

# PCI for Small Vessel Disease



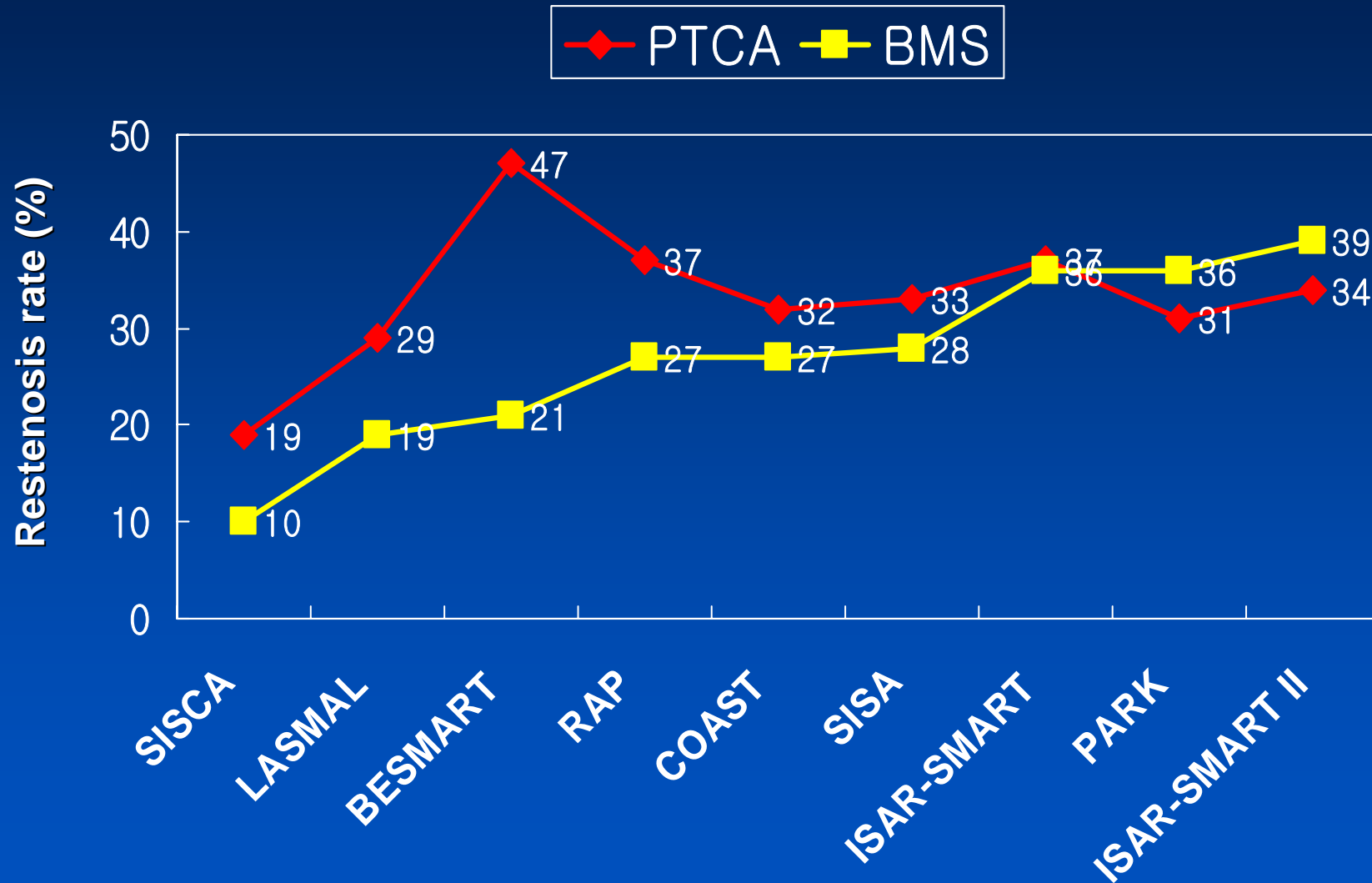
# Small Vessel Disease

## BMS vs. PTCA

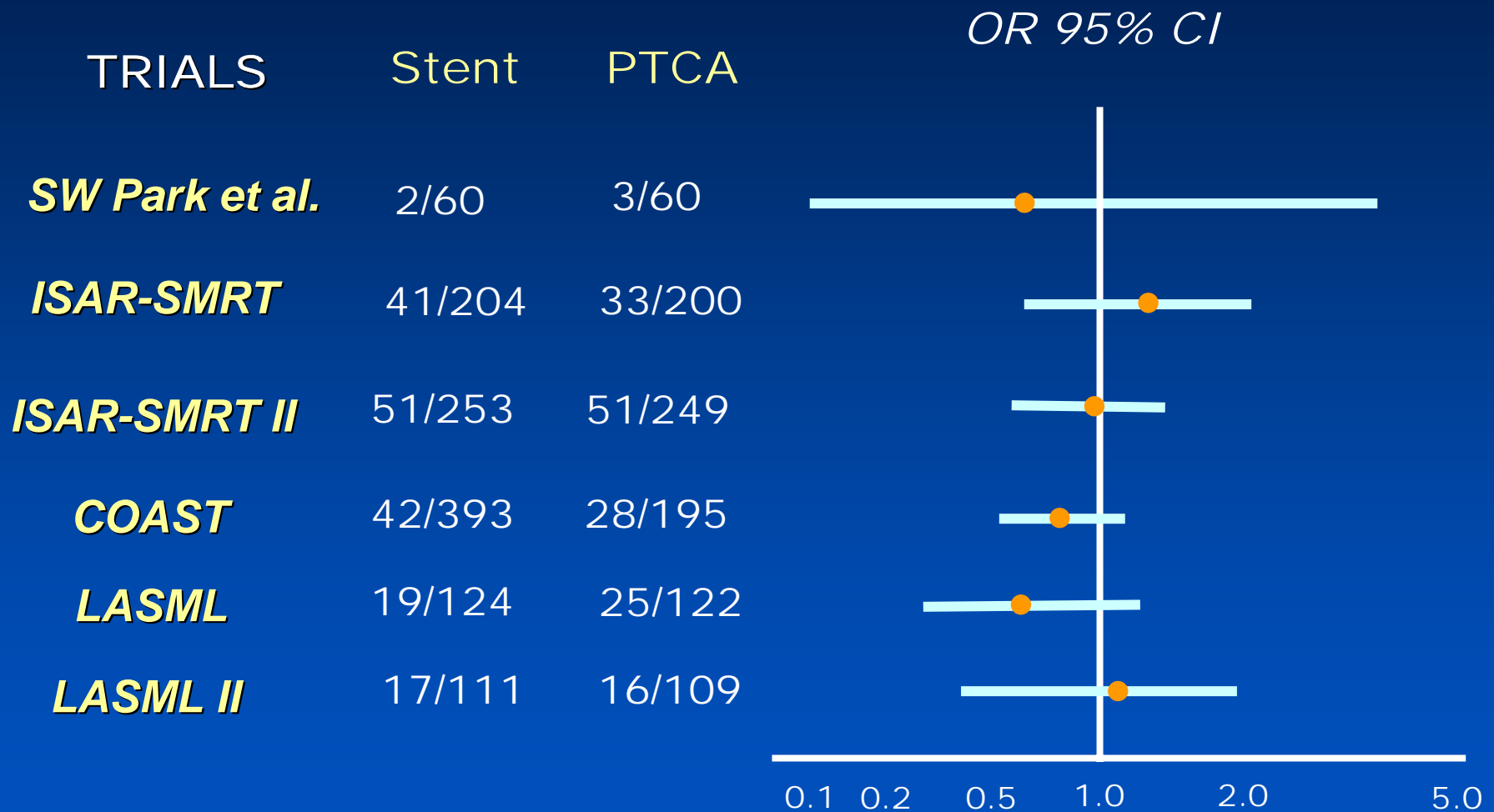
# Randomized Trials of BMS vs. PTCA in Small Vessel Disease

Trial	Stent type	Numbers
ISAR-SMART	Multi-Link	381
N/A	NIR	120
BESMART	BeStent	381
SISA	BeStent	351
SISCA	BeStent	145
RAP	BeStent	426
LASMAL	BiodivYsio	246
COAST	JoStent	588
ISAR-SMART II	BiodivYsio	502

# Restenosis Rate of BMS vs. PTCA in Small Vessel Disease



# TLR Rate at 8 Months



*P Agostoni et al. Eur Heart J 2005;26:881*

# Small Vessel Disease in the BMS era

- The results of trials comparing BMS to PTCA were discordant compared to the other coronary lesions.
- Clinical and angiographic restenosis rates remain relatively high with either strategy.

