Fakultät für Medizin

Dokumenttyp: journal article

Autor(en) des Beitrags: Dibra, A; Mehilli, J; Schwaiger, M; Schühlen, H; Bollwein, H; Braun, S; Neverve, J; Schömig, A; Kastrati, A

Titel des Beitrags: Predictive value of basal C-reactive protein levels for myocardial salvage in patients with acute myocardial infarction is dependent on the type of reperfusion treatment.

Abstract: AIMS: To evaluate whether C-reactive protein (CRP) levels on admission are predictive of myocardial salvage achieved with different reperfusion strategies in patients with acute myocardial infarction (AMI).

METHODS AND RESULTS: Patients with AMI treated with stenting plus abciximab (n=125) and thrombolysis alone (n=54) or with abciximab (n=71) were prospectively studied. CRP levels were measured by a high sensitivity assay. The threshold of the upper quartile (12 mg/l) was used to divide patients into two groups: 60 patients with high CRP (>12 mg/l) and 190 patients with low CRP (< or =12 mg/l). Myocardial salvage was measured by technetium (Tc)-99(m)sestamibi scintigraphy. Patients in the high CRP group had a significantly lower salvage index (0.35+/-.42 vs 0.48+/-.34, p=0.01) and higher 18-month mortality (11.7 vs 3.2%, p=0.03) compared to those in the low CRP group. While basal CRP was not related to myocardial salvage in patients treated with stenting plus abciximab (p=0.89) or thrombolysis plus abciximab (p=0.43), a high CRP on admission was associated with a significantly lower salvage index (0.09+/-.048 vs 0.42+/-.037 in the low CRP group, p=0.006) among patients treated with thrombolysis alone.

CONCLUSION: CRP levels on admission may predict the efficacy of reperfusion in patients with AMI. The
predictive ability is dependent on the form of reperfusion therapy.