

# 17<sup>th</sup> European Heart Disease and Heart Failure Congress &

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### Efficacy of different perioperative statin regimens on the protection against post coronary artery bypass grafting major adverse cardio-cerebral events

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**Statement of the Problem:** CABG is an effective palliative treatment for IHD patients. Nevertheless, CABG patients are at a high risk of developing postoperative major adverse cardio-cerebral events (MACCE). Statins have proven safe and effective at improving short and long-term outcomes after CABG. However, an optimal pre and postoperative statin regimen that would efficiently protect CABG patients from postoperative adverse events is still ambiguous and needs to be further investigated prospectively.

**Aim:** This study aims at comparing three different perioperative statin regimens to find out the best regimen that is safe and effective at providing maximal protection from post CABG adverse events.

**Methodology & Theoretical Orientation:** 94 patients scheduled for elective, isolated on- or off- pump CABG were randomly assigned to one of three treatment groups; group I (80 mg atorvastatin/day for 2 days preoperatively (N=37)), group II (40 mg atorvastatin/day for five to nine days preoperatively (N=29) or group III (80 mg atorvastatin/day for five to nine days preoperatively (N=28)). The corresponding preoperative regimens were restarted postoperatively and were continued for one month. Troponin I, CK-MB and CRP were assayed preoperatively and at 8, 24, 48 hours postoperatively and at discharge. Time course of changes of marker levels across these time points were compared. The incidence of post-op MACCE was assessed. A quality of life questionnaire (EQ-5D-3L) was administered preoperatively and one month after CABG.

**Results:** There was no significant difference among the three treatment groups in the incidence of postoperative MACCE, length of hospital stay, infections, renal and hepatic impairment. CRP levels were significantly lower in group III compared to the two other groups. However, troponin I levels were significantly lower in group II compared to group III. The QoL questionnaire showed an overall significant improvement after CABG in the three regimens.

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### Association of ovarian tumors with CA-125

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**Background & Aim:** The tumor marker CA-125 is the most widely used serum marker for ovarian cancer screening. The aim of this paper was to establish the association between histopathologic result of ovarian tumors with serologic CA-125 and utility for the diagnosis of ovarian tumors at a gynecologic hospital.

**Methods:** An observational, retrospective, descriptive and longitudinal study was done from September 1st 2010 to February 28th 2013. All patients with histopathologic report ovarian tumor and CA-125 was selected to analyze the association of ovarian tumors with their histological type, biological behavior, range positivity of CA-125 and its relationship to the pre and postmenopausal state.

**Results:** Out of 1213 patients, 334 were included in the study. Utility of CA-125 in postmenopausal reported positive predictive value of 67.5% with sensitivity 72%, specificity 82.6% and negative predictive value 86.1%, both with p=0.001, mainly in the epithelial origin. In premenopausal, a low positive predictive value was reported.

**Conclusions:** The CA-125 is useful for screening ovarian cancer in postmenopausal women mainly for epithelial origin.

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