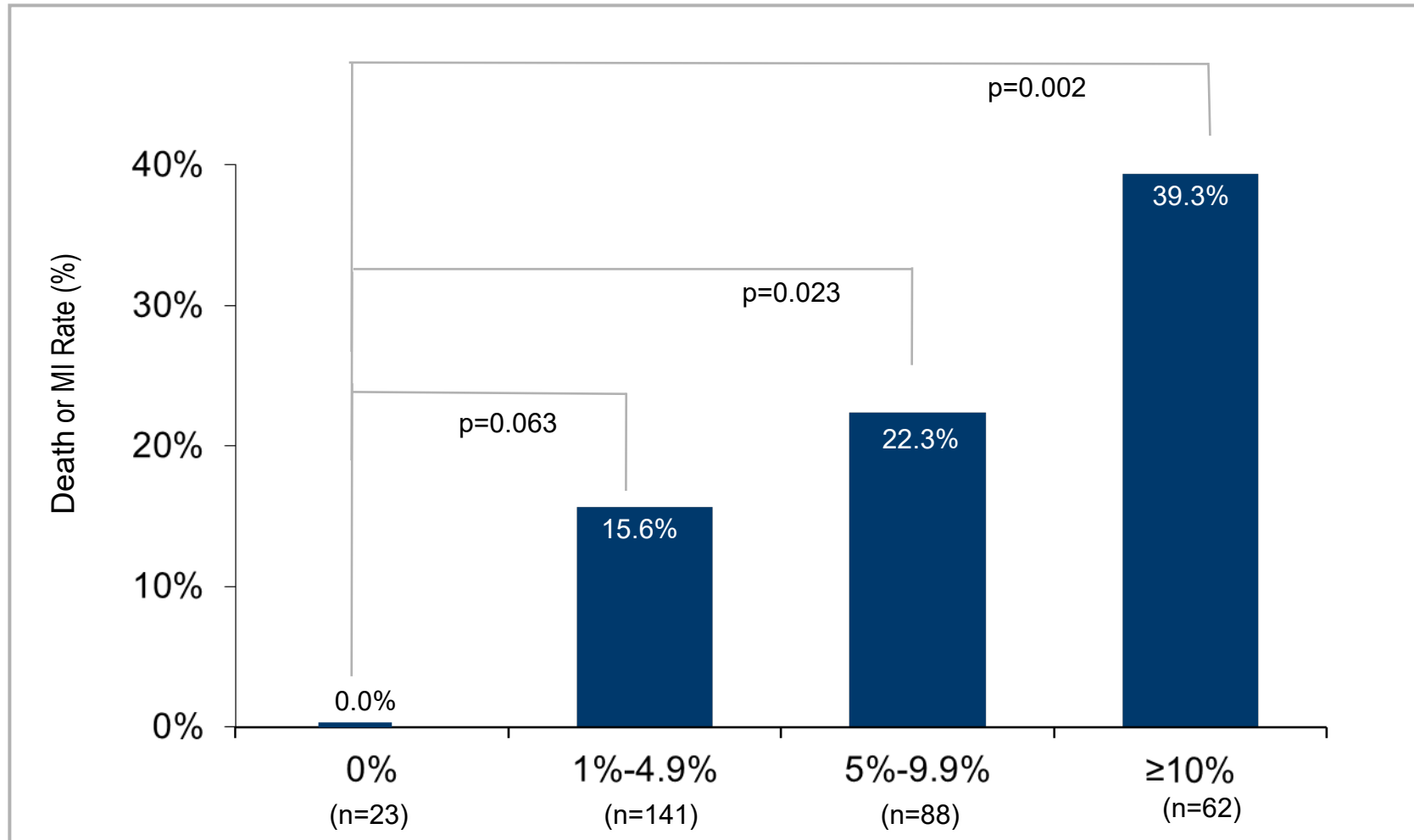


Monto Isquémico, Fe% y eventos

527 pacientes

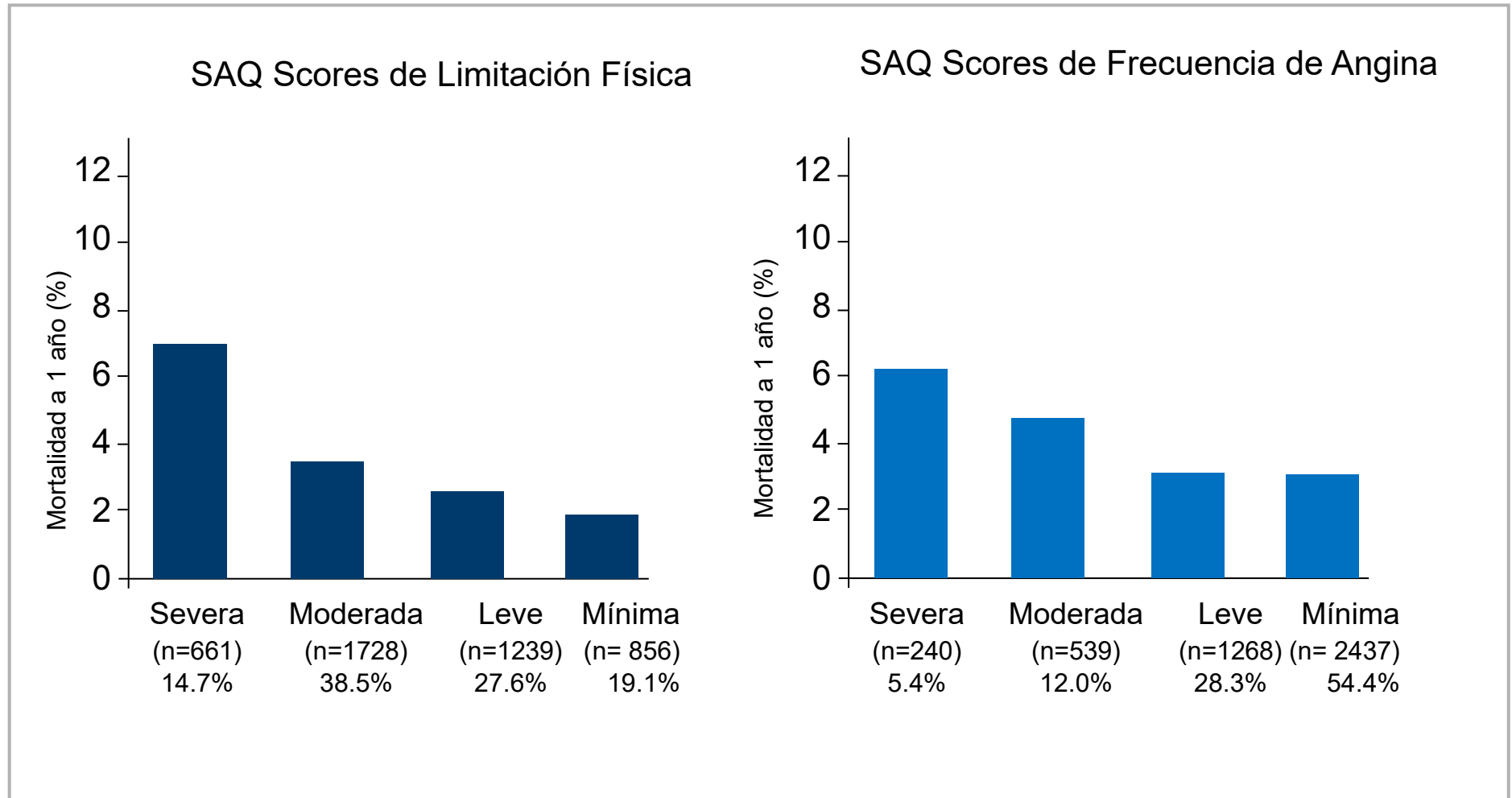


Rates of Death or MI by Residual Ischemia

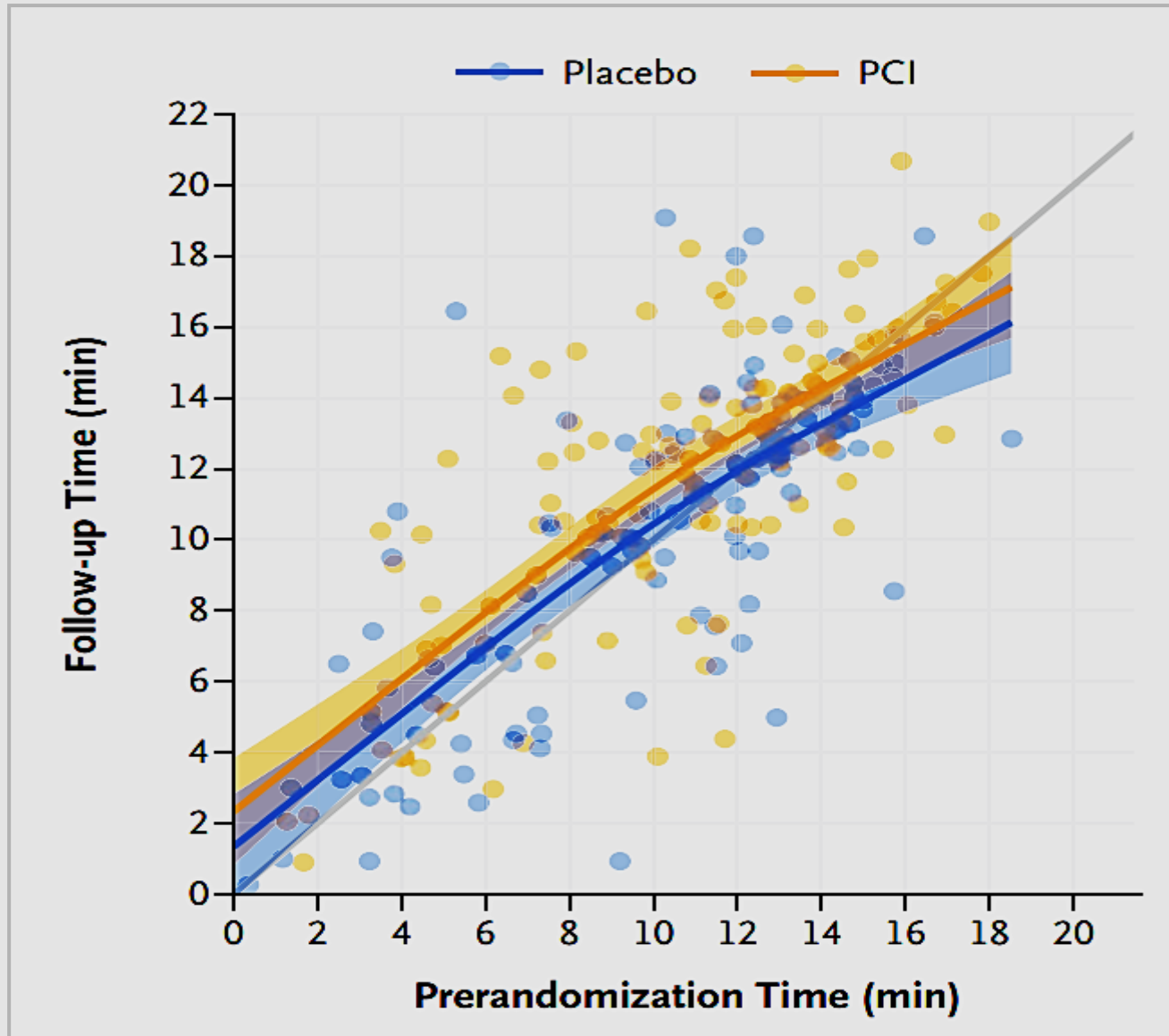


Angina Severity and Mortality

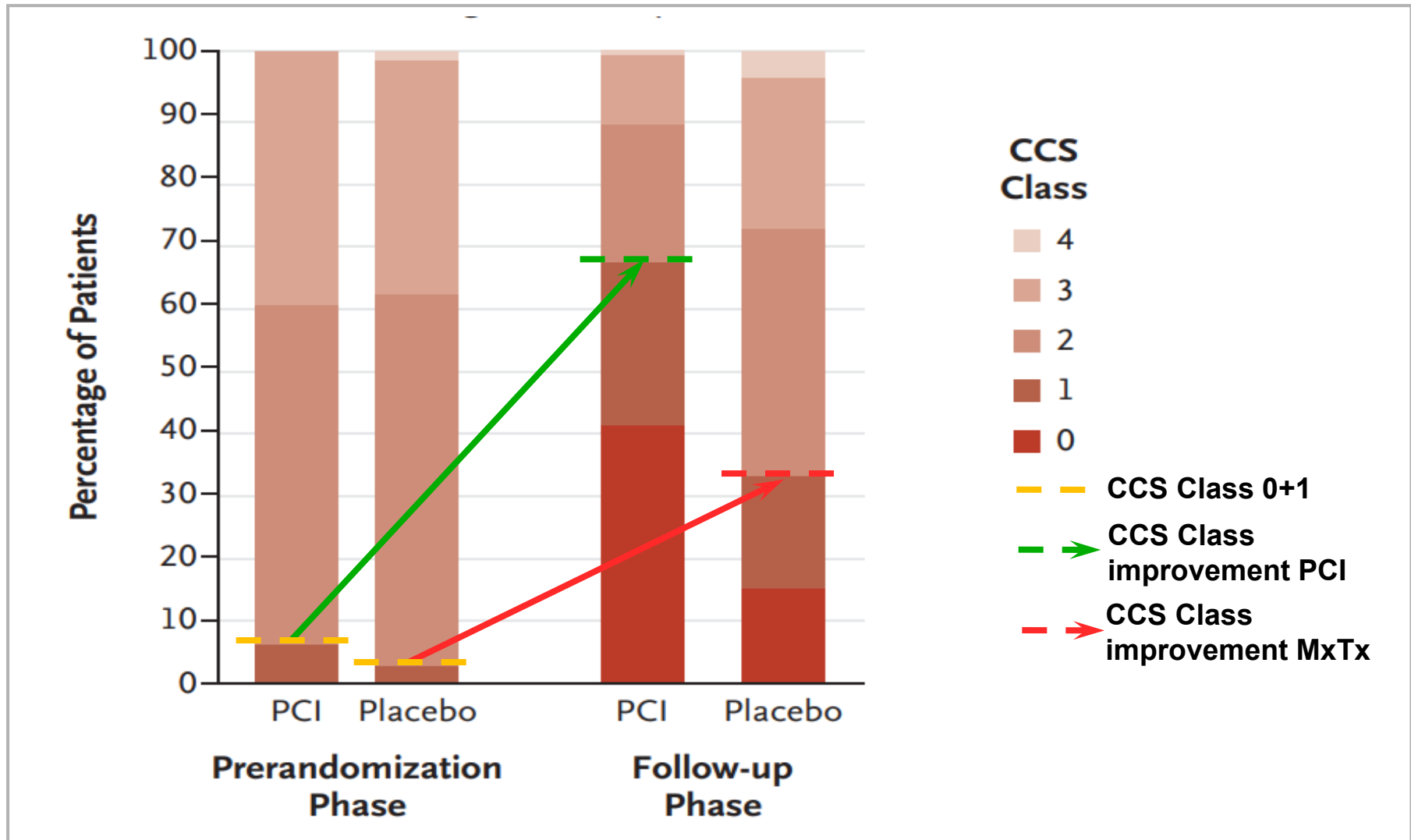
SAQ: Seattle Angina Questionnaire



