



PLATFORM OF LABORATORIES FOR ADVANCES IN CARDIAC EXPERIENCE

ROMA

Centro Congressi
di Confindustria

Auditorium
della Tecnica

9^a Edizione

30 Settembre

1 Ottobre
2022

IL PAZIENTE AD ALTO RISCHIO DI SANGUINAMENTO.

SCENARIO CLINICO 2: TRATTAMENTO DEL PAZIENTE HBR NON PROGRAMMATO

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Disclosure Statement of Financial Interest

I, Andrea Bezzeccheri, DO NOT have a financial interest/arrangement or affiliation with one or more organizations that could be perceived as a real or apparent conflict of interest in the context of the subject of this presentation.



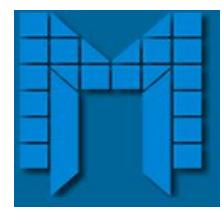
Clinical presentation and history

- 80-year old, male
- Inferior wall STEMIs (< 3 hours)
- Risk factors:
 - Hypertension
 - Dyslipidemia
 - Diabetes
- Mild anemia (Hb 10.2 g/dL)
- NVAF on VKA
- ESRD in extracorporeal dialysis
- Severe PAD
- Previous definitive PM

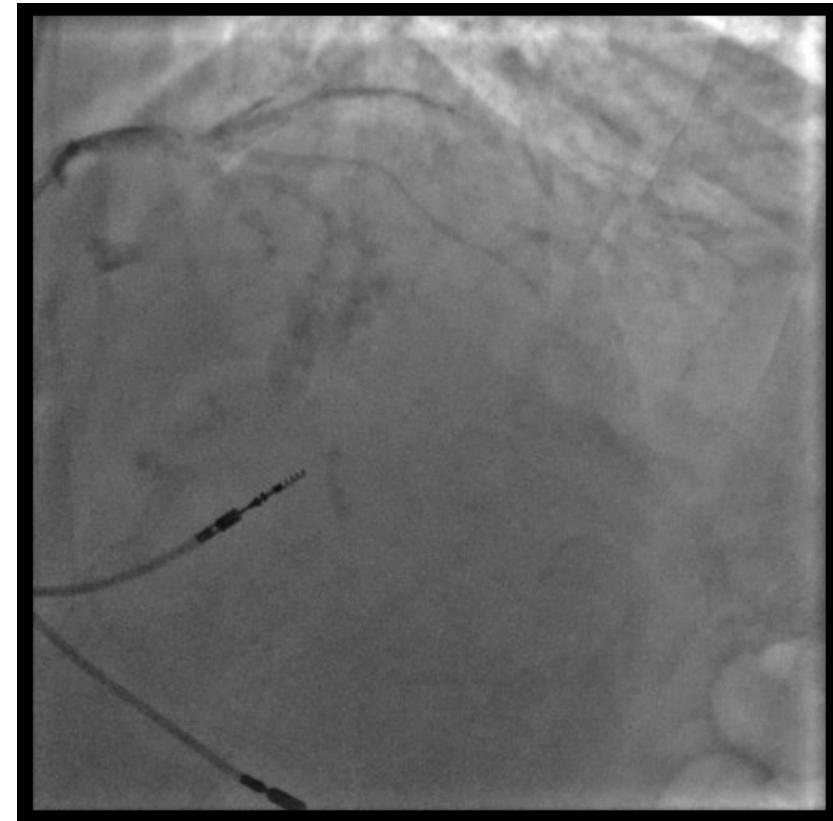
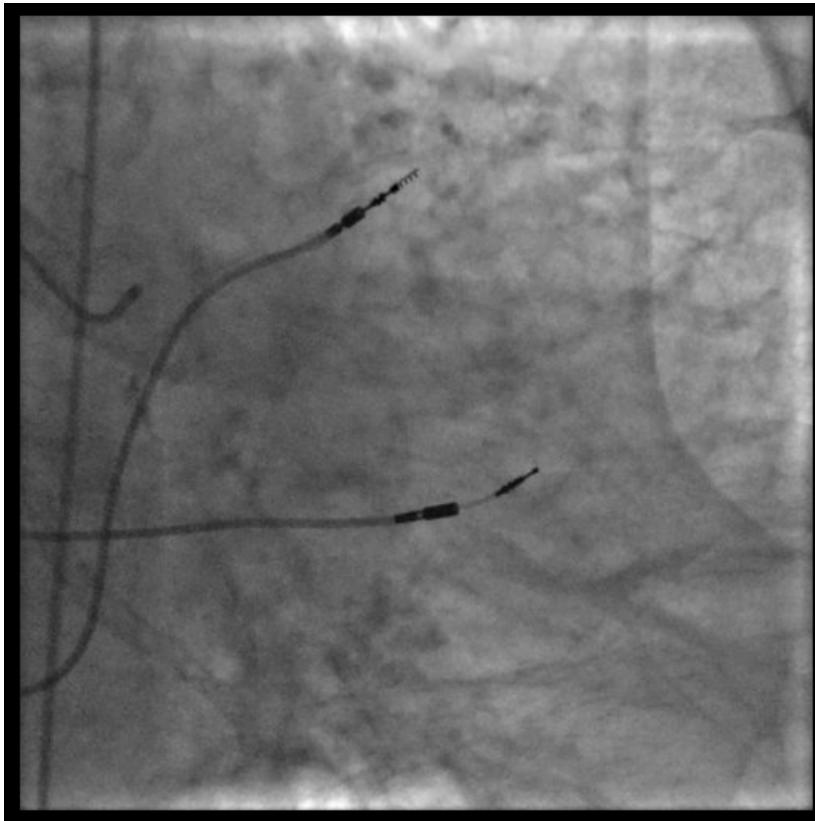


