

How to treat diabetes in China

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Current status of Diabetes in China

Year Ranking	Country	2000 People with diabetes(millions)	2030
1	India	31.7 150%	79.4 +150%
2	China	20.8 103%	42.3 +103%
3	US	17.7 +71%	30.3

Case presentation : clinical features

- * 71 yr., gentleman**
- * Unstable angina(CCAS IV), 3 weeks**
- * Risk factors: EH, DM, e-GFR 31%**
- * Resting EKG: ST-avR elevation, ST-V2-6 depression**
- * Cardiac echo: LVDd 58mm, EF 42%**
- * Respiratory function: FEV1 32**
- * Repeat ischemic stroke within 3 months**

Medication

- * Insulin, 48 U/d x 2 yeas**
- * Metropronol: 47.5mg/d**
- * ACEI(Valsartan): 10mg/d**
- * Atovarstatin: 20mg/d**
- * Nitroglycerin(long-lasting): 50mg/d**
- * Aspirin: 100mg/d**
- * Plavix: 75mg/d**

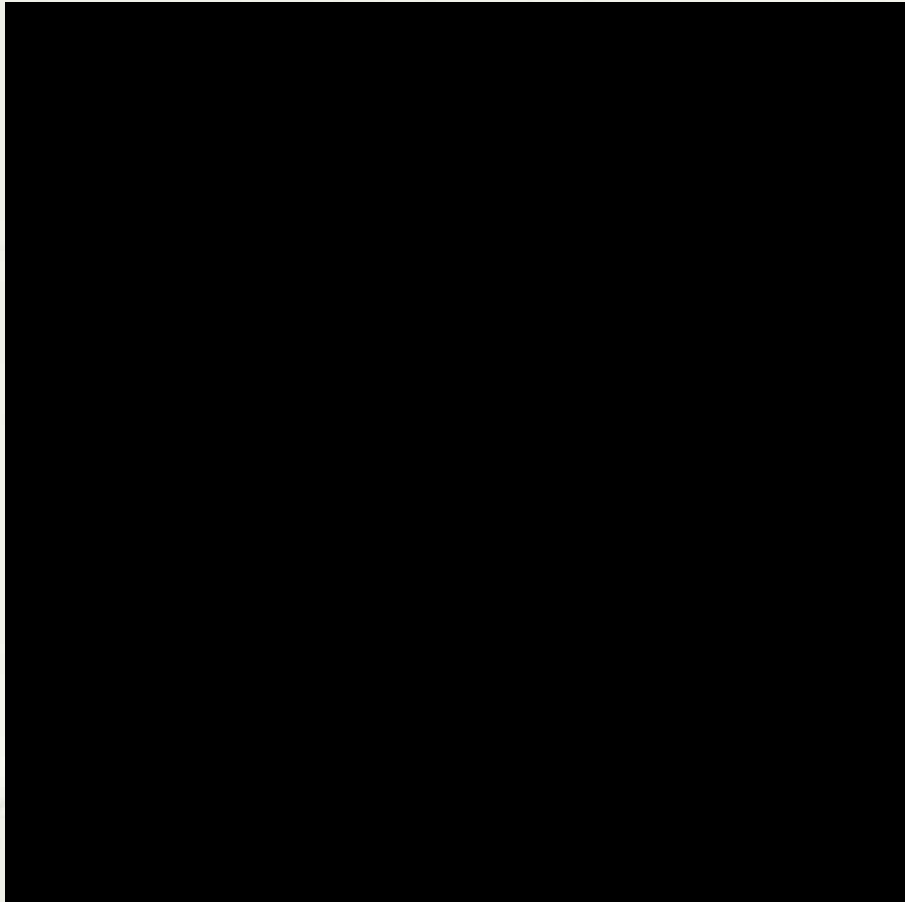
laboratory tests at admission

- * For DM,**
 - * fasting blood glucose: 7.3~8.1mmol/L**
 - * 2hr. blood glucose: 13.7~16.5mmol/L**
 - * hb1C: 7.2**
- * HDL 73.6 mg/dl**
- * LDL 365.44 mg/dl**
- * CRP-hs 2.78 mg/dl**
- * Serum Cr. 212 mg/dl**

Non-invasive diagnosis

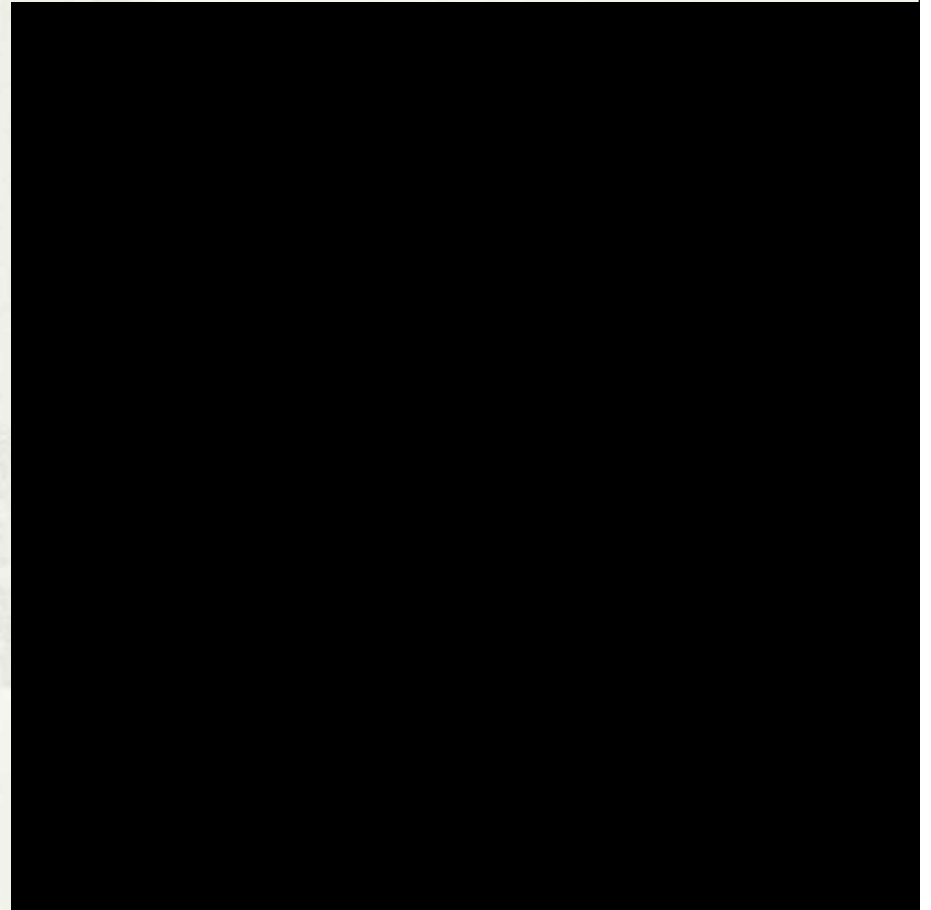
- * Electron computational tomography**
 - extensive reversible myocardial ischemia(anterior, inferior, septal, posterior wall)**
- * Dual-source CTA**
 - diffuse disease at RCA**
 - possible LMTd bifurcation lesions**

