



| ACC.16<sup>TM</sup>

65<sup>th</sup> Annual Scientific Session & Expo

# Effect of Early Administration of Beta Blockers in patients with STEMI before primary PCI: The EARLY-BAMI trial

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On behalf of the EARLY BAMI investigators.

AT THE  
INTERSECTION  
OF SCIENCE  
& CHANGE

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# STEMI (any location)

# Study Design

Inclusion criteria:

Exclusion criteria:



Metoprolol i.v.

2 x 5 mg

N= 336

pPCI

MRI (one month)

N=162

Placebo i.v.

2 x 5mg

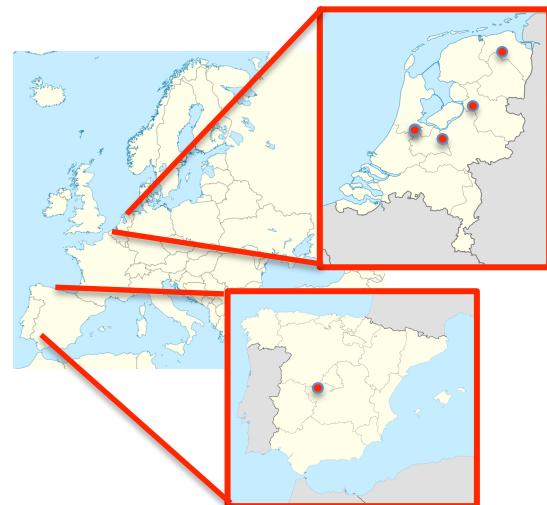
N= 347

pPCI

MRI (one month)