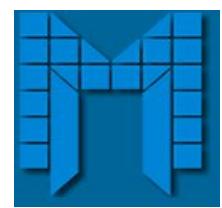
Hemodynamic status

- Systemic blood pressure = 110/70 mmHg
- HR = 80 bpm
- SpO2 = 95%
- Lactate = 1.1 mmol/L
- Severe LV dysfunction (EF <30%)
- Low-flow low-gradient aortic valve stenosis:
 - maximal gradient: 35 mmHg
 - effective aortic valve area: 0.7 cm²
- Trivial aortic regurgitation
- Moderate mitral regurgitation (2+)
- Moderate pulmonary hypertension (35 mm Hg)

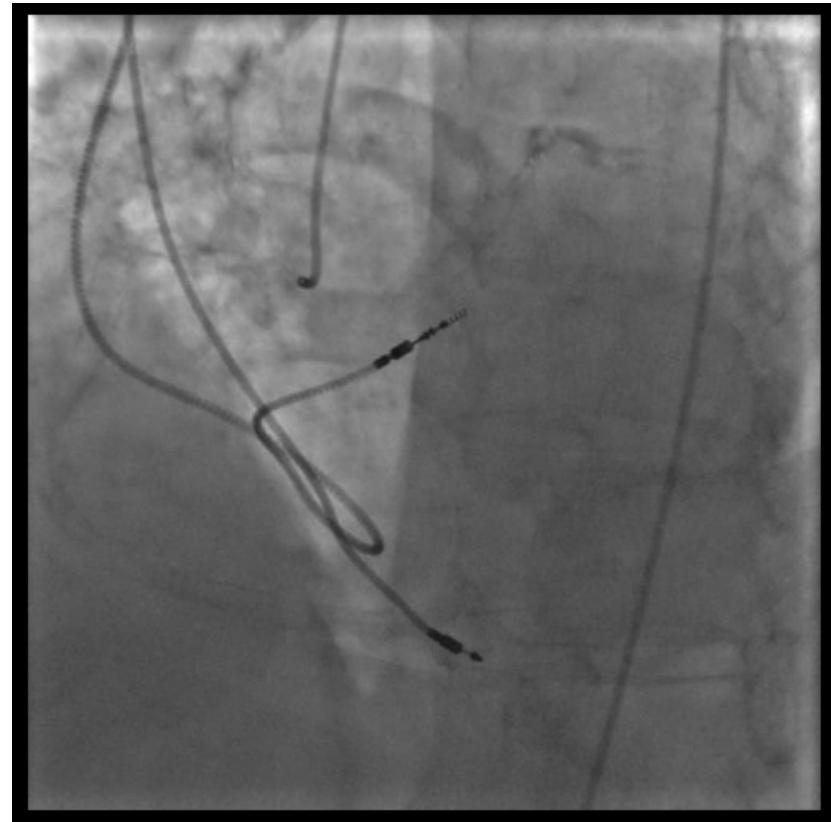
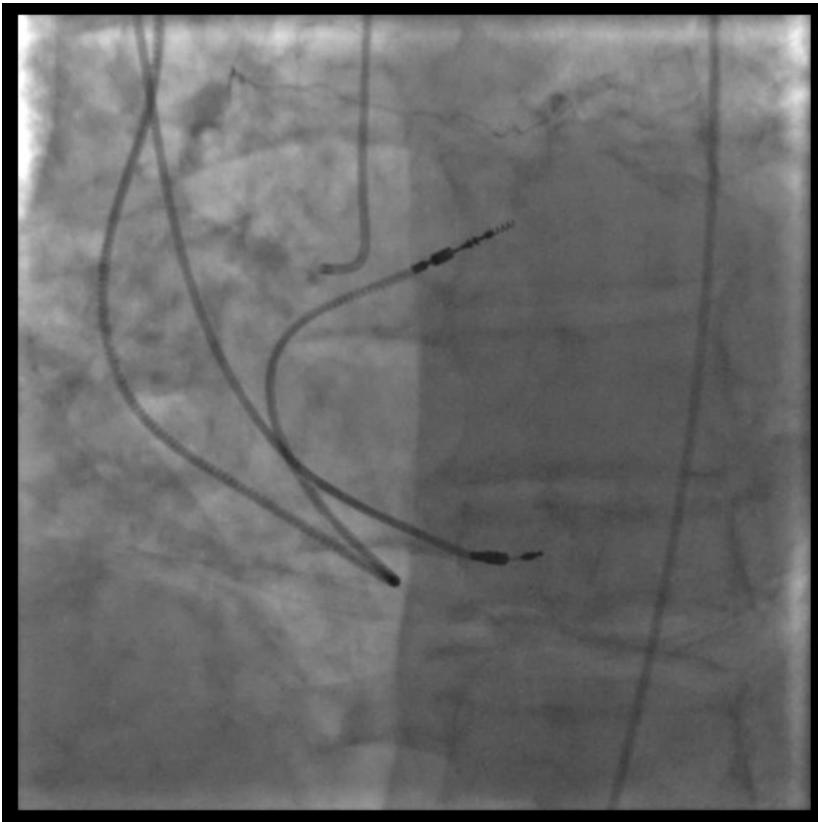


Coronary Angiography





Coronary Angiography





High Bleeding Risk





Treatment



Percutaneous treatment:
Primary PCI (RCA stenting)



Question 1



Cardiogenic Shock

Stage A

- Hemodynamic support?

- 1) Yes
- 2) No

- IABP or Impella?



