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Abstract

Background CULPRIT-SHOCK the trial, In angiographic core laboratory (C independent reviewed the coronary angiograms of the participan admitted with acute myocardial infarction complicate by cardiogenic shock.

Purpose To assess the concordance between CL and site investigator (SI) evaluations of the culprit artery TIMI flow grade (TFG), and their respective prognostic values.

Methods CL adjudicators blindly evaluated pre- ar post-PCI TFG of the culprit lesion. The concordance with SI was determined by Cohen's Kappa coefficient. multivariate analysis was used to evaluate the facto of discordance and the association of each evaluation with 30-day and 1-year mortality.

Results In total, 663 (96.8%) patients were eligible f this analysis. Among the 214 patients with pre-PCI T 3 adjudicated by CL, SI under-graded the coronary flo to TFG 0-1-2 in 121 (56.5%). Among the 139 patien with post-PCI TFG 0-1-2 as adjudicated by CL, SI over graded the results to TFG 3 in 79 (56.8%). Overall, pr and post-PCI coefficient of agreements were κ =0.4 95%CI [0.36; 0.51] and κ=0.44, 95%CI [0.35; 0.53 respectively (figure 1). Mechanical circulatory suppo and culprit left main were factors of discordance post-PCI TFG (figure 2). Post-PCI TFG 0-1-2 w associated with 30-day mortality regardless of t evaluation method (SI or CL), and with 1-year mortali only when evaluated by SI (figure 3).

Conclusion In cardiogenic shock patients undergoin PCI, the level of agreement between CL and SI moderate. SI frequently overestimates pre-P coronary slow flow and procedural success. However, both evaluations predict 30-day mortality, while only SI grading is associated with 1-year mortality.

Investigator versus Core Lab Evaluation of Coronary flow and Related **Mortality in the CULPRIT-SHOCK trial**

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20	Table 1. Baseline charac				Figure	1. Agreement bet	ween Co	re Lab and	Site	
all ^l \	Study Population			CUI						
~L)	n=663	8					-	Site invest	tigator disag	grees
nts	Age (years) – n=663	68.5 ± 11.5					10	Site invest	tigator agree	es wi
ed	Female	156/663 (23.5%)								
	Risk factors			Refor						
	Active smoking	171/638 (26.8%)		Deloi	EFCI					
	Hypertension	391/651 (60.1%)		500						
	Diabetes	208/649 (32.0%)		500		- 440				
	Presentation					n=440				
	Fibrinolysis < 24 hours before	22/660/100/1				22 (5%)				
C	randomization	52/000 (4.8%)		400					- 1]	
L	Resuscitation before randomization	352/661 (53.3%)	te	2			K=0.44, 95%CI	[0.36; 0.	21]	lts
	STEMI	404/643 (62.8%)	ien	<u>u</u>						tier
	Signs of impaired organ perfusion		pat							pat
	Altered mental status	445/660 (67.4%)	of	5 300					,	of
nd	Cold clammy skin and limbs	455/652 (69.8%)	PL	<u>n</u>			n-214			Der
		165/639 (25.8%)	h				n=214			ar a
	Artorial lactatos 2 mmol/l	103/033 (23.070)	N	200		<mark>418 (95%)</mark>		_	8	Nu
. A	Creatining clearance (ml (min)	427/043(00.470)								
arc	Creatinine clearance (mL/min)	05.0 [42.4; 95.2]					121 (56.5	5%)		
J12	Number of affected vessels			20202						
on	Triple vessel disease	420/663 (63.3%)		100						
	Vessel related to the infarction *						93 (43.59	%)		
	LM	60/663 (9.0%)								
	LAD	276/663 (41.6%)		0						
for	LCx	140/663 (21.1%)				Core Lah	Corela	h		
	RCA	180/663 (27.1%)				TEG 0-1-2	TEG 2			
FG	Chronic total occlusion *	156/663 (23.5%)				110 0-1-2	IFGS			
אור	Procedural characteristics						Figure 2 Acces	otion hot	waan nast	
	Femoral arterial access	547/663 (82.5%)					rigure 5. Associa		ween post-	
nts	Mechanical circulatory support	190/663 (28.7%)					mo	ortality ac	cording to	Lore
er-										
								AdjOR*	95% Cl	1
re-	Figure 2. Independent factors of	disagreement between Core La	ab	and Site			_			
14.	ln	nvestigator				TFG 0-1-	2 according to CL	1.78	1.13 - 2.80)
ว ไ										
3],						TFG 0-1-	2 according to SI	2.48	1.42 - 4.37	2
ort							-			
of	Femoral access									
UI										
/as	Fibrinolytic therapy									
ho										
IIE										-
ity	Afte	er PCI				IFG 0-1-2	according to CL	1.42	0.89 - 2.27	/
	Culprit Left main stem					TFG 0-1-2	2 according to SI	1.95	1.09 - 3.49)
ng	Machanical airculatory august									
ic	meenamear cheulatory support									
15										
PCI		0 1 2 3 4 5 6								
or		aOR [95%Cl]								

The CULPRIT-SHOCK trial was supported by a grant agreement (602202) from the European Union Seventh Framework Program, by the German Heart Research Foundation and the German Cardiac Society. The current substudy was led by the ACTION Study Group at the Institute of Cardiology of Pitié-Salpêtrière. Hospital. Full Disclosures available at www.action-<u>coeur.org</u>). *Corresponding author: gilles.montalescot@aphp.fr



