

# LDL-C REDUCTION IN DIABETIC PATIENTS AFTER PERCUTANEOUS CORONARY INTERVENTION. IS THERE ANY DIFFERENCE WITH NON-DIABETIC?



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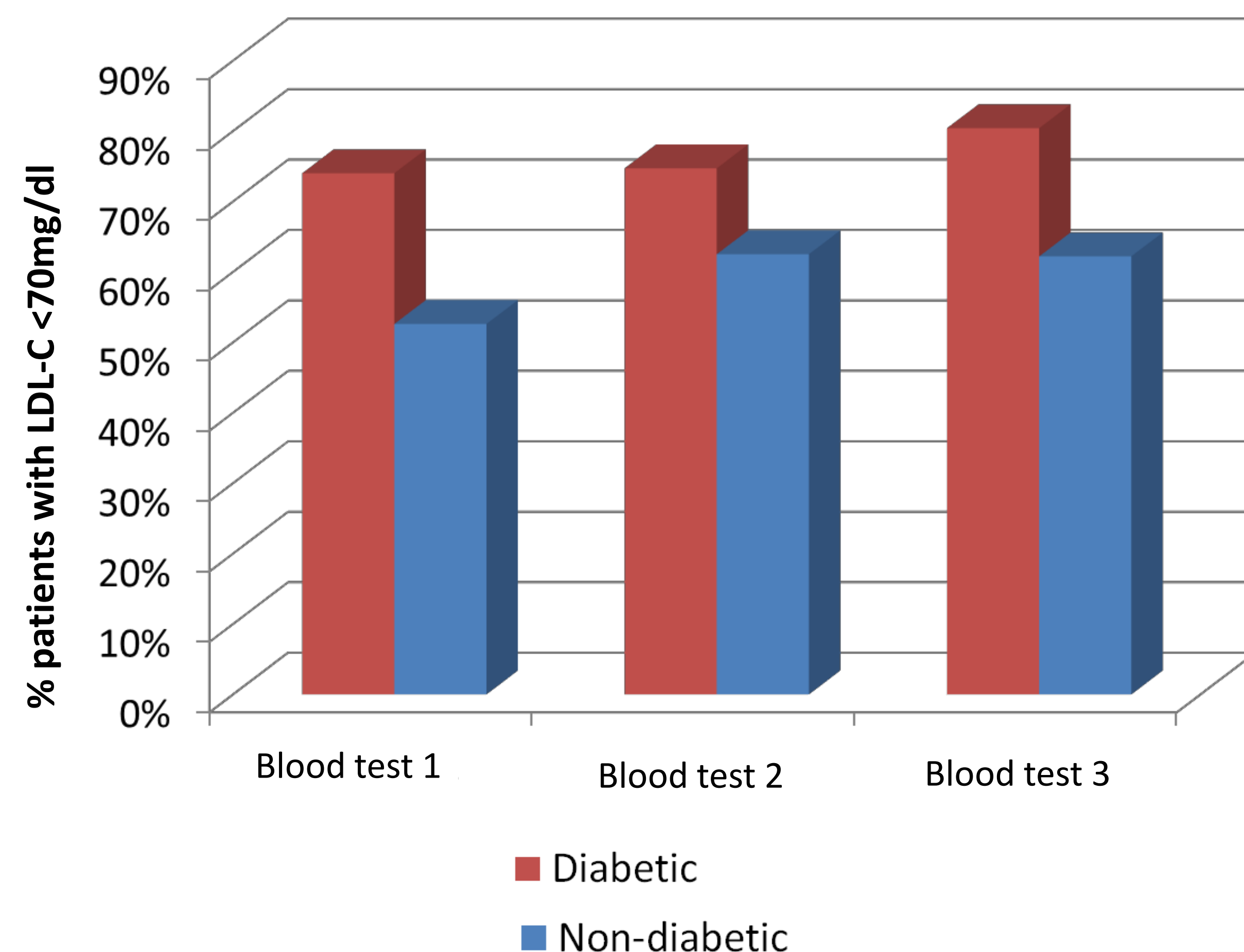
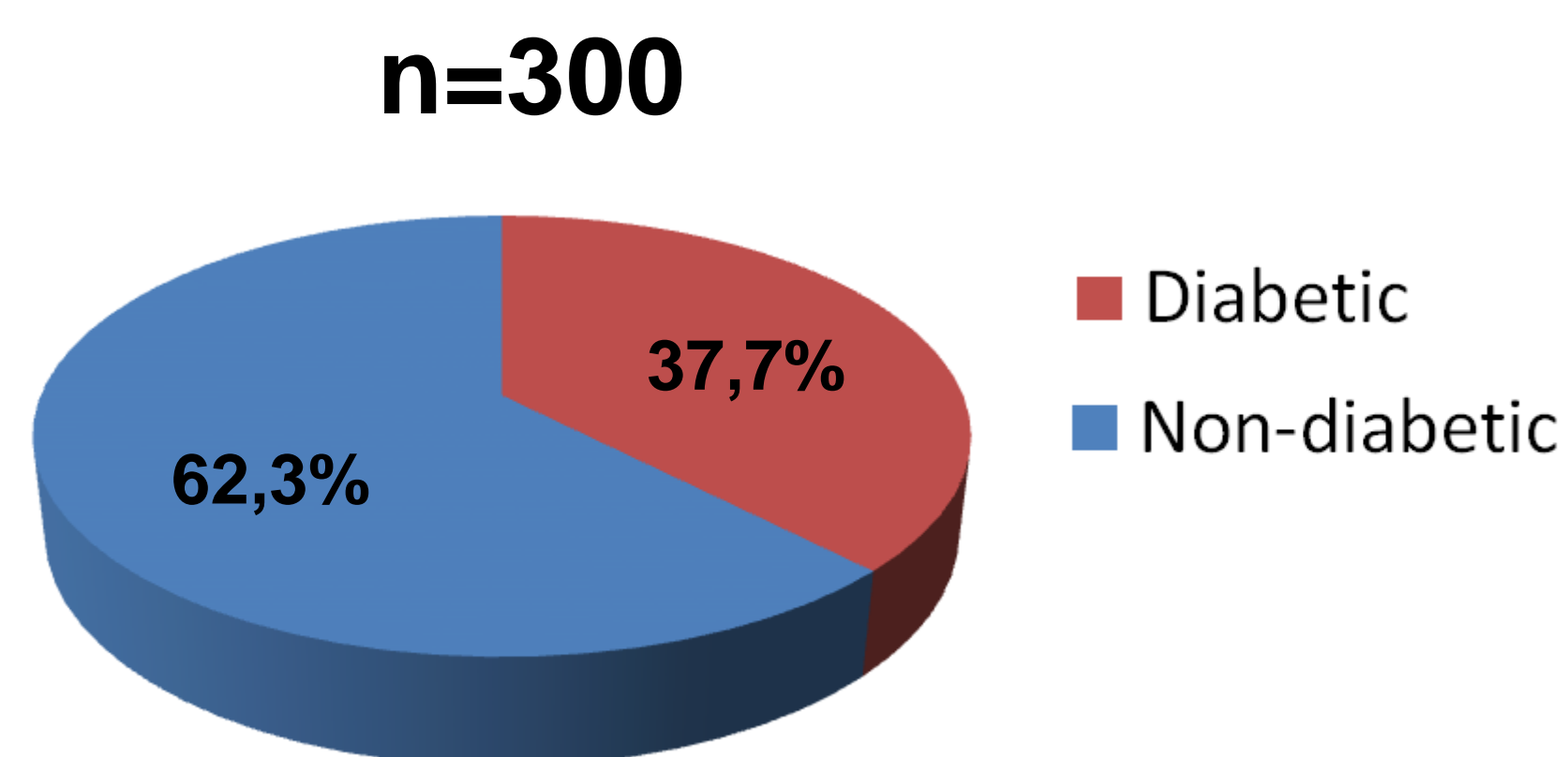
## OBJECTIVES

