Implementation of primary PCI in the management of STEMI in Egypt

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In a new publication from *Cardiovascular Innovations and Applications*, Sameh Shaheen, Ayman Helal, and Islam Anan from Ain Shams University, Cairo, Egypt, Fayoum University, Fayoum, Egypt, and Queen Alexandra Hospital, Portsmouth, UK consider barriers to the implementation of primary PCI in the management of STEMI in Egypt.

Evidence-based guidelines recommend primary percutaneous coronary intervention (PPCI) be the mainstay reperfusion strategy for the treatment of ST-segment elevation myocardial infarction (STEMI) if it is performed in the proper time window. The aim of the present study, through a quantitative questionnaire, is to explore the current practice of STEMI management in Egypt, and to identify the barriers, opportunities, and potential areas for improvement.

A questionnaire was conducted in Egypt via face-to-face qualitative in-depth interviews with cardiologists from 14 PPCI-capable hospitals and 26 non-PPCI-capable hospitals. Participants were selected in view of their experience and knowledge. The study identified potential barriers to the implementation of PPCI among STEMI patients in Egypt. These barriers included the prehospital patient delay and emergency medical service delay, delay in the emergency department and delay in patient transfer to the CCU, unavailable equipment, catheterization laboratory activation delay, lack of trained interventional cardiologists, lack of regional STEMI networks and hospital policies, and insufficient ICU beds.


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