IMPACT OF AGE ON THE LONG-TERM CLINICAL OUTCOMES FOLLOWING PERCUTANEOUS CORONARY INTERVENTION WITH DRUG ELUTING STENTS.

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Purpose

We sought to evaluate the impact of age on the long term clinical outcomes after percutaneous coronary intervention (PCI) with drug-eluting stents (DES).

Methods

The study population consisted of 1034 consecutive patients, who underwent PCI with DESs from 01/01/2007 to 31/03/2010. 84.9% of the study population were ≥ 75 years of age and 15.1% were under the age of 75.

Results

The older patient group had more females and were more likely to be hypertensive, whilst younger patients were more likely to be obese and smokers. The number of vessels attempted and the average number of stents and stented length per patient were similar in both groups.

Clinical follow-up was completed in 988 patients and the mean follow-up period was 29.1 months (range: 11 -49 months).

Clinical Characteristics	Younger (<75, n=878)	Elderly (≥ 75, n=156)	*P* value
Males (%)	82,35	72	0,0036
Hypertension (%)	57,97	71,79	0,0067
Diabetes Mellitus (%)	25,85	32,69	0,093 (NS)
Dyslipidaemia (%)	45,90	39,74	0,18 (NS)
Smokers (%)	34,4	8,97	<0,0001
BMI	29,3	27,8	0,0089
PCI Data	"	"	"
Stents per patient (n)	2,01	2,03	0,83 (NS)
Stented length per patient (mm)	43,28	43,9	0,784 (NS)
Average stent diameter per patient	2,88	2,9	0,534 (NS)
Clinical outcomes	"	"	"
Cardiac death (n)	4	5	0,006
Non-cardiac death (n)	10	6	0,025
Re-PCI / TLR (n)	14	3	0,732 (NS)
Re-PCI / Non-TLR (n)	9	0	0,37 (NS)
CABG (n)	6	0	0,599 (NS)
Myocardial Infarction (n)	7	2	0,632 (NS)

Conclusions

In the present study, mortality rate was higher in the elderly following PCI, though the incidence of MI and repeat revascularisation was not significantly different from the younger patient's.