

International registries show PCI rates increased in Japan, US

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Japan and the U.S. have seen an increase in percutaneous coronary intervention (PCI) procedures, which is driven primarily by a rise in elective PCIs in Japan compared to non-elective in the U.S., according to a study in the *Journal of the American College of Cardiology*. Since adoption of large-scale PCI trial results vary internationally, the study sought to analyze large national registries in both countries to illuminate international variation in PCI practice as a foundation for further quality improvement.

In a study looking at NCDR CathPCI Registry data in the U.S. and J-PCI registry data in Japan, researchers from the Japanese Association of Cardiovascular Intervention and Therapeutics in Tokyo and several U.S.-based hospitals, compared temporal trends in procedural volume, patient characteristics, pre-procedural testing, procedural characteristics and quality metrics in the U.S. and Japan between 2013 and 2017.

Researchers found that PCI volume increased by 15.8% in the U.S.—from 550,872 in 2013 to 637,650 in 2017—primarily due to an increase in non-elective PCIs. In Japan, PCIs increased by 36%—from 181,750 in 2013 to 247,274 in 2017—primarily due to an increase in elective PCIs. Elective PCI rates were more than two-fold greater in Japan (72.7%) than in the U.S. (33.8%).

Data also showed the ratio of non-elective vs. elective PCI and the performance of non-invasive stress testing in stable disease was lower in Japan than in the U.S. Computed tomography angiography was more commonly used in Japan.

Provided by American College of Cardiology

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