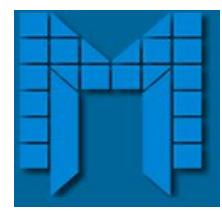
Question 2



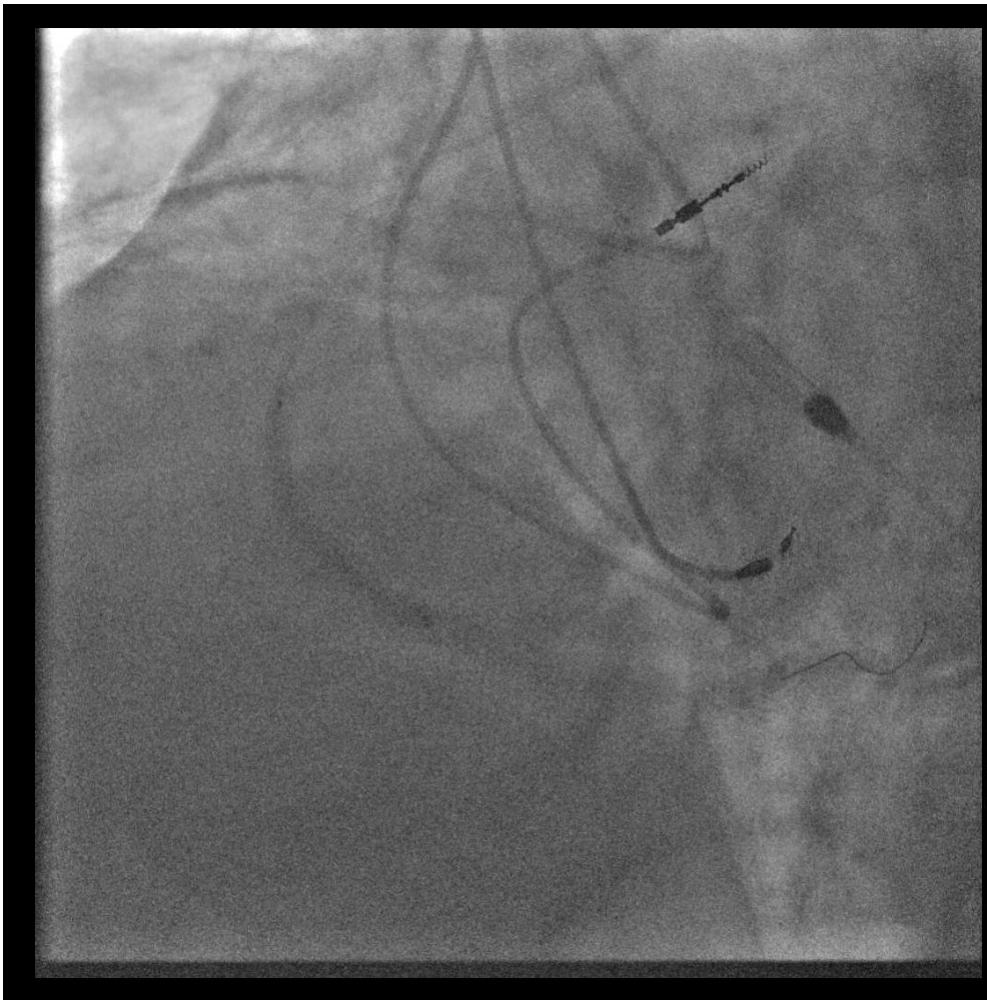
Stent Selection



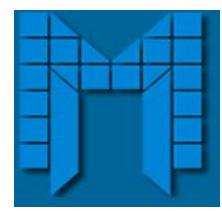
- **Biofreedom**
- **Resolute Onyx**
- **Xience**
- **Ultimaster**



