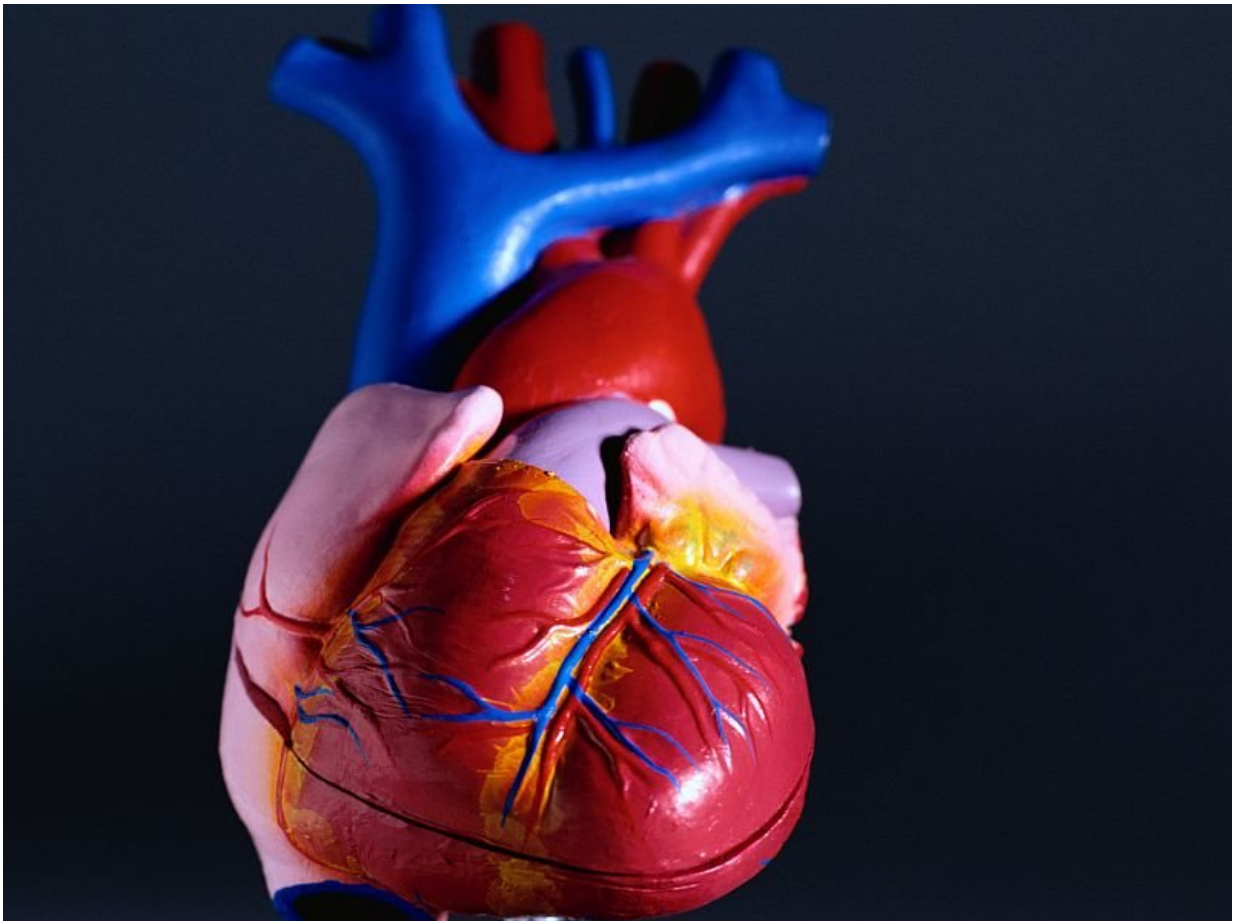


CABG may be best for patients with DM, LV dysfunction

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(HealthDay)—Coronary artery bypass grafting (CABG) is associated

with a significant reduction in major adverse cardiac and cerebrovascular events and mortality compared with percutaneous coronary intervention (PCI) among patients with diabetes mellitus (DM), multivessel coronary artery disease (CAD), and left ventricular dysfunction (LVD), according to a study published in the Feb. 27 issue of the *Journal of the American College of Cardiology*.

Jeevan Nagendran, M.D., Ph.D., from the University of Alberta in Canada, and colleagues evaluated whether treatment with PCI or CABG leads to improved outcomes in patients with DM, CAD, and LVD. Patients in the study underwent isolated CABG without a concomitant procedure or PCI between Jan. 1, 2004, and March 31, 2016. The researchers included 2,837 patients in the study analysis and 1,738 in propensity-score matched analysis.

The researchers found that compared to CABG, PCI was associated with a higher risk for major adverse cardiac and cerebrovascular events at five years in patients with [ejection fraction](#) (EF) 35 to 49 percent and

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