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Clinical outcomes after PCI for unprotected left main coronary artery (ULMCA) disease in dialysis patients

<Objective>To evaluate the clinical outcomes in dialysis patients with unprotected left main coronary artery (ULMCA) treated with percutaneous coronary intervention (PCI). <Methods and results>We evaluated the clinical outcomes of dialysis patients underwent PCI for ULMCA disease in our institution retrospectively. From January 2004 to December 2012, 67 dialysis patients underwent PCI for ULMCA disease. The mean age of these patients was 67.4±9.5 years old and 53 patients (79%) had diabetes mellitus. During follow-up time (median term was 645 days), 36 patients died (mortality rate 51%) and 12 of these 36 deaths were considered to be cardiogenic. The mortality rate of ULMCA patients complicated with 2 or 3 vessels was significantly higher than that in patients with 0 or 1 vessel (44% vs. 28%, p=0.004). The rate of major adverse cardiac events (MACE) and TLR was similar in both patients treated with DES and bare metal stent. <Conclusion>The dialysis patients underwent PCI for ULMCA had poor prognosis, however the cause of mortality was not always cardiac death. The complications with multi-vessel disease worsen the prognosis of the patients with ULMCA.