Baseline Angiogram



AP+Caudal

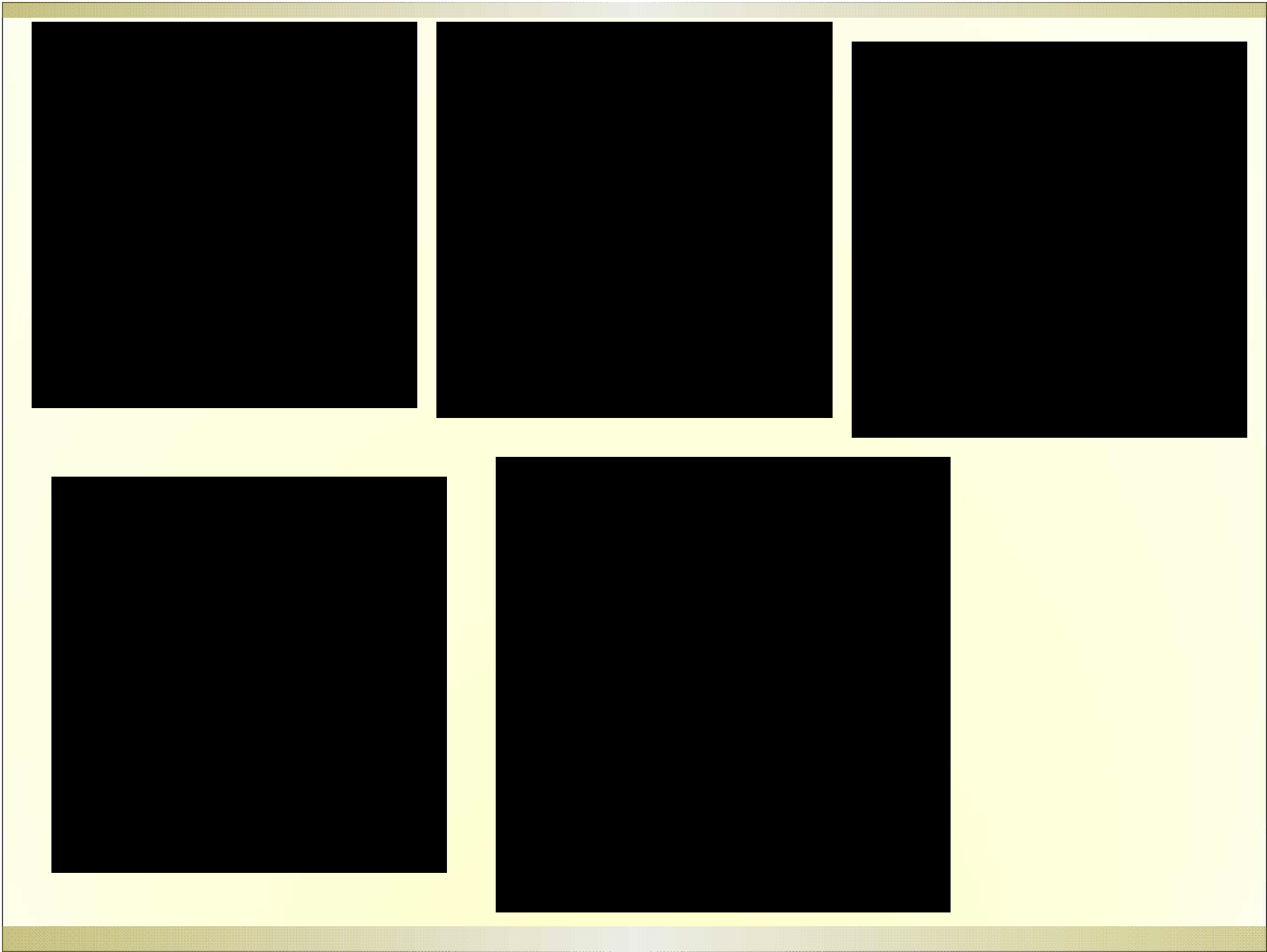
Ap+Cranial



RAO+Caudal

Spider view

LAO for RCA



SYNTAX score

- * Final score: 67 scores
- * Question 1:
favors CABG?

