

# CORRELATIONS OF DAPT SCORE AND PRECISE-DAPT SCORE WITH THE EXTENT OF CORONARY STENOSIS IN ACUTE CORONARY SYNDROME

Chenglong Zhang, Tianyi Long, Fengjuan Li, Fei Li, Liming Peng, Ke Xia, Qiying Xie and Tianlun Yang

Xiangya Hospital Central South University, China .

**Background:** Dual antiplatelet therapy (DAPT) score and PRECISE-DAPT score have good ability of discriminating the risk of thrombosis and bleeding and were recommended for making optimized antithrombotic strategies. But the relationship between DAPT score and PRECISE-DAPT score with the extent of coronary stenosis has not been established.

**Methods:** We retrospectively collected the information of 359 patients of acute coronary syndrome (ACS) who received coronary angiography (CAG) and subsequent percutaneous coronary intervention (PCI). DAPT score and PRECISE-DAPT score were calculated and patients were divided by recommended cut-off values (2 for DAPT score and 25 for PRECISE-DAPT score). Gensini score system and triple-vessel disease (3-VD) were chosen to evaluate the severity of coronary stenosis.

**Results:** Overall, 54.9% and 10.0% of the patients had higher DAPT score or PRECISE-DAPT score. Patients with higher DAPT score had increased stent counts, total length of stents, higher Gensini score and risk of 3-VD, while had decreased minimum diameter of stent. But these differences were not found in PRECISE-DAPT subgroups. However, both DAPT score and PRECISE-DAPT score were independent risk factors of Gensini score after adjusting for baseline factors ( $p < 0.001$  and  $p = 0.047$ ). Furthermore, an increase of one point of DAPT score and five points of PRECISE-DAPT score resulted by 89% ( $p < 0.001$ ) and 46% ( $p = 0.04$ ) increase of risk of 3-VD after adjustment.

**Conclusion:** Both DAPT score and PRECISE-DAPT score were closely and positively associated with the degree of coronary arteriostenosis in patients with ACS.

Chenglongzhang@csu.edu.cn