

论文

替罗非班对急性心梗患者PCI术后左室重构及近期预后的影响

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摘要:

目的 观察国产替罗非班对急性心肌梗死(AMI)患者行急诊经皮冠状动脉介入术(PCI)后左室重构及近期预后的影响。方法 本次研究收集了85例首次出现AMI并接受PCI术治疗的患者,随机分为对照组(常规治疗, n=40)和观察组(在常规治疗的基础上加用替罗非班, n=45)。应用心脏彩色多普勒超声技术测定第1天及第28天的左室射血分数(LVEF)、左室舒张末期内径(LVEDD)、左室舒张末期容积指数(LVEDVI)以及左室收缩末期容积指数(LVESVI),并进行比较;同时观察术后心绞痛、心力衰竭、心源性猝死等主要不良心血管事件(MACE)及出血事件的发生情况。结果 与对照组相比,观察组患者术后28d时LVEDVI、LVESVI、LVEDD减小, LVEF明显改善,且梗死后MACE发生率下降(P均<0.05),出血比例虽增加,但差异无统计学意义(P>0.05)。结论 替罗非班可以近期改善心室功能,抑制心室重构的演变,降低AMI患者的MACE事件发生率。同时,出血的风险无增加。

关键词: 心肌梗死, 急性; 替罗非班; 左室重构; 预后

Effects of tirofiban on the left ventricular remodeling and clinical outcomes in patients with acute myocardial infarction after emergency percutaneous coronary intervention

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Abstract:

Objective To investigate the effects of platelet glycoprotein IIb/IIIa inhibitor tirofiban on left ventricular remodeling and clinical outcomes in patients with acute myocardial infarction (AMI) who received primary percutaneous coronary intervention(PCI). Methods Eighty-five AMI patients on admission in emergency room were to be selected and divided into groups of control group(primary PCI alone, n=40) and experimental group(receiving primary PCI and tirofiban therapy, n=45). We evaluated the left ventricular ejection fraction(LVEF), left ventricular end-diastolic volume index(LVEDVI), left ventricular end-systolic volume index(LVESVI) and left ventricular end-diastolic dimension(LVEDD) of each patient by echocardiography at the time of admission and the 28 day after the onset of the AMI. At the same time, we recorded the frequency of major adverse cardiovascular events(MACE) and complications such as bleeding. Results Two groups on the effects of cardiac remodeling is not statistically significance at the 1 day, but it can be found there are significant differences in LVEF、LVEDVI、LVESVI and LVEDD in experimental group on the 28 day(P<0.05). And the MACE rates are significantly reduced in tirofiban group. But there is not discrepant in the rate of bleeding. Conclusion Adjunctive therapy with tirofiban for patients with AMI who underwent emergency PCI significantly improves left ventricular function and clinical outcomes during both hospitalization and 28 days' follow-up. But the rate of bleeding complication is proportionable.

Keywords: Myocardial infarction, acute; Tirofiban; Left ventricular remodeling; Outcomes

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