

Prasugrel as First-line Therapy for Stemi Patients Undergoing PPCI

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Abstract : Introduction: According to the NICE guidelines, 2020 Prasugrel is the recommended first line treatment in adults with acute coronary syndromes (ACS) in patients with ST-segment-elevation myocardial infarction (STEMI), defined as ST elevation or new left bundle branch block on ECG, that cardiologists intend to treat with primary percutaneous coronary intervention (PCI). The current literature suggests that this is largely due to safety and efficacy, and cost effectiveness. We wanted to do an audit to examine the adherence of the MRI hospital with guidelines in using prasugrel as first-line therapy in patients with STEMI and undergoing PPCI. AIM: To examine the adherence of the MRI hospital with guidelines in using prasugrel as first-line therapy in patients with STEMI and undergoing PPCI. Methods: We looked at the patients presented to MRI during 1st of January 2022 to 28th February 2022. We included all the people who were above 18 and were brought to the hospital through the PPCI pathway and diagnosed as ACS and underwent PPCI. We excluded Patients who were brought to the hospital through the PPCI pathway and underwent coronary angiography and their diagnosis was found other than STEMI or if the outcome was death before discharge or they were above age >75 (as per guideline increase bleeding risk of prasugrel in a person aged 75 or older). Results: The total number of patients was 100. There were a total of seventy patients who had STEMI and fit the criteria for inclusion. Out of these, only 72.9% (51) were given Prasugrel as a first line. Seventeen (17) 24.3% STEMI patients were candidates for prasugrel as first-line therapy but were instead offered (clopidogrel/ticagrelor). Two (2.9%) STEMI patients were not given prasugrel as first-line therapy because of C/I (CVA) or the use of anticoagulant. Nine (9%) of them died before discharge. Eleven (11%) were above the age of 75. Ten (10%) of patients had a diagnosis other than STEMI. Conclusions and recommendations: Our audit has shown the need to increase awareness amongst staff re: the first line use of Prasugrel as per NICE guidelines. We aim to arrange awareness sessions for staff and increase visibility of the guidelines for the staff to encourage them to adhere to the guideline. Further research is needed to find the optimum treatment in patients above 75.

Keywords : prasugrel, PCI, NICE, STEMI

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