“Luck and happiness in our endeavors may bring each day out the way very best in us!”

Conclusions
7: CONCLUSIONS

- Pitavastatin is effective and safe at minimal dose for reduction in low density lipoprotein cholesterol, total cholesterol and apolipoprotein levels and attainment of NCEP ATP III target goal as preventive therapy in hyperlipidemic ischemic patients.

- Bivalirudin, a direct thrombin inhibitor is efficacious and safe in the treatment of moderate to high risk IHD patients presenting with ACS and undergoing PCI leading to reduction in ischemic cardiac complications and risk of bleeding. Bivalirudin can replace heparin; it can combat the limitations and outcome of gold standard antithrombin agent. It was associated with no incidence of major bleeding and less ischemic events on day 7, day 30 and one year. Thus, it is cost effective and can improve the quality of life of such patients.

- Abciximab, a direct GP IIb/IIIa inhibitor when given in conjunction with standard therapy has similar safety profile to standard therapy alone (aspirin, heparin and clopidogrel) and better efficacy. It has effectively reduced the ischemic cardiac complication, improved quality of life without increasing the risk of major bleeding events in treatment of moderate to high risk ischemic IHD patients presenting with ACS and undergoing PCI.

- Primary aspiration before index procedure effectively removed thrombus burden and distal emboli/thrombi and thereby improves the rate of ST segment resolution, reduces distal embolization and procedural time with better and faster optimal restoration of epicardial and myocardial perfusion. It is cost effective and improves long term cardiac events in IHD patients presenting with AMI and undergoing PCI.