DES implantation

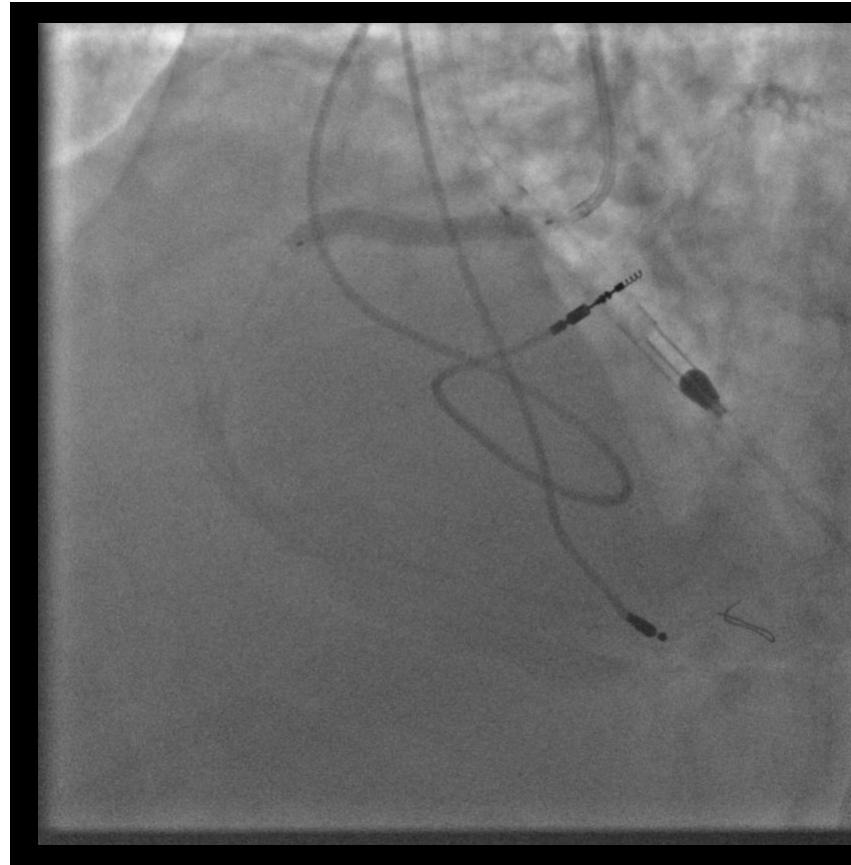


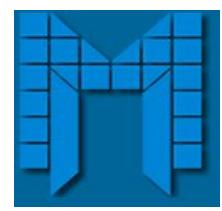
Resolute Onyx 3.5 x 38 mm



