

CABG underused in diabetes with multivessel disease

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(HealthDay)—About one-third of patients with diabetes mellitus and

multivessel coronary artery disease presenting with non-ST-segment elevation myocardial infarction undergo coronary artery bypass graft (CABG) and more undergo percutaneous coronary intervention (PCI), according to a study published online May 10 in *Circulation: Cardiovascular Quality and Outcomes*.

Ambarish Pandey, M.D., from the UT Southwestern Medical Center in Dallas, and colleagues compared in-hospital use of different revascularization strategies in patients with diabetes mellitus with non-ST-segment elevation [myocardial infarction](#) with multivessel [coronary artery disease](#) between July 2008 and December 2014. Data were included for 29,769 patients from 539 hospitals, of whom 36.4, 46.2, and 17.3 percent were treated with CABG, PCI, and without revascularization, respectively.

The researchers found that over the study period there was an increase in the overall use of revascularization; the proportion undergoing PCI increased (45 to 48.9 percent; $P_{\text{trend}} = 0.0002$), while there was no change in the proportion undergoing CABG (36.1 to 34.7 percent; $P_{\text{trend}} = 0.88$). Participating hospitals had significant variability in the use of PCI (22 to 100 percent) and CABG (0 to 78 percent) (both P

"Future studies focused on risk perception of patients and operator-level practice patterns are needed to better understand the drivers of the observed variability in revascularization practice in this patient population," the authors write.

Several authors disclosed financial ties to the pharmaceutical and medical device industries.

More information: [Abstract](#)
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