Reluctance from surgeon

- * Renal dysfunction
- * Reduced respiratory function
- * Diffuse RCA lesions

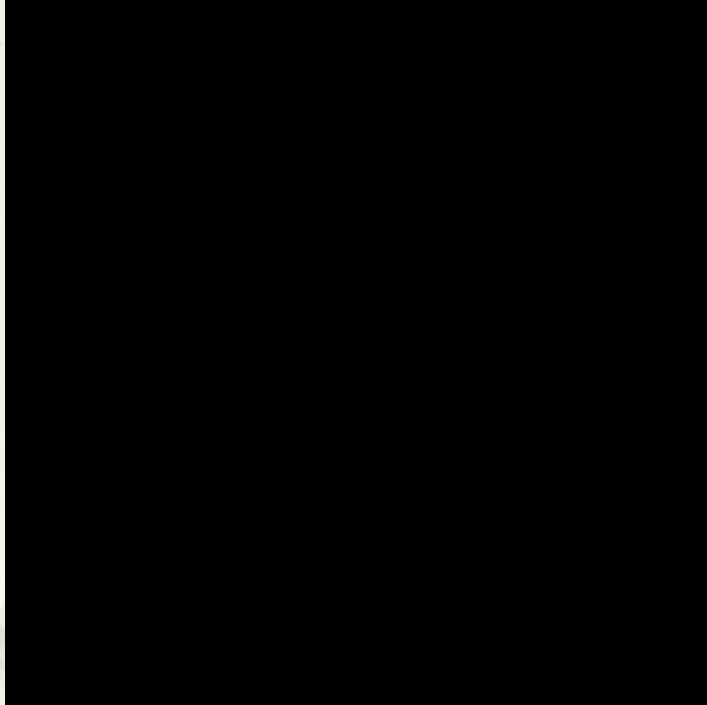
- * **Question 2:**

Hybrid Procedure? Refused by patient
PCI

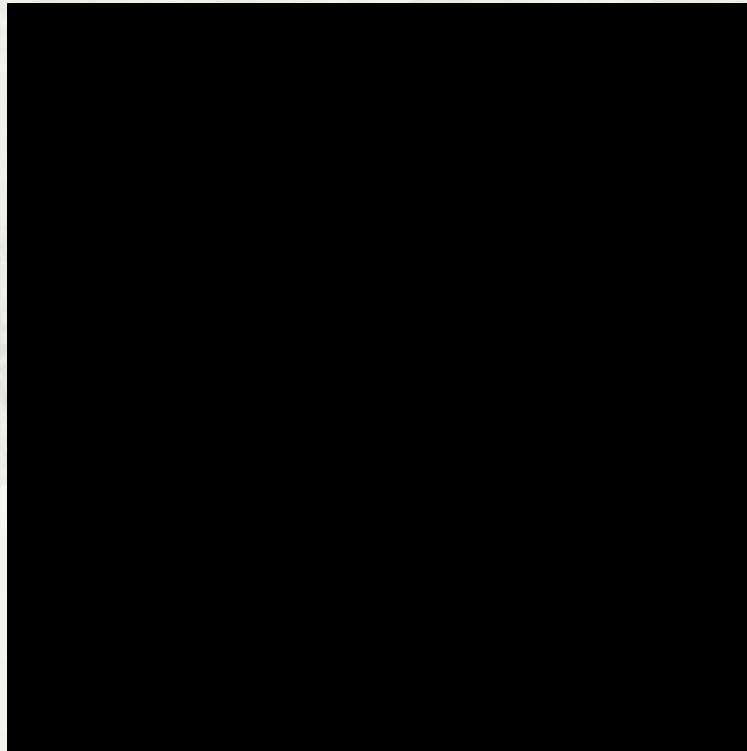
Question 3: strategy?

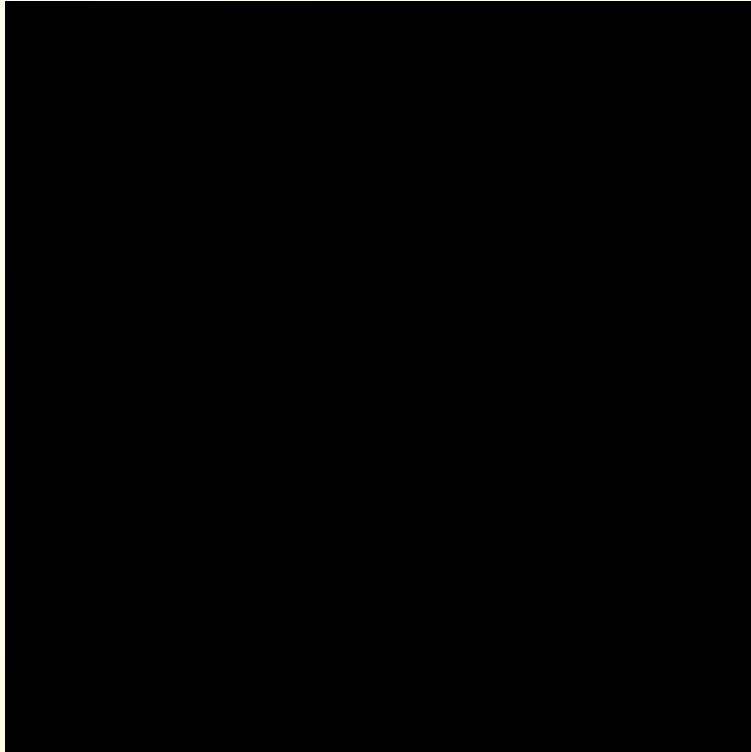
- * **First RCA or LAD+LCX?**
- * **Stenting technique for LAD+LCX?**

