





# Systemic thrombolytic therapy in patients with intermediate-high-risk pulmonary embolism

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Pulmonary embolism remains the one of the commonest cardiovascular disease, the severity of which is variable and can be lethal. The incidence is expected to increase due to the aging population. Intermediate-high risk pulmonary embolism is characterized by hemodynamical stability, but elevated mortality risk and both radiographic and laboratory signs of right heart strain. Thrombolysis remains a possible life saving treatment option but bears an increased risk of potentially life-threatening hemorrhage. Optimal treatment is still not established.<sup>1-3</sup> We present a series of intermediate-high risk patients treated in our hospital with thrombolytic therapy (n=4, 2 male, median age 58.5) and compare relevant direct and indirect values of right ventricular load before and after treatment (**Table 1**). We also provide a summary of our clinical approach in light of current guidelines and two meta-analyses.

**TABLE 1. Comparison of relevant direct and indirect values of right ventricular load before and after treatment.**

Before treatment			After treatment		
S02 (%)	Tnl (ng/L)	NTproBNP (ng/L)	S02 (%)	Tnl (ng/L)	NTproBNP (ng/L)
80	657	6103	98	35	83
82	61	3522	92	<10	145
84	190	9122	97	262	2976
94	125	2597	96	<10	139

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## LITERATURE

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