GENDER BASED LONG-TERM CLINICAL OUTCOMES AFTER DRUG ELUTING STENT IMPLANTATION IN PATIENTS WITH CORONARY ARTERY DISEASE.

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Purpose

To evaluate the role of gender in the long-term clinical outcomes after percutaneous coronary intervention (PCI) with drugeluting stents (DES).

Methods

Clinical and angiographic data were analysed from 1034 consecutive patients, who underwent PCI with DES implantation, between 01/01/2007 and 31/03/2010. 81% of the study population were males and 19% were females.

Results

Women were more likely to be older, hypertensive and diabetic, and men were more likely to be smokers. The number of vessels attempted and the average number of stents and stented length per patient were similar in both groups, though the average stent diameter was smaller in women.

Clinical follow-up was completed in 988 patients and during a mean follow-up period of 29.1 months (range: 11 -49 months), there was no statistically significant difference in the incidence of major adverse cardiac events in the two groups.

	MEN (n=835)	WOMEN (n=199)	P value
Age (mean)	62,52	68,36	<0,0001
BMI	28,9	29,4	0,336 (NS)
Hypertension (%)	55,45	79,40	<0,0001
Diabetes Mellitus (%)	23,83	39,7	<0,0001
Dyslipidaemia (%)	44,19	48,24	0,34 (NS)
Smokers (%)	35,21	11,06	<0,0001
PCI Data			
Stents per patient (n)	2,03	1,95	0,891 (NS)
Stented length per patient (mm)	43,85	41,37	0,474 (NS)
Average stent diameter per patient	2,9	2,77	0,003
Clinical outcomes			
Cardiac death (n)	8	1	1 (NS)
Non-cardiac death (n)	12	4	0,528 (NS)
Re-PCI / TLR (n)	11	6	0,11 (NS)
Re-PCI / Non-TLR (n)	8	1	1 (NS)
CABG (n)	6	0	0,601 (NS)
Myocardial Infarction (n)	7	2	0,686 (NS)

Conclusions

In this retrospective, single center experience women having PCI tend to be older and have more comorbidities than do men. No gender difference was observed regarding the long-term clinical outcomes.