# Small Vessel Disease

## DES vs. BMS

# PCI for Small Vessels in the DES Era

- For complete lesion coverage in the DES era, the number of PCI for small coronary lesions has been increased despite of small perfusion territory and unfavorable long-term outcomes.



# Evidences

## DES in Small Vessels

- Subgroups of randomized studies
  - RAVEL, SIRIUS, New-SIRIUS (SES vs. BMS)
  - TAXUS (PES vs. BMS)
- Randomized studies
  - E-SIRIUS (SES vs. BMS)
  - SES-SMART (SES vs. BMS)
- Registries
  - SVELTE (SES vs. BMS)
  - REVOLUTION (thin strut SES)
  - RESEARCH & T-SEARCH (SES vs. PES)
  - ISAR-SMART 3 (SES vs. PES)
  - Asan Medical Center (SES vs. PES)

SES=sirolimus-eluting stent, PES=paclitaxel-eluting stent, BMS=bare metal stent

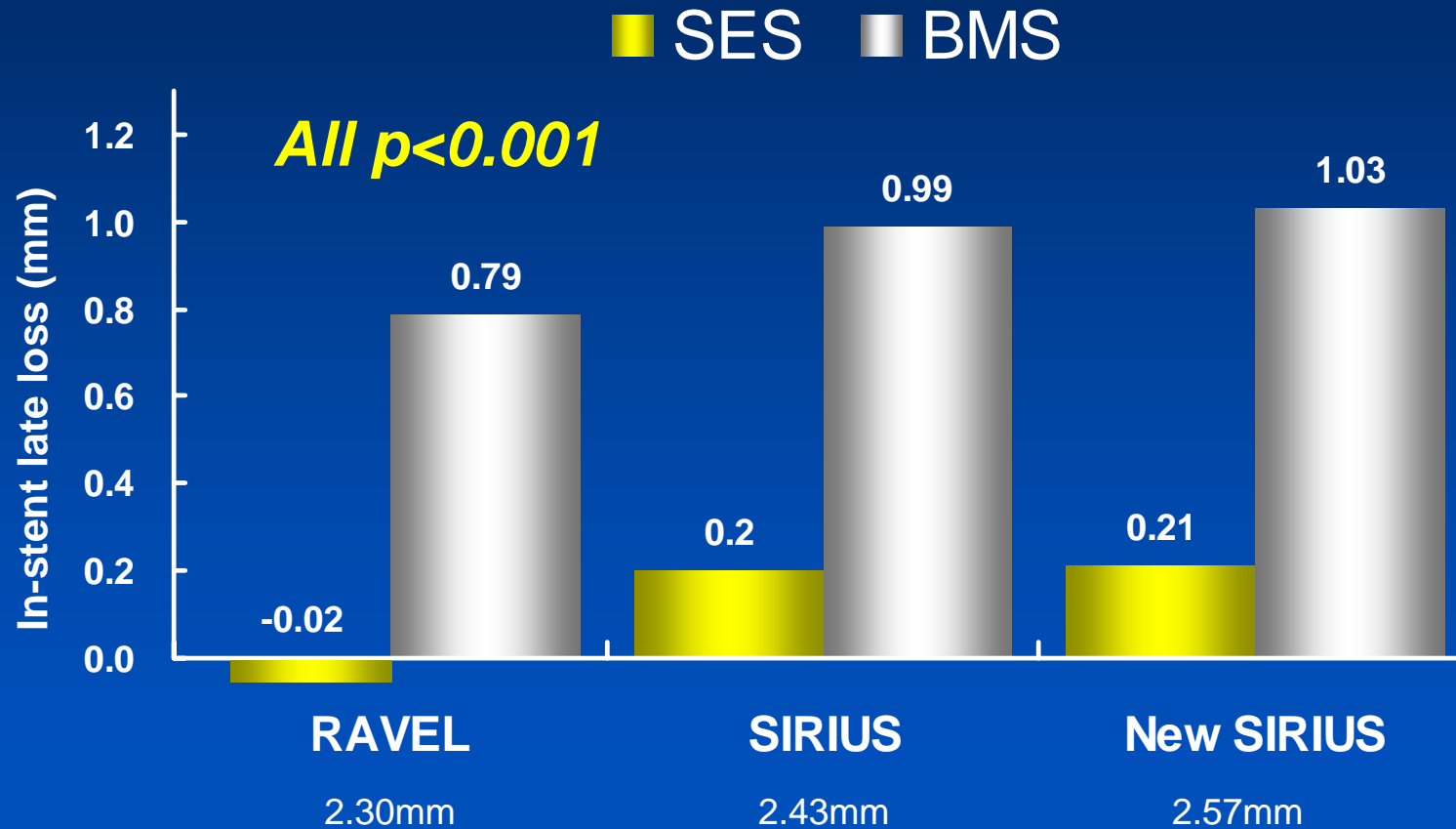
# Evidences

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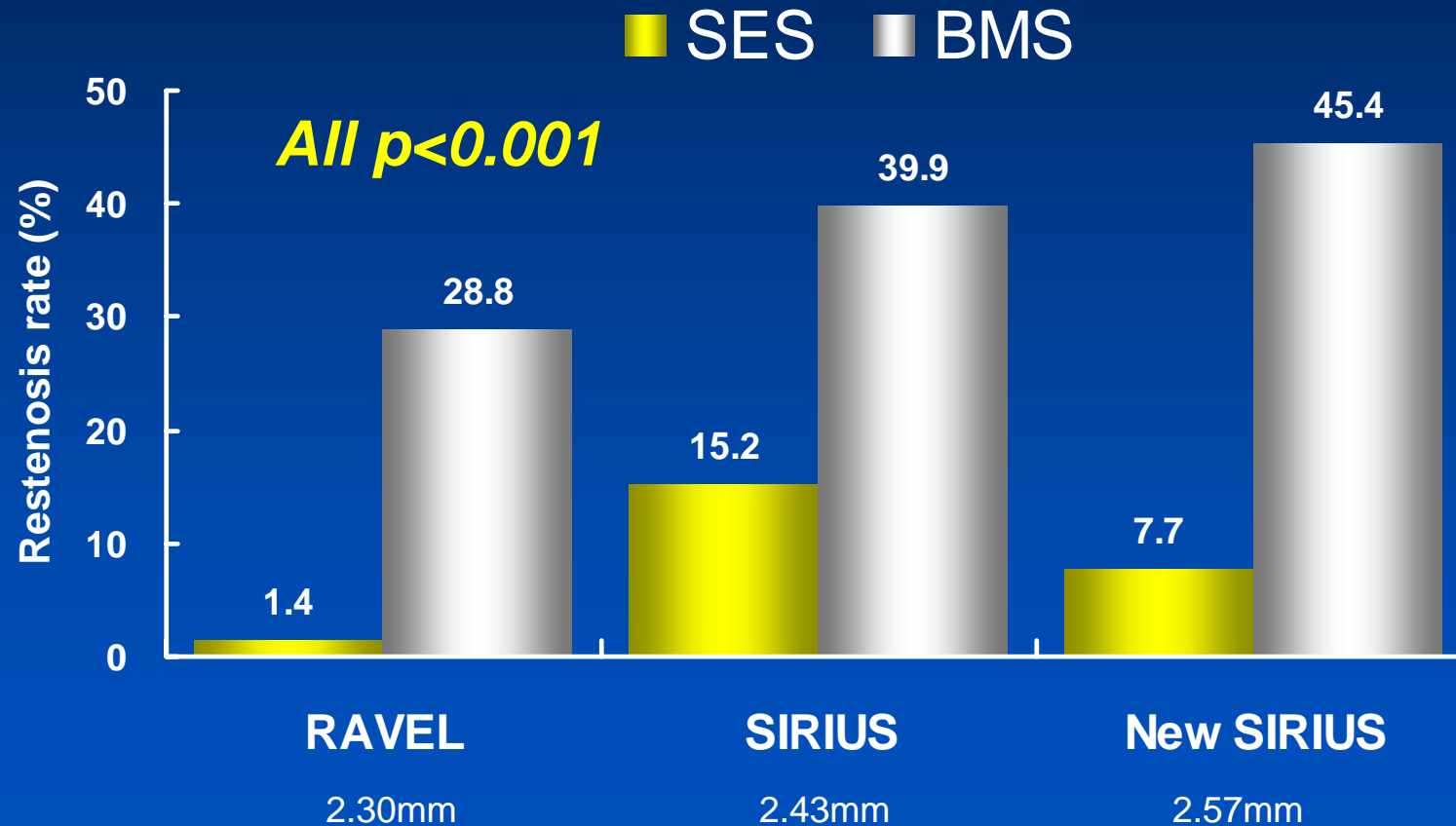
# In-Stent Late Loss

