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Perfusion balloon for acute coronary syndrome: consecutive patients treated with Ryusei experience in a single center

**[Purpose]** We retrospectively examined Ryusei usage in patients with ACS.

**[Methods and results]** From January 2016 to July 2018, 124 ACS patients underwent PCI. Among them, 37 patients were treated using Ryusei. The reasons of perfusion balloon were 19 thrombus formation, 8 large amount of plaque, 4 young patients, 2 couldn't take antiplatelet agent and 4 others. Ten patients didn't need stent placement. Balloon size was decided by IVUS. One patient was treated with distal protection device. Of six patients demonstrating slow flow phenomenon, five required IABP. Subacute thrombosis was not observed. The incidence of target lesion revascularization was two (5.4%) at one-year follow up.

**[Conclusions]** We found that the use of Ryusei had a favorable effect on the treatment of ACS, especially for patients who stent implantation is not recommended.

#### Clinical Outcomes (N = 37)

Age (years)	62 ± 13
Gender male (n, %)	34 (92)
STEMI (n, %)	31 (84)
Target vessel	
RCA / LAD / LCX / LMT (n)	18 / 14 / 5 / 0
Perfusion balloon size (mm)	3.2 ± 0.4
2.5 / 3.0 / 3.5 / 4.0 (n)	2 / 22 / 7 / 6
inflation pressure (atm)	8.3 ± 3.1
inflation time (second)	256 ± 146
Thrombus aspiration (n, %)	26 (70)
Distal protection (n, %)	1 (2.7)
TIMI flow grade 0 / 1 / 2 / 3 (n)	0 / 1 / 5 / 31
IABP (n, %)	5 (14)
Subacute thrombosis (n, %)	0
Max CK (IU/L)	3134 ± 2200