

No lasting benefit for follow-up coronary angiography after PCI

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(HealthDay)—For patients who have undergone percutaneous coronary

intervention (PCI), routine follow-up coronary angiography (FUCAG) has no long-term clinical benefit, according to a study published online Jan. 1 in *JACC: Cardiovascular Interventions*.

Hiroki Shiomi, M.D., from Kyoto University in Japan, and colleagues examined the long-term clinical impact of routine FUCAG after PCI in a prospective multicenter open-label randomized trial. Participants who underwent PCI were randomly allocated to routine angiographic follow-up (AF), in which they received FUCAG at eight to 12 months after PCI, or clinical follow-up alone (CF). Seven hundred [patients](#) were enrolled and randomized to AF (349 patients) or CF (351 patients).

The researchers found that the cumulative five-year incidence of the primary end point (composite of death, myocardial infarction, stroke, emergency hospitalization for [acute coronary syndrome](#), or hospitalization for heart failure) was 22.4 and 24.7 percent in the AF and CF groups, respectively (hazard ratio, 0.94; 95 percent confidence interval, 0.67 to 1.31; $P = 0.7$). Within the first year, any [coronary revascularization](#) was performed more frequently in the AF group than the CF group (12.8 versus 3.8 percent; log-rank P

"Routine FUCAG cannot be recommended as a clinical strategy," the authors conclude. "However, the present study was underpowered to detect modest benefits (or harm) of routine FUCAG, and larger scale trials (especially in high-risk patients) are warranted to definitively address this issue."

One author disclosed ties to Boston Scientific Corp.

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