

Poll Results: Updating CV Management in the Face of COVID-19: Decisions About a Return to Normalcy

May 13, 2020 | George W. Vetrovec, MD, MACC

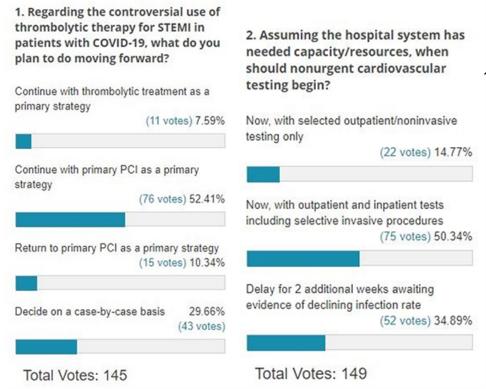
Poll

Are we reopening? Yes, but somewhat cautiously.

In the most recent poll addressing how practices are evolving in the face of COVID-19, the overall response to the acute management of ST-segment elevation myocardial infarction (STEMI) appears to be following recent guidelines¹ that emphasize use of primary percutaneous coronary intervention (PCI) and the avoidance of thrombolytics except in special circumstances. Fewer than 8% of respondents are continuing thrombolytics as the primary treatment, while just over 50% are continuing primary PCI as the standard care for STEMI, with another 10% re-adopting primary PCI. One third suggest a case-by-case decision, which may be reasonable based on many factors. But hopefully most cases are being treated by primary PCI.

Regarding the introduction of cardiovascular testing, only 15% limited introduction to noninvasive testing, while 50% included selective invasive testing. Overall, 65% favored beginning some level of testing, most commonly including selected invasive procedures. Roughly one-third still favored waiting an additional 2 weeks before resuming testing and awaiting evidence of declining rates of new infections.

Thanks to the nearly 150 respondents; as usual, all comments are appreciated.



References

1. Mahmud E, Dauerman HL, Welt FG, et al. Management of Acute Myocardial Infarction During the COVID-19 Pandemic. *J Am Coll Cardiol* 2020;Apr 21: [Epub ahead of print].

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