

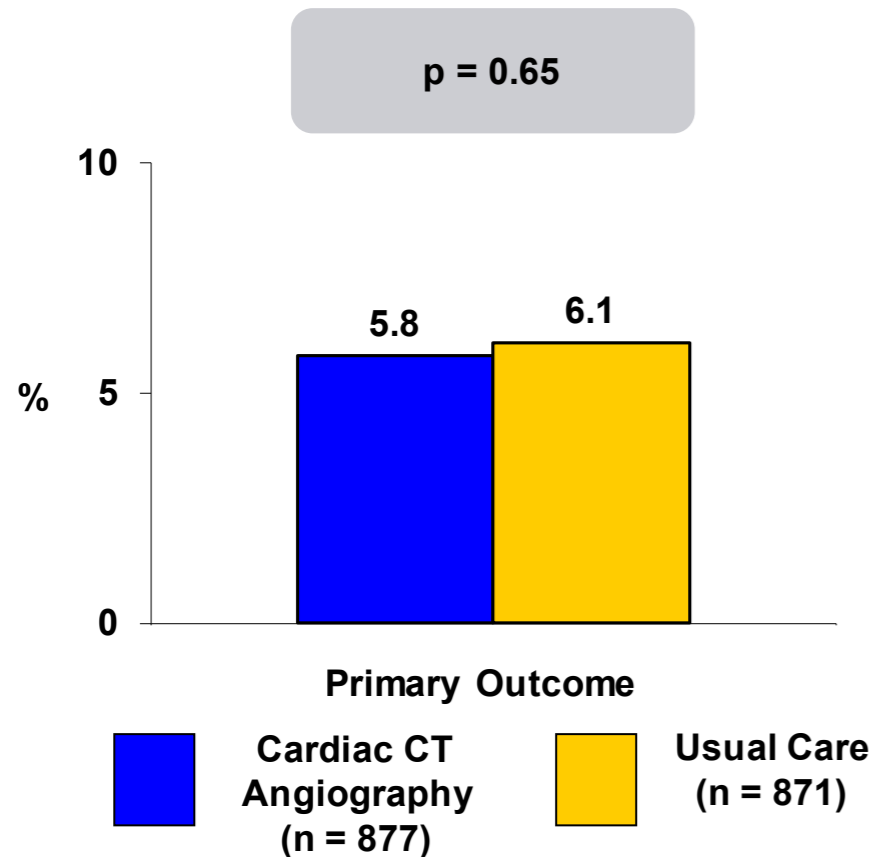
RAPID CTCA

#AHA20



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Trial Description: The trial evaluated early cardiac CT angiography compared with usual care among patients presented to the hospital with suspected or provisional ACS.



RESULTS

- Primary outcome: all-cause death or MI (type 1, spontaneous) or (4b, stent thrombosis) at 1 year occurred in 5.8% of the cardiac CT angiography group compared with 6.1% of the usual care group (p = 0.65)
- Secondary outcomes for cardiac CT angiography group vs. usual care:
 - Invasive coronary angiography: adjusted HR 0.81, 95% CI 0.72-0.92
 - Coronary revascularization: adjusted HR 1.03, 95% CI 0.87-1.21
 - Median length of hospitalization: 2.2 days vs. 2.0 days
 - Median health care costs: \$9,494 vs. \$8,776

CONCLUSIONS

- Among patients presenting with suspected or provision ACS, cardiac CT angiography did not reduce the incidence of death or subsequent MI
- Cardiac CT angiography was associated with a modest increase in length of hospitalization and health care costs

Presented by Dr. Alastair J. Gray at AHA 2020