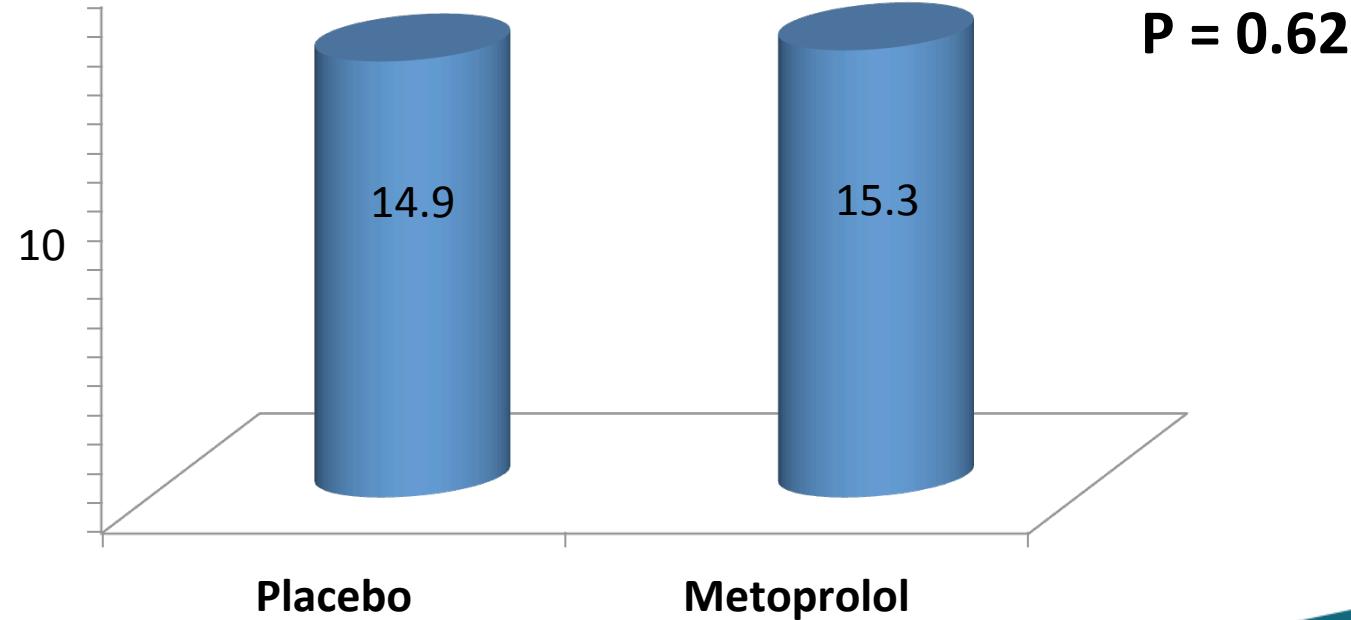
N= 169

Unrestricted grant:  
- Dutch Heart Foundation  
- Medtronic

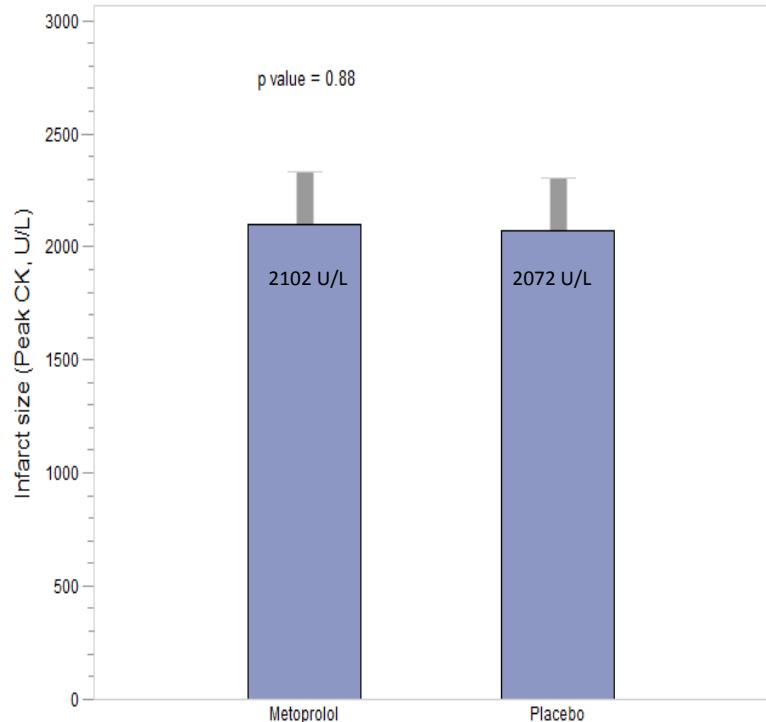
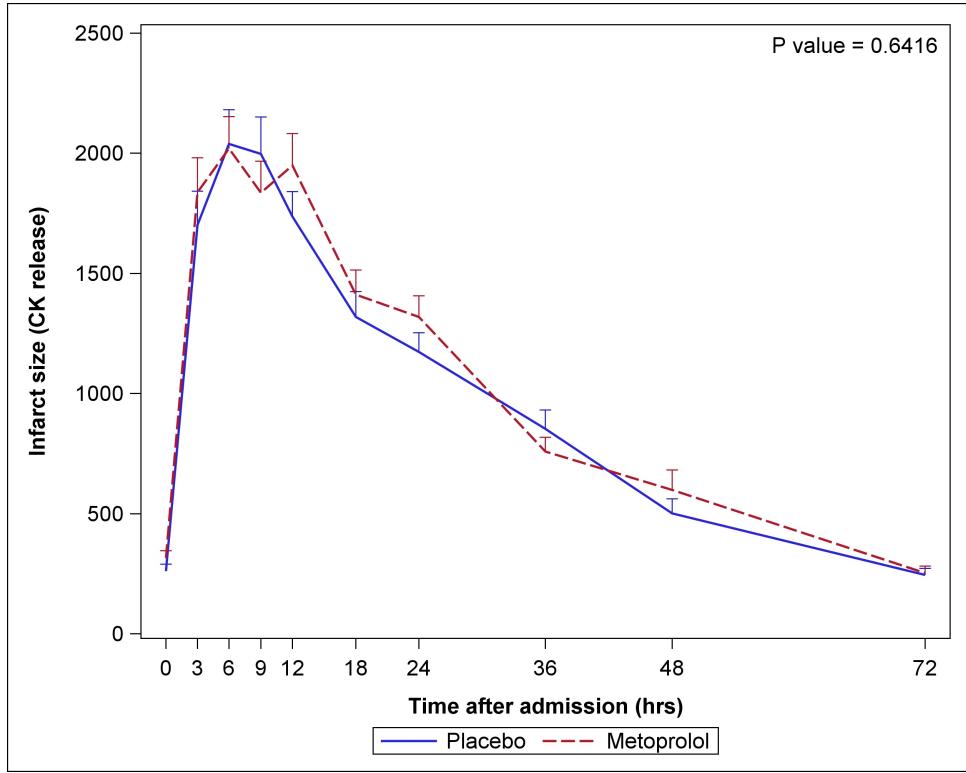


# Infarct size at MRI

Delayed enhancement-Infarct (% of LV)



# enzymatic infarct size



# Safety endpoint

Outcome	Metoprolol (N=336)	Placebo (N=347)	P-value
Severe bradycardia (%)	1.5	0.6	0.279
Severe hypotension (%)	2.9	5.5	0.102
Cardiogenic shock (%)	0.6%	0.3	0.618
<b>Malignant ventricular arrhythmias (%)</b>	<b>3.6</b>	<b>6.9</b>	<b>0.050</b>

# Conclusion

- In a non-restricted STEMI population, early intravenous metoprolol before pPCI, was not associated with a reduction in infarct size
- Metoprolol reduced the incidence of malignant arrhythmias in the acute phase and was not associated with an increase in adverse events