

Eight years of cardiac catheterisation laboratory at the General Hospital Leskovac

Gabrijela Stojković¹, Goran Stoiljković¹, Dejan Djokić¹, Nikola Kocić¹, Jelena Stojanović¹, Aleksandar Stanković¹, Branko Beleslin²

¹General hospital Leskovac, Department of cardiology, Invasive cardiology and therapy, ²University Clinical center of Serbia, Cardiology Clinic; Medical faculty, University of Belgrade

Introduction. The dynamic nature of coronary artery disease (CAD), results in different clinical presentations, which are co-conventionally classified as acute coronary syndromes (ACS) or chronic coronary syndromes. Chronic and acute coronary syndrome represent a continuum without a clear border of separation, that is, the path from stenosis to occlusion of the epicardial coronary artery. It is this continuum of CAD and the unclear border of chronic and ACS, percutaneous coronary intervention (PCI) is on the first line of therapy, primarily in patients with ACS but also in patients with stable symptoms who do not respond to optimal medication. Coronary arteriography was introduced in the our General hospital in Leskovac in August 2013.

Aim. Presentation of the results in the work of the angio hall in the General Hospital in Leskovac.

Methods. 6051 patients underwent coronary angiography in the Cath Lab of the General Hospital in Leskovac in the period from August 1, 2013 to October 10, 2021. The results of these 6051 procedures are presented.

Results. Of these 4018 coronary angiographies, 1145 had PCI in acute myocardial infarction, and 898 were elective PCI. Of the 1145 PCIs in acute myocardial infarctions, 474 were in patients with ST elevation myocardial infarction (STEMI), and 474 in non-ST elevation myocardial infarction (NSTEMI). Of the 474 patients with STEMI infarction, 158 (33%) had primary PCI, the remaining underwent PCI after fibrinolysis (whether it was rescue PCI, routine early coronarography in acute infarction 2–24 h, or routine coronarography in acute infarction up to 48 h).

Conclusion. The opening of the Cath Lab in OB Leskovac was a major step forward in the diagnosis and treatment of patients with coronary heart disease, especially patients with acute myocardial infarction with ST elevation, reducing complications, mortality and disability of these patients. Certainly, the benefit for patients and community would be greater if the work of the Cath Lab was 24 hours every day.

Key words: coronary artery disease Cath Lab, primary PCI