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Directional coronary atherectomy at the Toronto and Mount Sinai Hospitals: report of the initial 120 procedures.

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Abstract: To assess the procedural success and complication rates of the first 120 directional coronary atherectomy cases performed at two Toronto hospitals.

Case series in tertiary referral centres.

One hundred and thirteen patients in whom 120 atherectomy procedures were attempted between July 1990 and April 1992.

Directional coronary atherectomy.

Angiographic success was obtained in 115 of 120 procedures (96%) involving 117 of 123 lesions (95%). Procedural success (angiographic success without death, myocardial infarction or coronary bypass surgery) was obtained in 110 of 120 procedures (92%). Adjunctive balloon angioplasty was required in 20 procedures (17%). There was one death at 36 h in an elderly patient who underwent an emergency procedure while in cardiogenic shock. Periprocedural non-Q wave myocardial infarction occurred in five patients. There were no Q wave myocardial infarctions. Three patients required coronary bypass surgery prior to discharge and vascular complications occurred in five patients.

Directional coronary atherectomy can be performed with procedural success and complication rates comparable to conventional balloon angioplasty. Randomized trials are underway to determine if atherectomy results in a lower restenosis rate.

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