**THE RATIONALE FOR PERCUTANEOUS MECHANICAL CIRCULATORY SUPPORT IN CARDIOGENIC SHOCK AND PROTECTED PCI**

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There have been several advances in percutaneous coronary interventions (PCI) in past 20 years with a significant change in landscape in stable coronary artery disease (SCAD) as well as acute coronary syndrome (ACS). The PCI as an option was considered in SCAD on Type A & B lesions to now complex lesions like chronic total occlusion and left main. In ACS lesions, PCI was considered with occasional use of intra-aortic balloon pump to now frequent use of left and sometimes combined right sided percutaneous mechanical circulatory support (PMCS) for cardiogenic shock patients. Even though there is limited outcome data with PMCS, this technology has shown promising results. The lesions that interventional cardiologist attempted with skepticism are now done routinely with implementation of PMCS. It is important to understand the science behind the functionality and hemodynamic changes with deployment of PMCS for appropriate application and ultimately providing benefit to patients and improving patient outcomes.