Stenting LM –culotte stenting



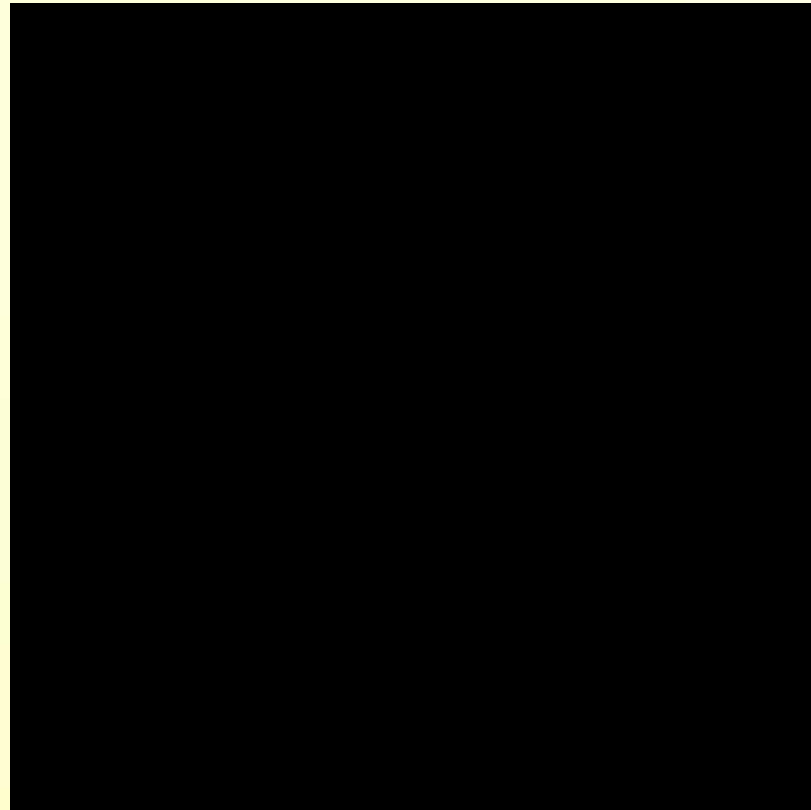
Sequential pre-dilation for LCX





After stenting LCX- ostial LM with
3.0x23mm SES,
And post-dilation with 3.5x12 NC
Sprinter