DES implantation

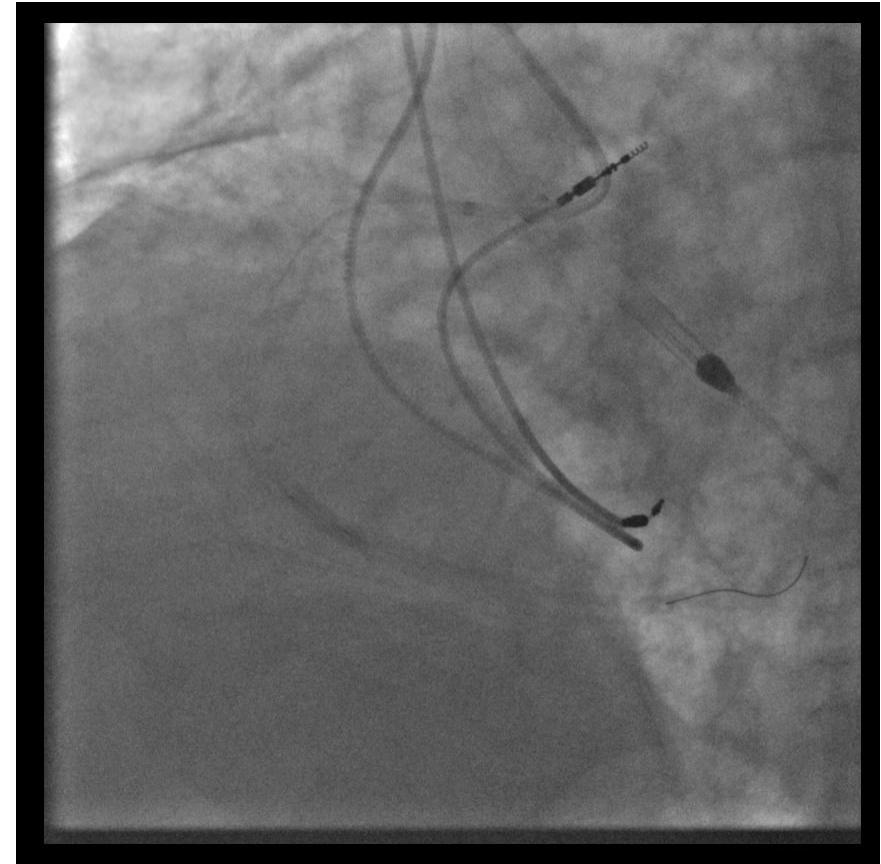
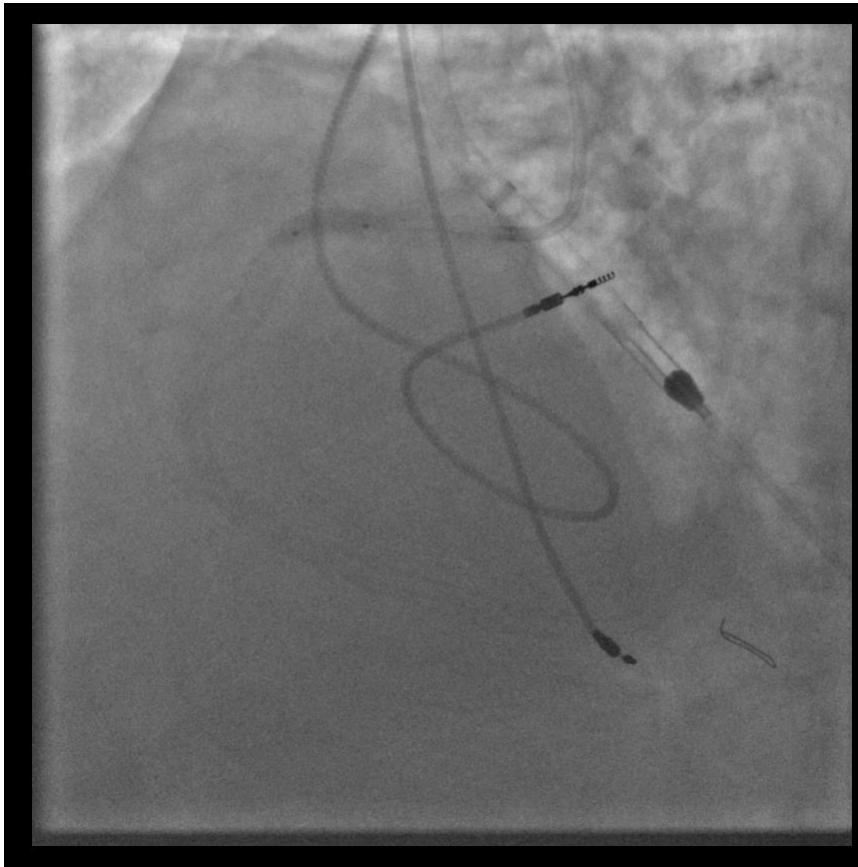
Resolute Onyx 4.0 x 30 mm

