

## **Percutaneous coronary interventions in patients with malignancies**

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Cardiac disease and cancer are two of the leading causes of morbidity and mortality worldwide. The development of screening, diagnosis and treatment of both diseases and also primary and secondary prevention has resulted in an increase of cancer survivors with concomitant cardiovascular diseases. Cancer patients are on increased risk of CAD and ACS. Chemo and radiation therapy induced coronary artery injury and the increased risk of thrombosis result in higher risk of cardiovascular morbidity and mortality rate. Conservative approach in treatment of patients with ACS and any type of malignancies do not improve survival rates. In the majority of cancer patients with acceptable prognosis or cancer survivors, well planned and performed PCI is probably the best option. Physicians and medical staff must be aware of the potential complications of cancer therapies. The management of cancer patients with acute and chronic coronary artery diseases should be individualized and discussed within the acute cardiooncology team. In terms of limited evidences, future studies are needed for investigation of well-balanced treatment strategies and improvement in survival outcome.

**Key words:** malignant disease, percutaneous coronary intervention, coronary disease