## SES vs. BMS in RVD < 2.75mm



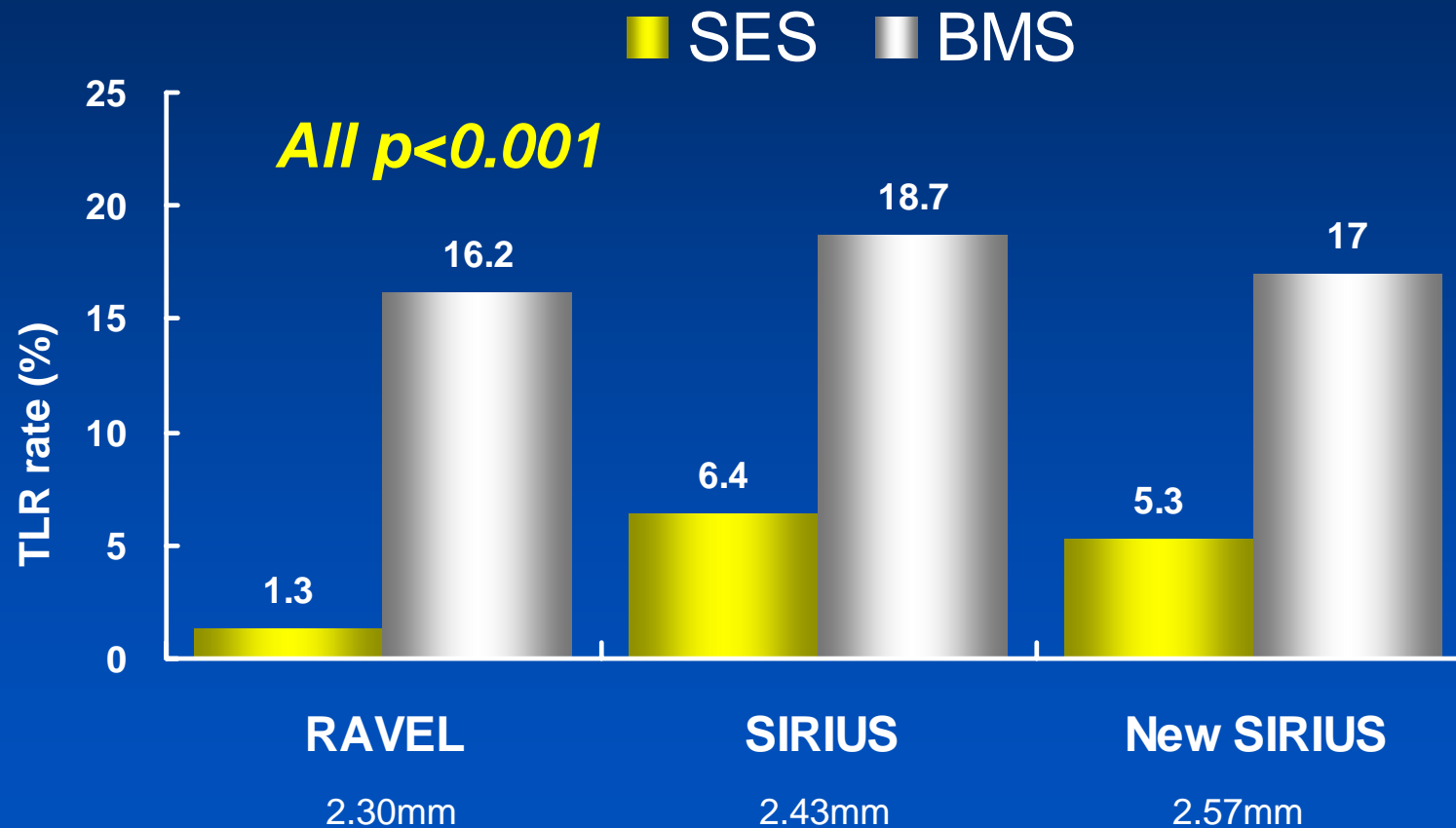
# In-Segment Restenosis

## SES vs. BMS in RVD < 2.75mm



# Nine-Month TLR Rates

## SES vs. BMS in RVD<2.75mm

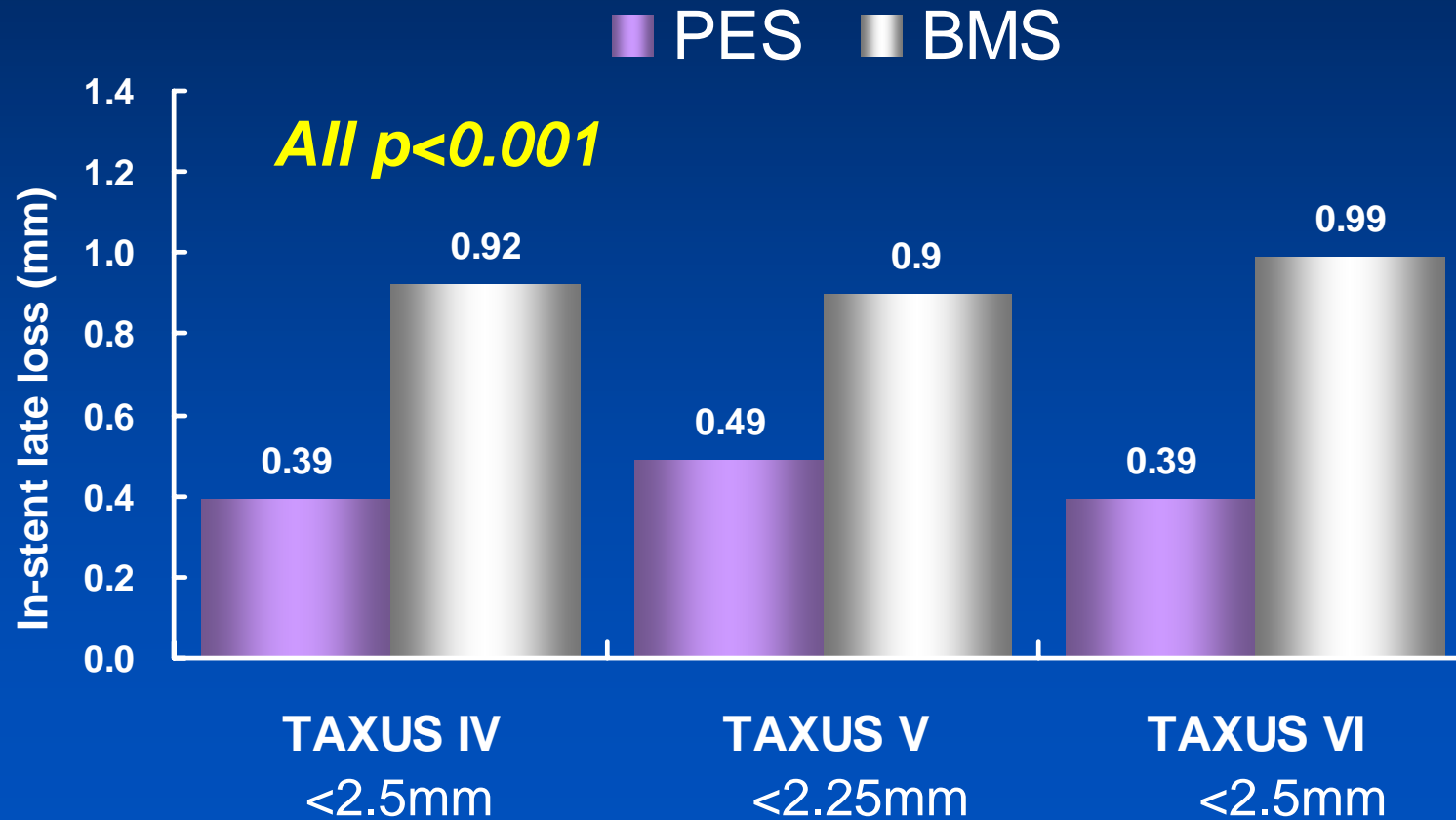


# Paclitaxel-Eluting Stent Taxus IV vs. V vs. VI

	TAXUS IV	TAXUS V	TAXUS VI
No of patients	1,314	1,156	446
Lesion length (mm)	14.4	17.3	20.6
Stent length (mm)	21.9	28.7	33.4
AHA/ACC type C lesions (%)	20.3	36.8	55.6
Small vessels (<2.5mm) (%)	32.1	18.7	27.8
Overlapping stent (%)	Not permit	29.1	27.8
Non-target vessel intervention (%)	20.8	NA	23.5
Diabetes mellitus (%)	23.4	31.7	20.0