The clinical benefit of lowering LDL cholesterol (LDL-C) in secondary prevention is well known from clinical trials, especially in diabetic patients. Aim of this study was to evaluate the LDL-C reduction in diabetic versus non-diabetic patients after percutaneous coronary intervention in clinical praxis.

## METHODS

An observational study was conducted among patients who underwent a percutaneous coronary intervention in a tertiary hospital between January 2018 and December 2018. Lipid profile was assessed during a 2-year follow-up. According to ESC clinical guidelines in 2018, LDL-C goal was <70mg/dl. An algorithm was designed to determine whether the lipid-lowering therapy changes during follow-up were appropriated or not in order to achieve this goal.

## RESULTS



Follow up	Diabetic	Non-diabetic	p
LDL-C <70 mg/dl at blood test 1 (146±111 days)	74%	85,6%	p<0,001
Appropriate lipid-lowering treatment change	86,3%	74,3%	
Final LDL-C (mg/dl) (400±190days)	61±28	68±27	P=0,028

## CONCLUSIONS

After PTCA/stenting, the achieved LDL-C levels are lower in diabetic versus non-diabetic patients. Therapeutic inertia is lower in diabetics as physicians are more aware of the cardiovascular risk of this subgroup. However, further interventions are necessary to improve secondary prevention which remains suboptimal.

*The authors declare that there are no conflicts of interest related to this poster*

Baseline characteristics	Diabetic	Non-diabetic	p
Age (years)	70,3±13,2	66,1±12,1	0,05
Male (%)	81 (71,7%)	140(75%)	0,5
Arterial hypertension	86,7%	59,4%	p<0,001
Dyslipidaemias	85,8%	60,4%	p<0,001
Previous coronary disease	62,8%	29,4%	p<0,001