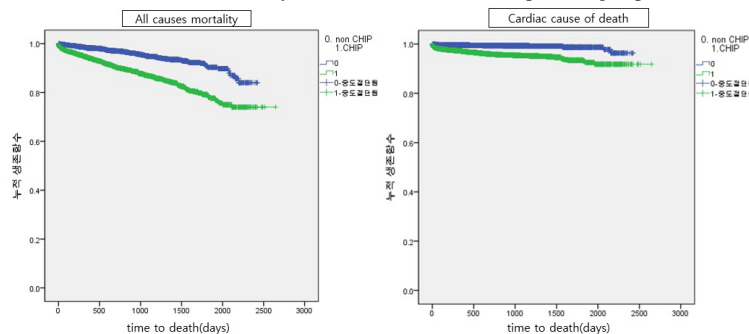


Comparison of survival rates according to indicators in complex higher risk and indicated patients

가톨릭대학교 성바오로병원 내과

*안영철

Background/Aims: CAD is a leading cause of morbidity and mortality in the developed world. Through advances in percutaneous interventional techniques and improvements in patients selection, current PCI may allow appropriate patients to benefit safely from revascularization procedures that might not have been offered in the past. We evaluate prognostic effect of indicators in complex higher risk and indicated patients. **Methods:** We reviewed the the medical records of all outpatients and inpatients who have underwent revascularization procedures at Seoul St. Mary's hospital. The catholic Univ. of Korea, between January 2005 and December 2010, identifying 6730 patients. This study included patients who underwent PCI and excluded patients who received CABG or POBA. **Results:** A total of 6730 eligible patients who have underwent revascularization procedures. Complex higher risk and indicated patients(CHIP) is satisfied meets at least one of following conditions: first one is age over 19 years old. The second one is clinical factor, such as, DM, CKD included eGFR less 60ml/L HD, PD and PSKT. The third one is anatomical or procedural factor included LM disease, CTO, bifurcation lesion with more than three vessels, stent implanted more than three stents or long lesion over 60mm of stent length. When all cause mortality of CHIP with nonCHIP, p-value <0.000 shows a significant difference and non CHIP shows superior survival(Figure 1.) The cardiac death was regarded as end point, the 2 year survival rate in CHIP was 96.3% and the 2 year survival rate in nonCHIP was 91.8%. In this case as well as the previous comparison, comparing the rate of cardiac death in CHIP with nonCHIP, p-value <0.000 shows a significant difference and non CHIP shows superior survival(Figure 2). **Conclusions:** Our study showed that the poor survival benefit in CHIP groups. In CHIP patients, mortality is high in all causes of mortality, So careful observation and more skilled techniques are needed in future interventions. Further analysis of PCI and CABG in this patients' group will be needed in the future.



Effect of Lumbar Elevation on Dilatation of the Central Veins in Normal Subjects

동아대학교

*이재훈, 구영진

Background/Aims: Increasing the size of the central veins is required to increase the success rate of central line placement and decrease complication risk. Right-sided approach for the central veins, Valsalva maneuver, and Trendelenburg position have been recommended, but these may not be available for some cases. This study aimed to determine a more convenient patient position that can result in the largest central vein diameter. **Methods:** Recruited subjects were placed in 60 and 30 upper body elevation, supine position, and 30 and 60 lower body elevation, and lumbar elevation (LE) was consecutively performed, with one position maintained for 10 min. Diameters of the sub-clavian vein (SCV) and internal jugular vein (IJV) were measured using high-resolution two-dimensional ultrasonography at each position. **Results:** The most suitable position on the ordinary bed for increasing central vein diameter was LE. The maximum and minimum SCV and IJV diameters in LE were significantly larger than those in the supine position (SCV: coefficients -0.633 and -0.863, $p=0.08$ and 0.011 , respectively; IJV: coefficients -1.09 and -1.15, $p<0.001$ and $=0.001$, respectively). Leg elevation for 10 min failed to dilate the central vein diameter. **Conclusions:** The LE without leg elevation produced a greater and more significant increase in central vein diameter than the supine position and may be useful for central line placement.

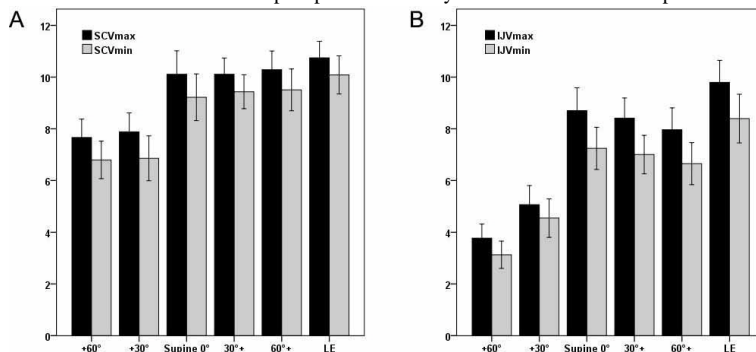


Table 2. Comparison of supine position with other positions in the diameters of central veins

		Coefficient	Standard error	95% CI	p [*]
SCV max	30°+	0	0.3297	(-0.646, 0.646)	1
	60°+	-0.177	0.3611	(-0.884, 0.531)	0.625
	LE (-15°)	-0.633	0.3615	(-1.342, -0.075)	0.08
	SCV min				
SCV min	30°+	-0.213	0.303	(-0.807, 0.380)	0.481
	60°+	-0.286	0.3566	(-0.984, 0.413)	0.423
	LE (-15°)	-0.863	0.3414	(-1.533, -0.194)	0.011
	IJV max				
IJV max	30°+	0.29	0.2708	(-0.241, 0.821)	0.284
	60°+	0.74	0.2807	(0.19, 1.29)	0.008
	LE (-15°)	-1.093	0.2836	(-1.649, -0.538)	< 0.001
	IJV min				
IJV min	30°+	0.24	0.2749	(-0.299, 0.779)	0.383
	60°+	0.59	0.3139	(-0.025, 1.205)	0.06
	LE (-15°)	-1.150	0.3436	(-1.824, -0.476)	0.001