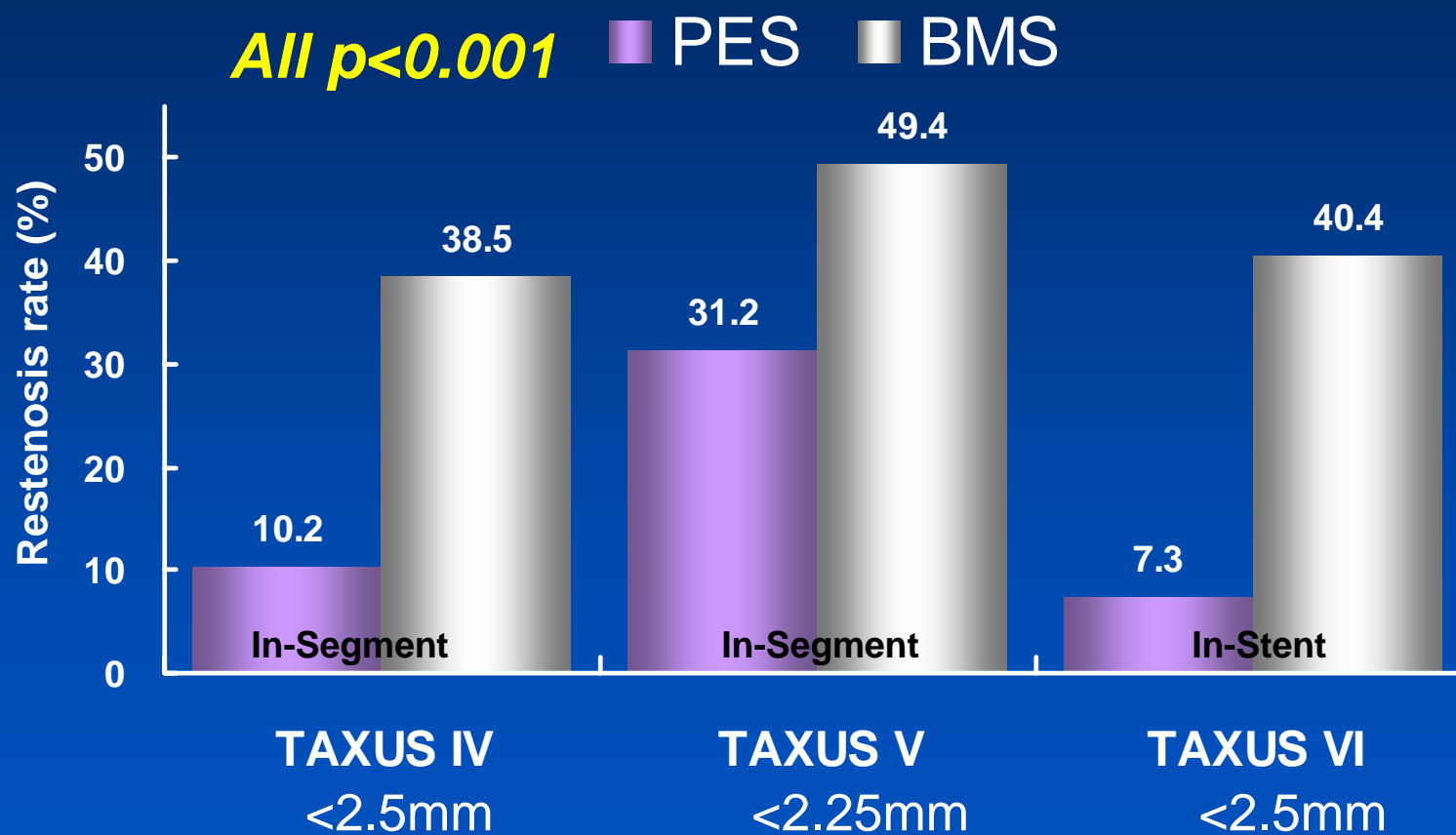
# In-Stent Late Loss at 9 Mo

## PES vs. BMS



# Restenosis at 