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Clinical Science PCI Outcomes in High Risk Patient and Lesion Subsets

Subspecialty: PCI Tuesdav Orange County Convention Center, Hall A Abstracts 2590-2594

259(Metformin Treatment is Associated with Decreased Clinical Events in Diabetic Patients Undergoing Percutaneous Intervention: A Presto Substudy

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BACKGROUND: Diabetics undergoing percutaneous coronary interventions (PCI) have wors outcomes than non-diabetic patients. Metformin, an insulin sensitizer, may decrease th occurrence of these outcomes. METHODS: Patients in the Prevention of REStenosis with Tranilast and its Outcomes (PRESTO) Trial were screened for diabetes (N = 2772), 111 diabetics received conventional therapy (insulin and/or sulfonylureas), and 887 received metformin (with or without additional therapy). 775 patients were excluded. Logistic regression was used to obtain odds ratios (OR, metformin versus conventional therapy) of any clinic event (death, myocardial infarction [MI], ischemia-driven target vessel revascularization [TVR] adjusted for multiple risk factors. RESULTS: Compared with conventional therapy, mettorm therapy was associated with fewer adverse events (p=0.005). The differences between the conventional therapy group and the metformin group were due to decreases in deat (p=0.007) and MI (p=0.002). There were no differences in baseline quantitative coronar angiographic measurements (QCA) between the metformin and conventional therapy groups CONCLUSIONS: For diabetics receiving medical therapy, those treated with mettorm undergoing PCI have decreased clinical events, especially death and MI, compared with diabetics treated with conventional therapy.