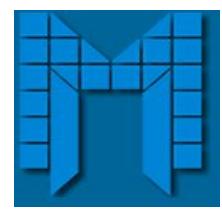




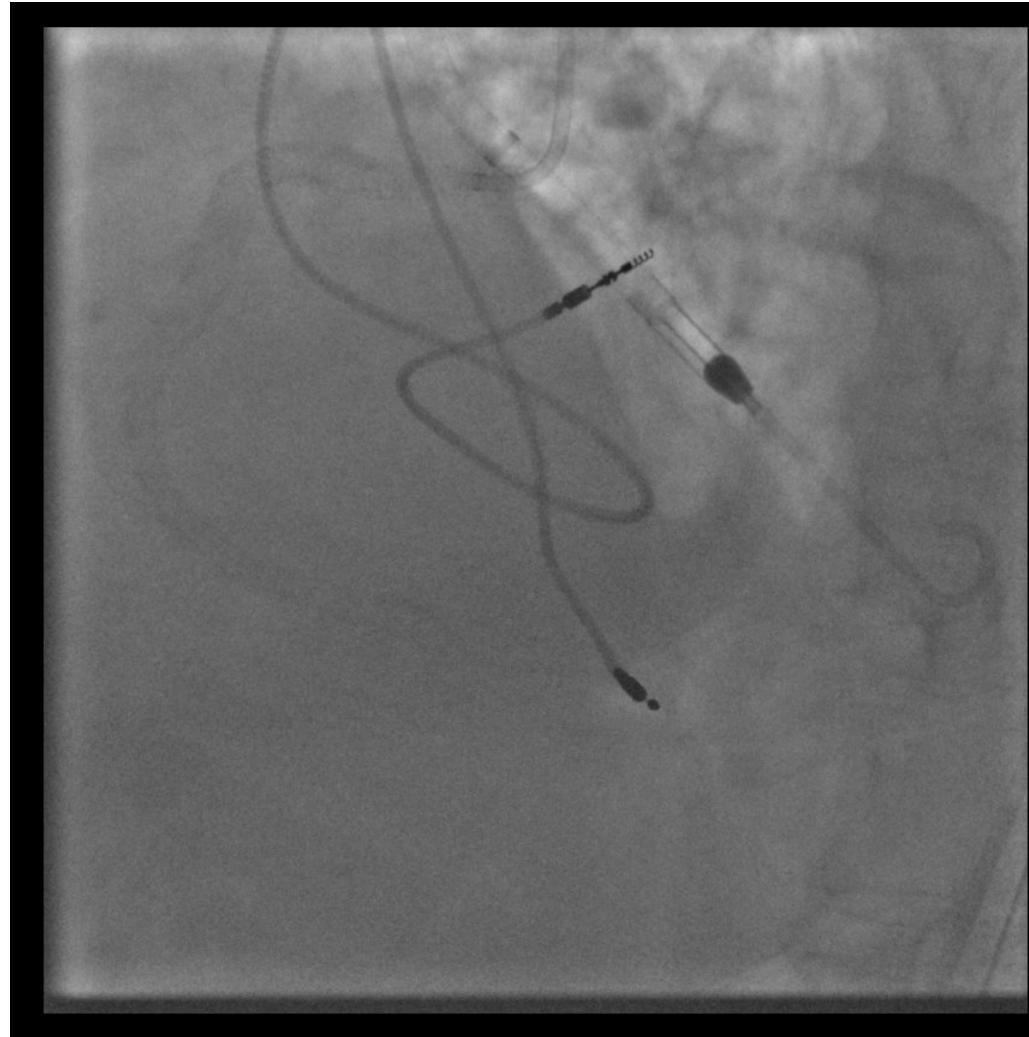
Postdilation

Accuforce 4-0 x 15 mm





Final result





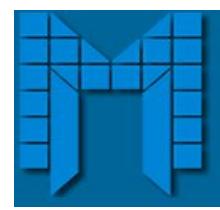
Question 3



Antithrombotic therapy

Risk score	Score	Predicted risk
Ischemic risk		
CHA ₂ D _s ₂ -VASc	5	10% stroke/TIA

Bleeding risk		
HAS-BLED	4	8.7/100 patient-year
ATRIA	9	5.8% annual risk
HEMORR ₂ HAGES	3	8.4/100 patient-year



Antithrombotic therapy

Drugs selection:

- 1) **Triple therapy (warfarin+DAPT)**
- 2) **Double therapy (OAC+SAPT)**

Therapy duration:

- 1) **1 month**
- 2) **6 months**
- 3) **12 months**