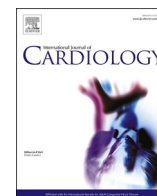Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Letter to the Editor

Reply to a fibrinolysis-first strategy for ST-elevation myocardial infarction in the COVID-19 era

In reply to Jamal et al., our study did not aim to demonstrate the non-superiority of fibrinolysis to primary PCI. It is noteworthy that delayed primary PCI if the symptoms persisted and elective PCI if stabilized were integral parts of the fibrinolysis-first strategy. We aimed to stress the overall in-hospital effect of such a 'retrograde' pattern of management (not fibrinolysis only) driven by extreme times when the COVID-19 pandemic hit China first at the beginning of 2020 [1]. Among those patients in whom fibrinolysis was not contraindicated, many refused fibrinolysis therapy for its potential bleeding risk. Besides, we tended to choose thrombolysis more conservatively for those whose symptoms were relieved on presentation, considering restored blood flow of the culprit vessel may be obtained. Since a large proportion (52.4%) of the patients from 2020 underwent elective PCI in a median time of 11 days, their reperfusion delays are obvious and quantitively reporting of D-B time seems unnecessary. Instead, analysis was based on different reperfusion indications according to prehospital delay within 12 h or not. We failed to distinguish PCI after fibrinolysis from others because of the extremely small number of such patients (9 cases), and as Jamal noted, further analysis accounting for confounders were unlikely to be informative for the small sample size. However, the clinical characteristics such as age, Killip classification, and TIMI score etc. were overall matched between patients of the two years.

Declaration of Competing Interest

The authors report no relationships that could be construed as a conflict of interest.

References

[1] Y. Han, H. Zeng, H. Jiang, Y. Yang, Z. Yuan, X. Cheng, et al., CSC expert consensus on principles of clinical Management of Patients with Severe Emergent Cardiovascular Diseases during the COVID-19 epidemic, Circulation 141 (20) (2020) e810-e6.

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[1] This author takes responsibility for all aspects of the reliability and freedom from bias of the data presented and their discussed interpretation