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IC004

Interventional Cardiology & Catheterization • Poster Presentation

PRIMARY PERCUTANEOUS CORONARY INTERVENTION IN ACUTE STEMI TWO YEARS OLD EXPERIENCE AT NIZAMIYE HOSPITAL

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Background: Primary percutaneous coronary intervention (PCI) is the preferred reperfusion strategy in acute ST-elevation myocardial infarction (STEMI). Achieving timely reperfusion is essential, particularly in resource-limited environments.

Methods: We retrospectively analyzed consecutive STEMI patients undergoing primary PCI at Nizamiye Hospital between May 2024 and May 2026. Demographic, procedural, and in-hospital outcome data were collected. Continuous variables are expressed as mean ± SD; categorical variables as percentages.

Results: Eighty-two patients were included. Mean time from first medical contact to wire crossing was 42 ± 8 minutes. Anterior STEMI was most frequent (58%), followed by inferior (38%) and other localizations (4%). The left anterior descending artery was the most common culprit vessel (56%), followed by the right coronary artery (25%), left circumflex (21%), and others (8%). Radial access was used in 93.9% of cases. In-hospital mortality was 1.2%.

Conclusion: This two-year experience demonstrates that rapid reperfusion and radial-first strategies can be consistently achieved in a resource-limited setting, yielding excellent outcomes. System optimization, early recognition, and adherence to guideline-directed PCI protocols are critical to improving survival in STEMI.

Keywords: STEMI, PCI, Door-to-wire time, Coronary artery disease, Nigeria