Re-wiring and dilating from ostial LAD

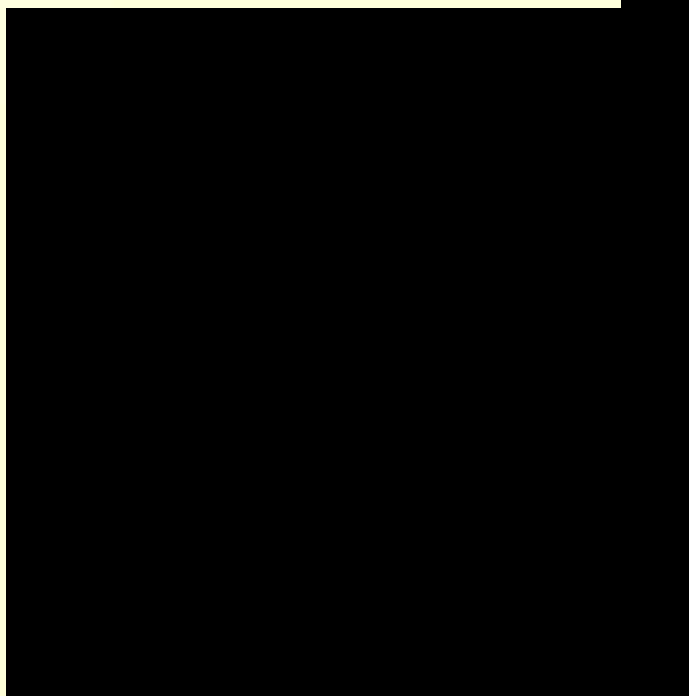




After first kissing



Stenting LAD-LM with 3.5x28 SES



After stenting and post-dilation
with 4.0 x8 balloon

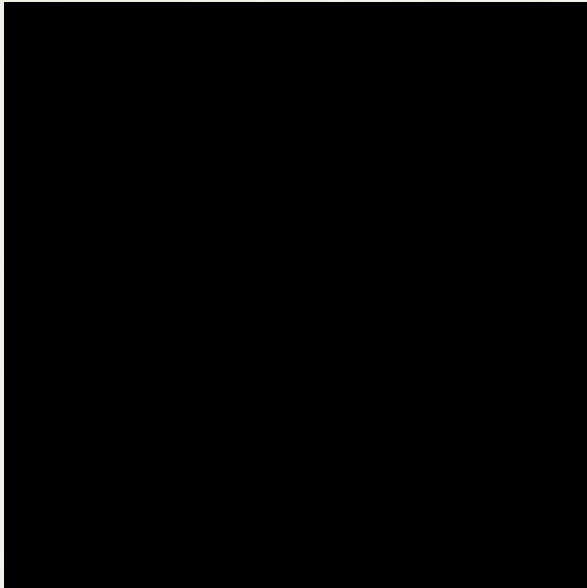


Re-wiring LCX

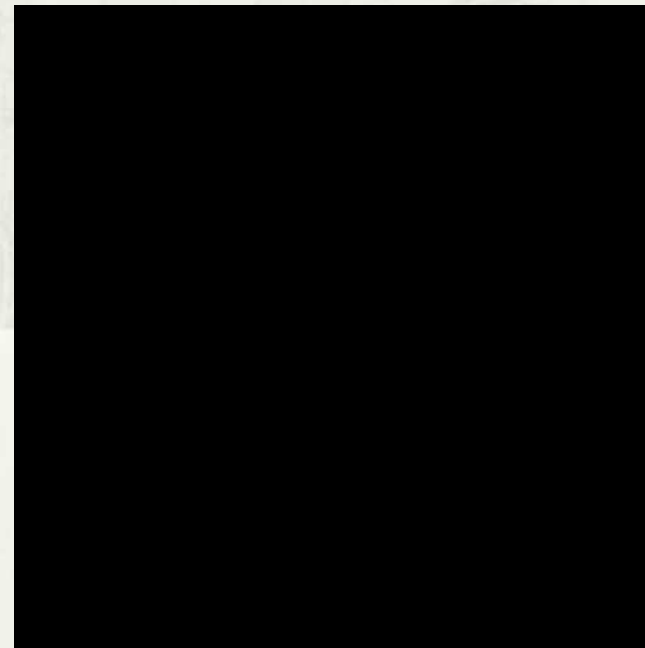
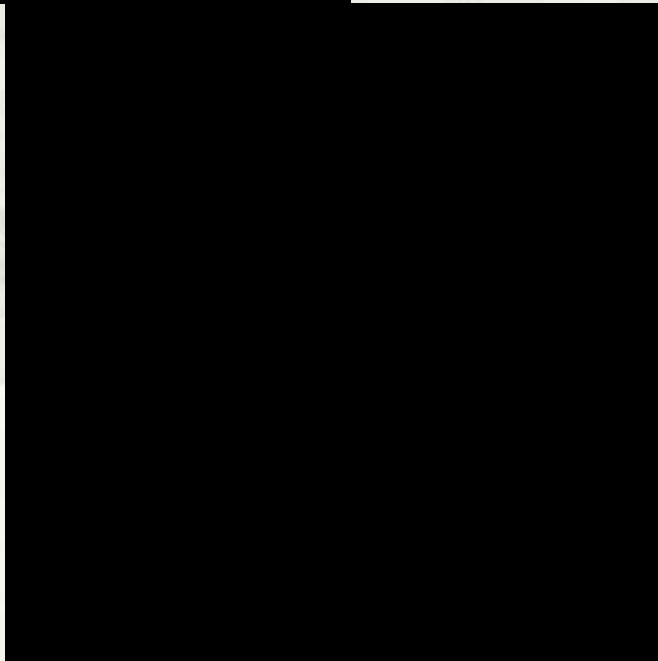
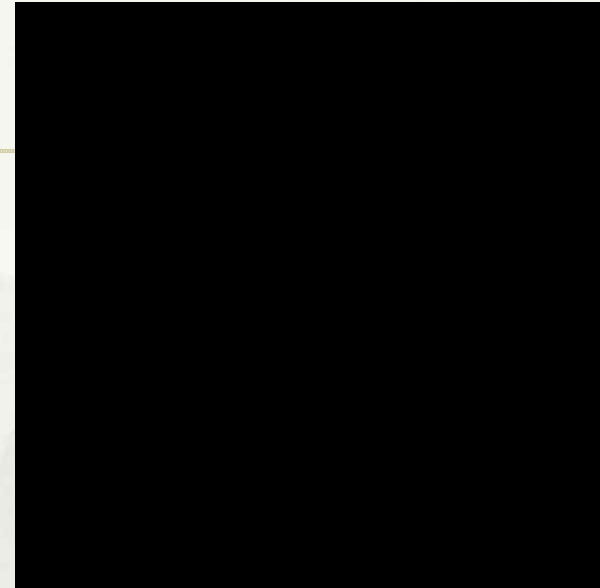
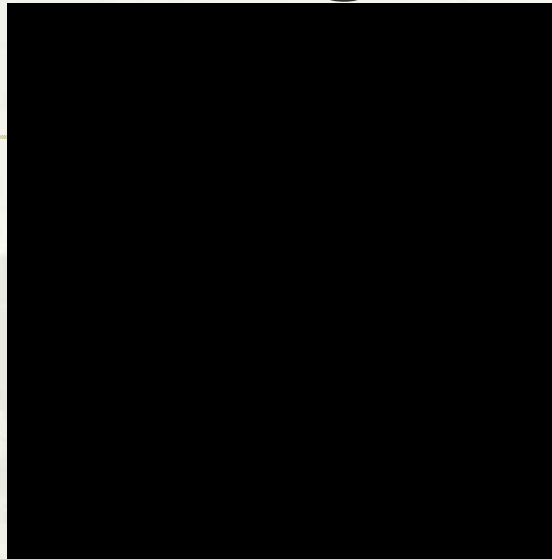
Scord kissing

