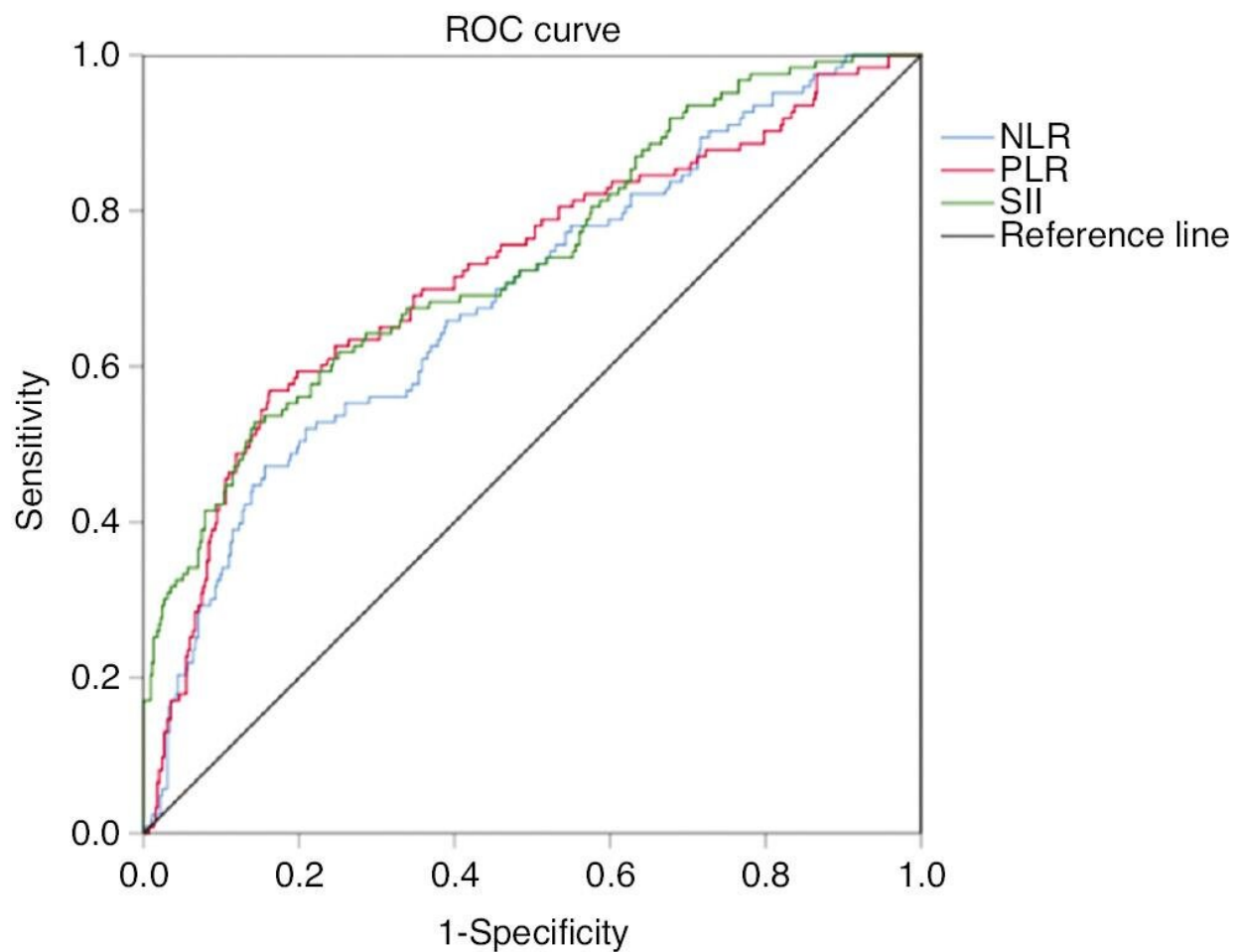


# Predicting no-reflow phenomenon after primary percutaneous coronary intervention in older patients with STEMI

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ROC Curve Analysis. Credit: *Cardiovascular Innovations and Applications* (2023). DOI: 10.15212/CVIA.2023.0005

Coronary no-reflow phenomenon (NRP), a common adverse complication in patients with ST-segment elevation myocardial infarction (STEMI) treated by percutaneous coronary intervention (PCI), is associated with poor patient prognosis. In this study, the correlation between the systemic immune-inflammation index (SII) and NRP in older patients with STEMI was studied, to provide a basis for early identification of high-risk patients and improve their prognosis.

Between January 2017 and June 2020, 578 [older patients](#) with acute STEMI admitted to the Department of Cardiology of Hebei General Hospital for direct PCI treatment were selected for this retrospective study. Patients were divided into an NRP group and normal-flow group according to whether NRP occurred during the operation. Clinical data and the examination indexes of the two groups were collected. Logistic regression was used to analyze the independent predictors of NRP, and the receiver operating characteristic curve was used to further analyze the ability of SII to predict NRP in older patients with STEMI.

Multivariate logistic analysis indicated that hypertension (OR=2.048, 95% CI:1.252–3.352, P=0.004), lymphocyte count (OR=0.571, 95% CI:0.368–0.885, P=0.012), platelet count (OR=1.009, 95% CI:1.005–1.013, P

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