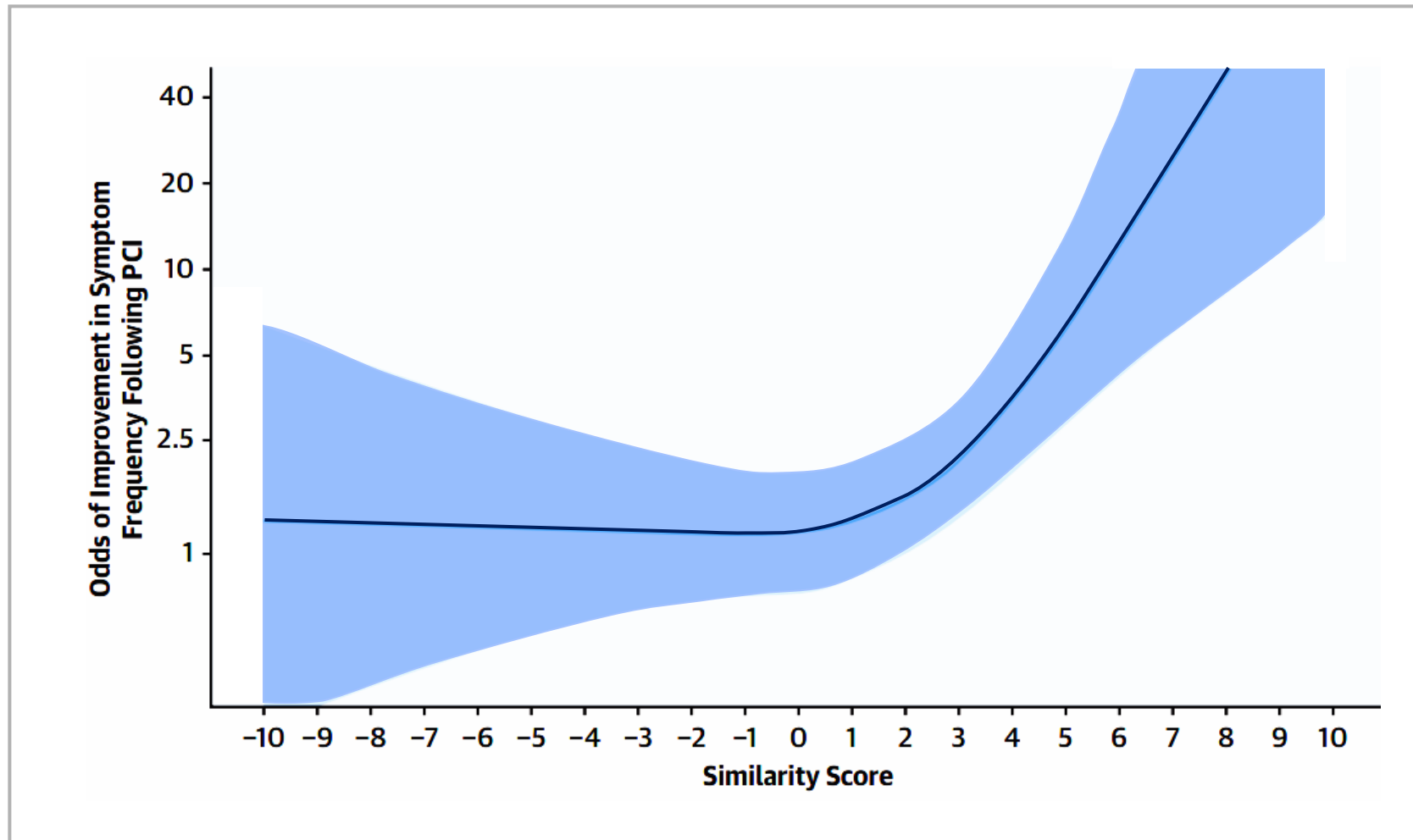
Time on Treadmill Exercise Test



CCS Angina Severity Class and Prediction of Improvement Post PCI



Symptom Similarity and Post PCI Improvement



La revascularización salva eventos mayores en algunos escenarios

Reduce severidad de síntomas (ayuda al Tx Mx)

A mayor severidad de la angina, mayor mejoría

Mejora la calidad de vida

La similitud de los síntomas durante las insuflaciones
predice mayor mejoría de la angina post PCI

ISCHEMIA

International Study of Comparative Health Effectiveness With Medical and Invasive Approaches

Major Exclusion Criteria

- NYHA Class III-IV HF
- Unacceptable angina despite medical therapy
- $\geq 50\%$ stenosis in unprotected left main
- EF < 35%
- ACS within 2 months
- eGFR < 30 mL/min or dialysis
- PCI or CABG within 1 year

Maron DJ, et al. American Heart Journal.
2018; 201;124-135.

ISCHEMIA

International Study of Comparative Health Effectiveness With Medical and Invasive Approaches

Major Exclusion Criteria = Current Indications

- NYHA Class III-IV HF ✓
- Unacceptable angina despite medical therapy ✓
- $\geq 50\%$ stenosis in unprotected left main ✓
- EF < 35% ✓
- ACS within 2 months ✓
- PCI or CABG within 1 year ✓
- eGFR < 30 mL/min or dialysis ✗

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