After stenting procedure

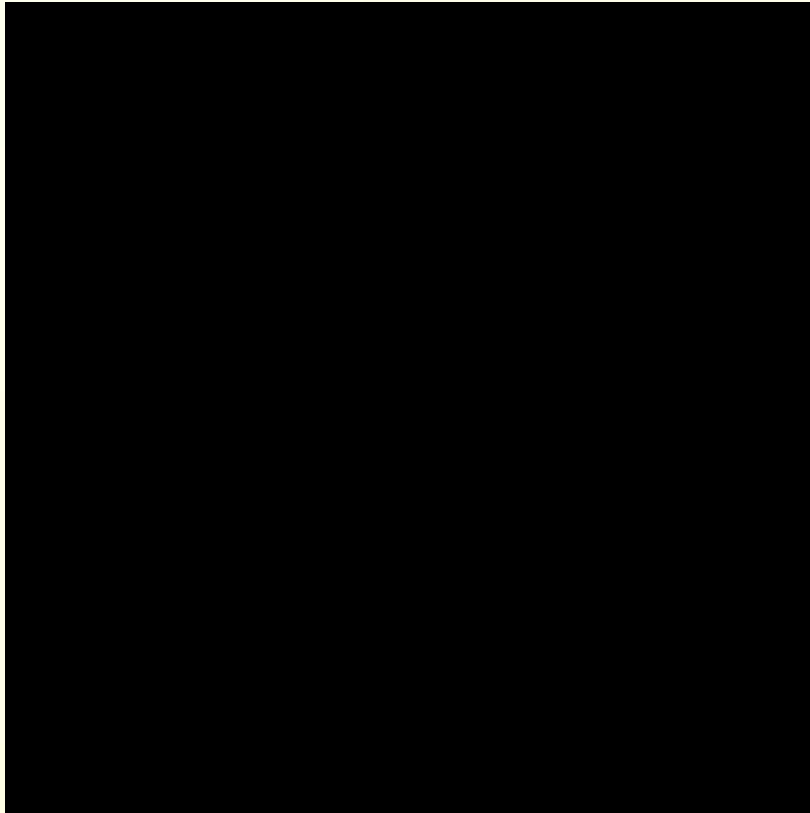
Stenting RCA



Sequential
inflation

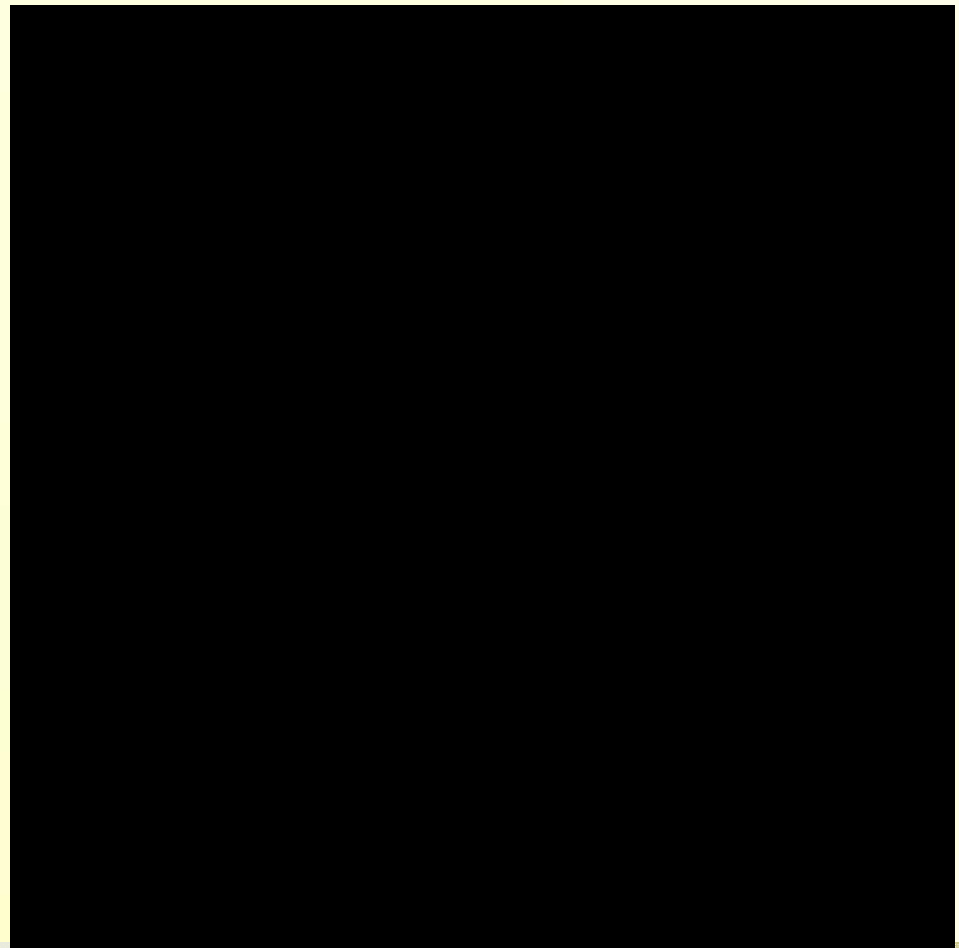


After 3 stents



Fourth stent inflated

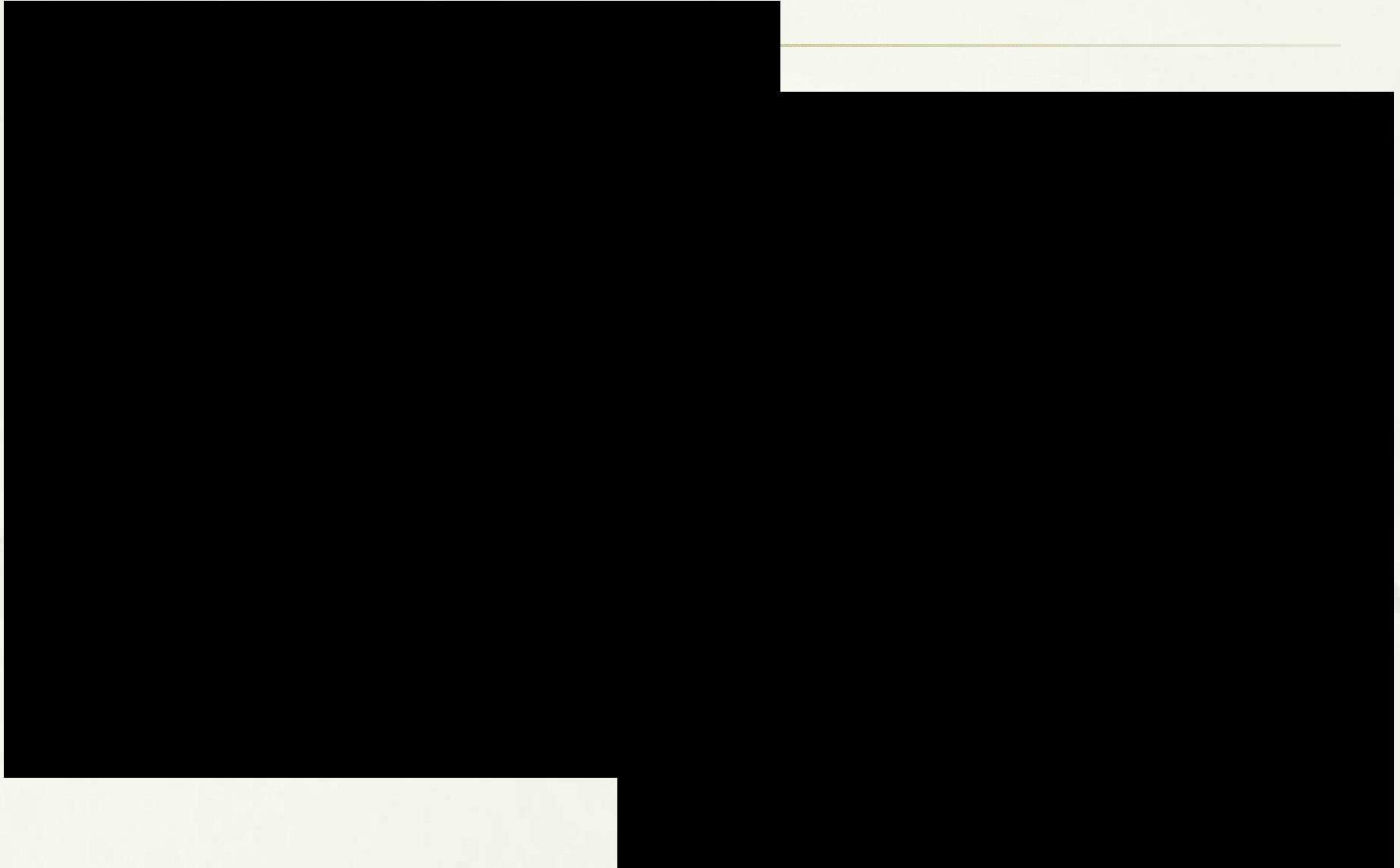
Final results of stenting RCA



