

## Abstract

primary PCI has better results if there is a catheterization laboratory and interventional cardiologist available and if the procedure can be done within 90 minutes of the patient arriving at the hospital <sup>(4)</sup>.

The aim of reperfusion therapy for many years has focused on achieving epicardial artery patency at the site of the occlusive thrombus. It is now possible, through advances in interventional techniques and adjunctive pharmacological treatment, to achieve TIMI (Thrombosis In Myocardial Infarction) grade 3 epicardial flow (normal) in 95% of patients(5,6).

Successful primary PCI within 3–24 hours of the onset of chest pain has been associated with improved LV systolic function at a mean

**Key words: The Prognostic Significance of TIMI Risk**