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IVUS guided low contrast PCI for CKD patients.

Back ground: Estimated safety dose of contrast media is body weight x 5 / Serum creatinine for CKD patients. To reduce contrast media during PCI is utilizing IVUS guidance and previous control shots as maps. Purpose : To clarify the efficacy of IVUS guided low contrast PCI for CKD patients. Methods ; From January 1st 2008 to January 23rd 2013, 47 patients of 67 lesions were treated with this strategy. Base line serum creatinine level was equal or more than 1.5mg/dl were enrolled. Hemodialysis patients were excluded from the study. Used contrast dose at base line and at PCI were compared. Contrast induced nephropathy<CIN> was pick up that creatinine level was increased 0.5mg/dl within 48 hours. The percentage of used contrast dose compared to estimated safety dose described above. Results: 37 lesions <55%> were treated with stent and 30 lesions were treated with balloon. Used contrast dose at PCI was $15.2\text{ml} \pm 9.5\text{ml}$ <range 0-30ml> was lower than diagnostic CAG of $47.1 \pm 38.8\text{ml}$ <P<0.0001>. One case was performed without contrast. Used contrast dose was $10.8 \pm 9.1\%$ of estimated safety dose. Creatinine level at base line was 2.1 ± 0.6 did not change after 48 hours of 2.08 ± 0.8 <P=0.438>. CIN was found in 3 cases<6%>. Conclusion : Diagnostic angiogram is used as a map and IVUS guided PCI is significantly reduces contrast dose in CKD patient.