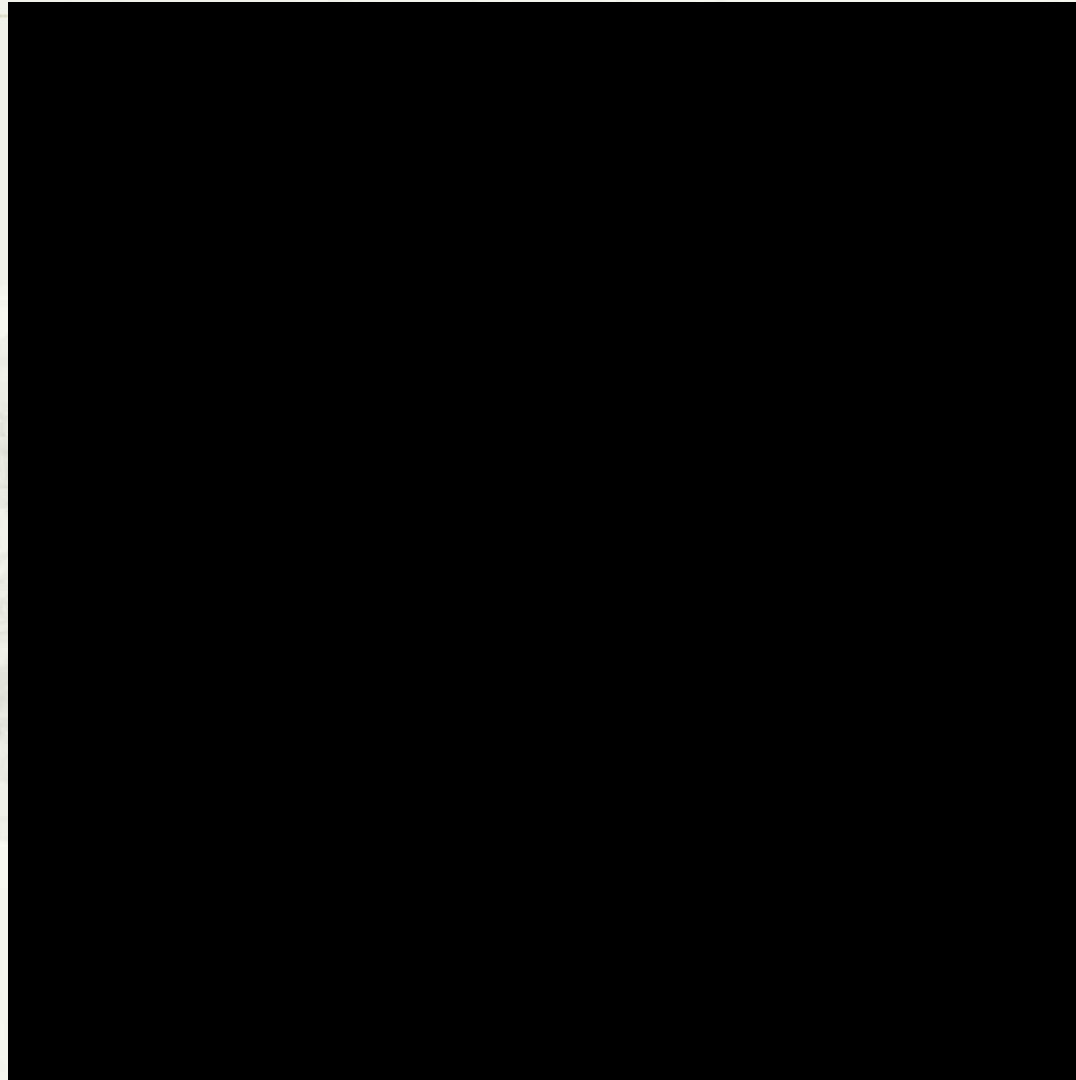
Adjunctive medication

- * Rosuvastatin: 20mg/d
- * Ezetimibe: 10mg/d
- * ASA 100mg/d
- * Plavix: 75mg/d
- * Anti-hypertension therapy (3 regimes)
- * LDL at target level: 82mg/dl
- * CRP-hs: 1.2mg/dl
- * eGFR: 38%

Angiogram at-8 month: LMTd

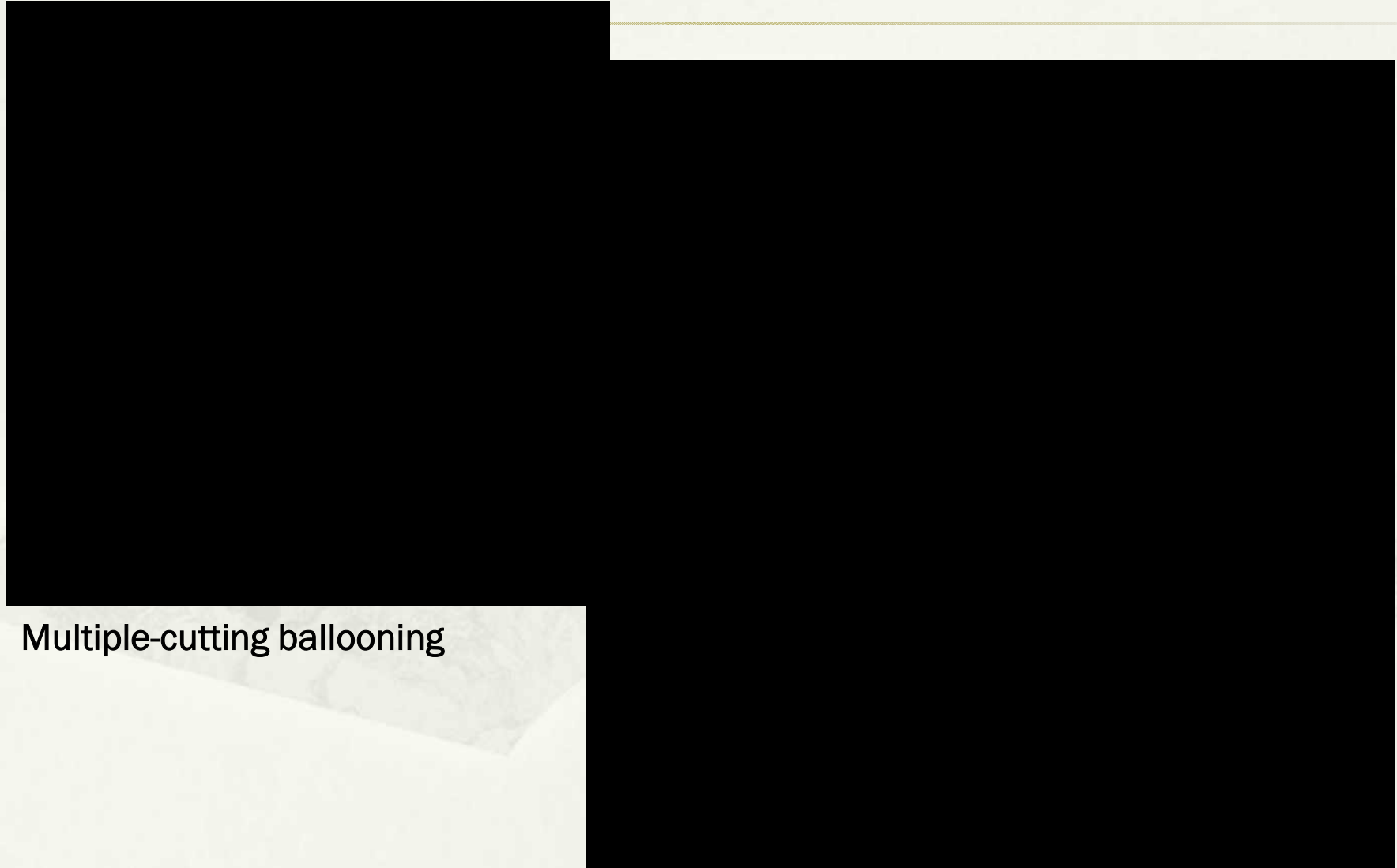


Angiogram at 8-month: RCA



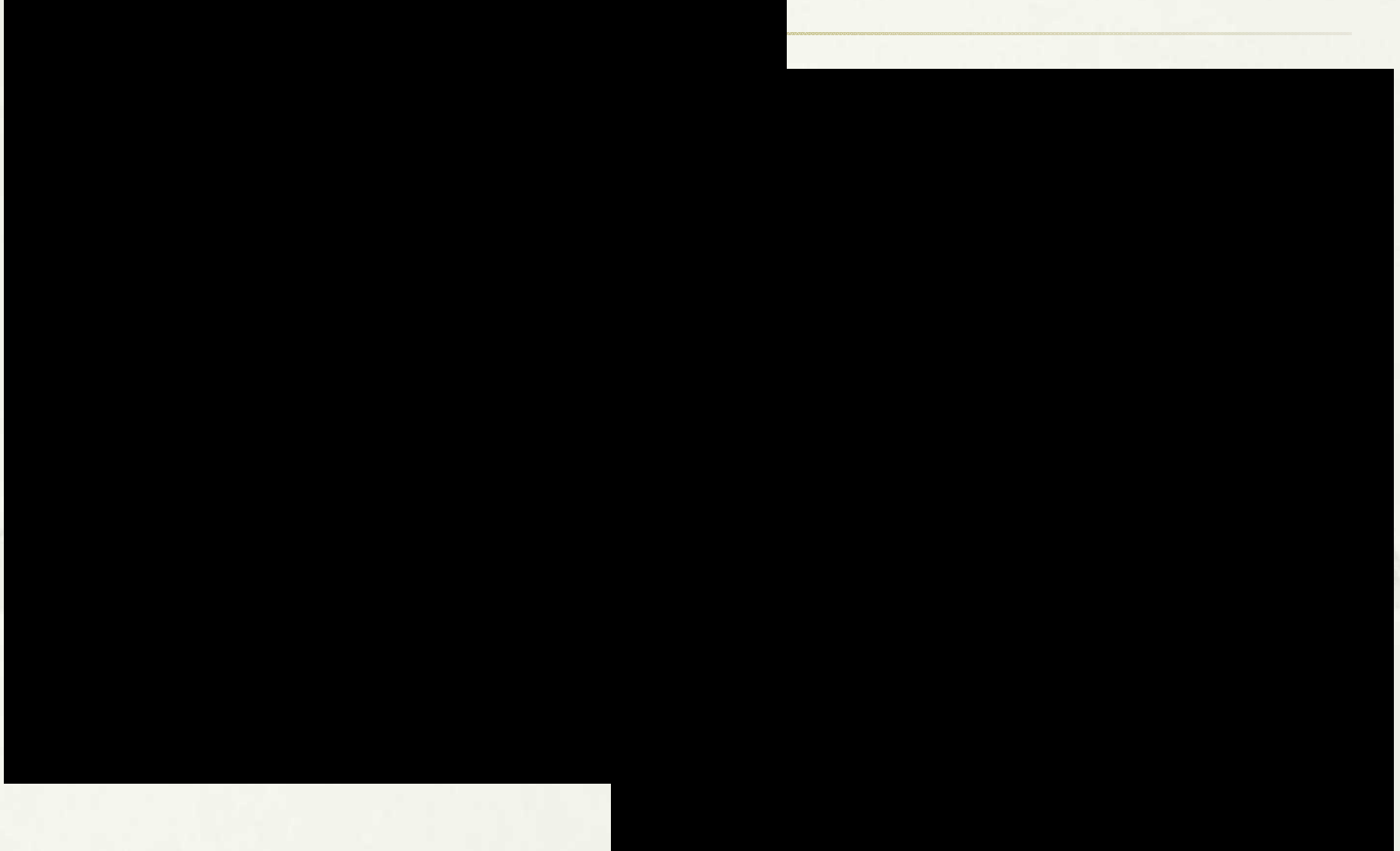
Question 4: How to ?

Cutting ballooning RCA



Multiple-cutting ballooning

2-year post-first PCI procedure



**Question 5: Next strategy?
CABG?**

Take home messages

- * Diabetes is an independent factor of ISR
- * Role of SYNTAX score in this patient
- * Multiple-risk factors predicts the worse outcome
- * Maximal medication would be of great value in improving clinical outcomes-----

CABG still is the golden care for diabetic patients



Thanks for your attention!