9 Mo

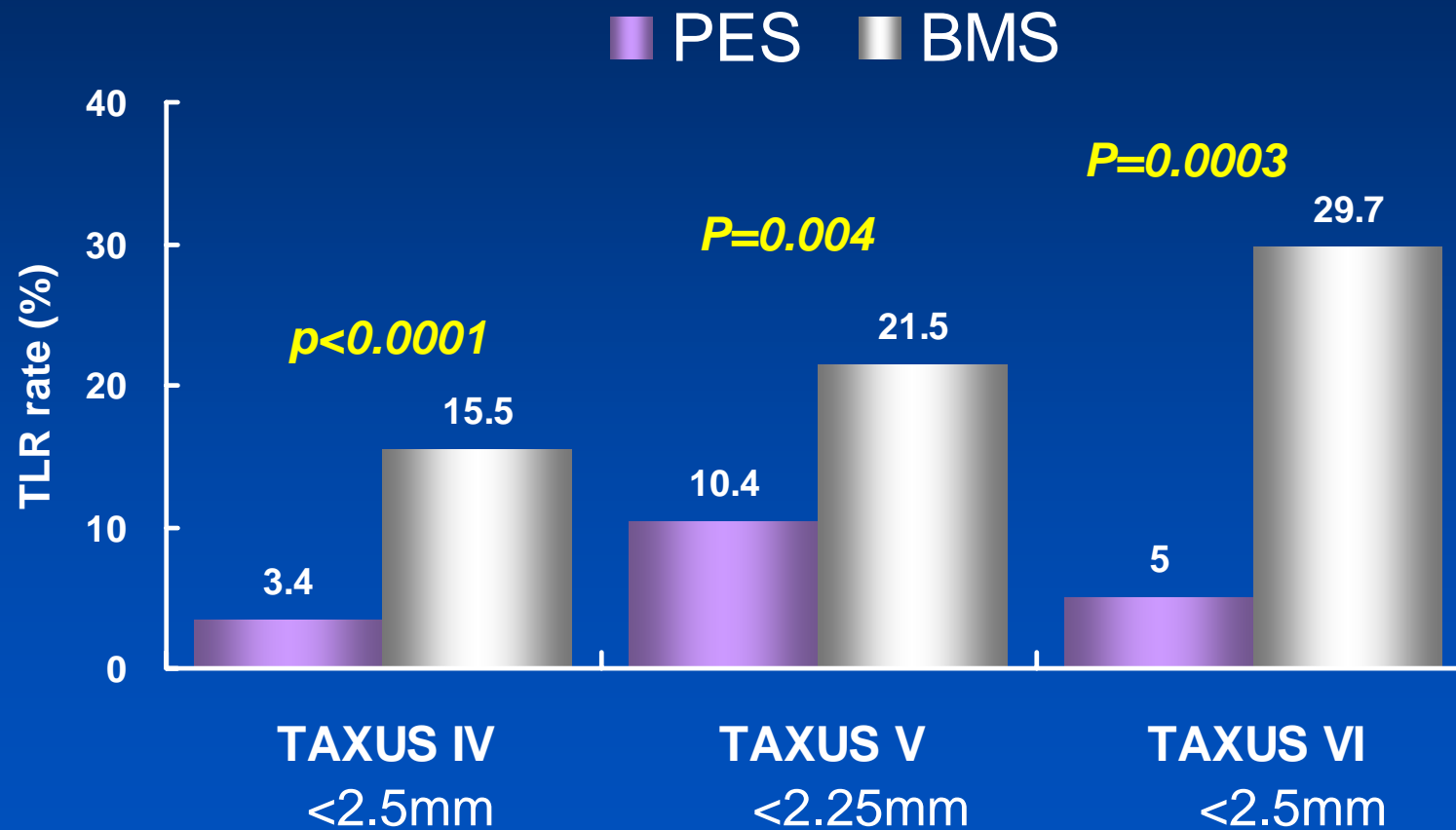
## PES vs. BMS





# TLR Rates at 9 Mo

## PES vs. BMS



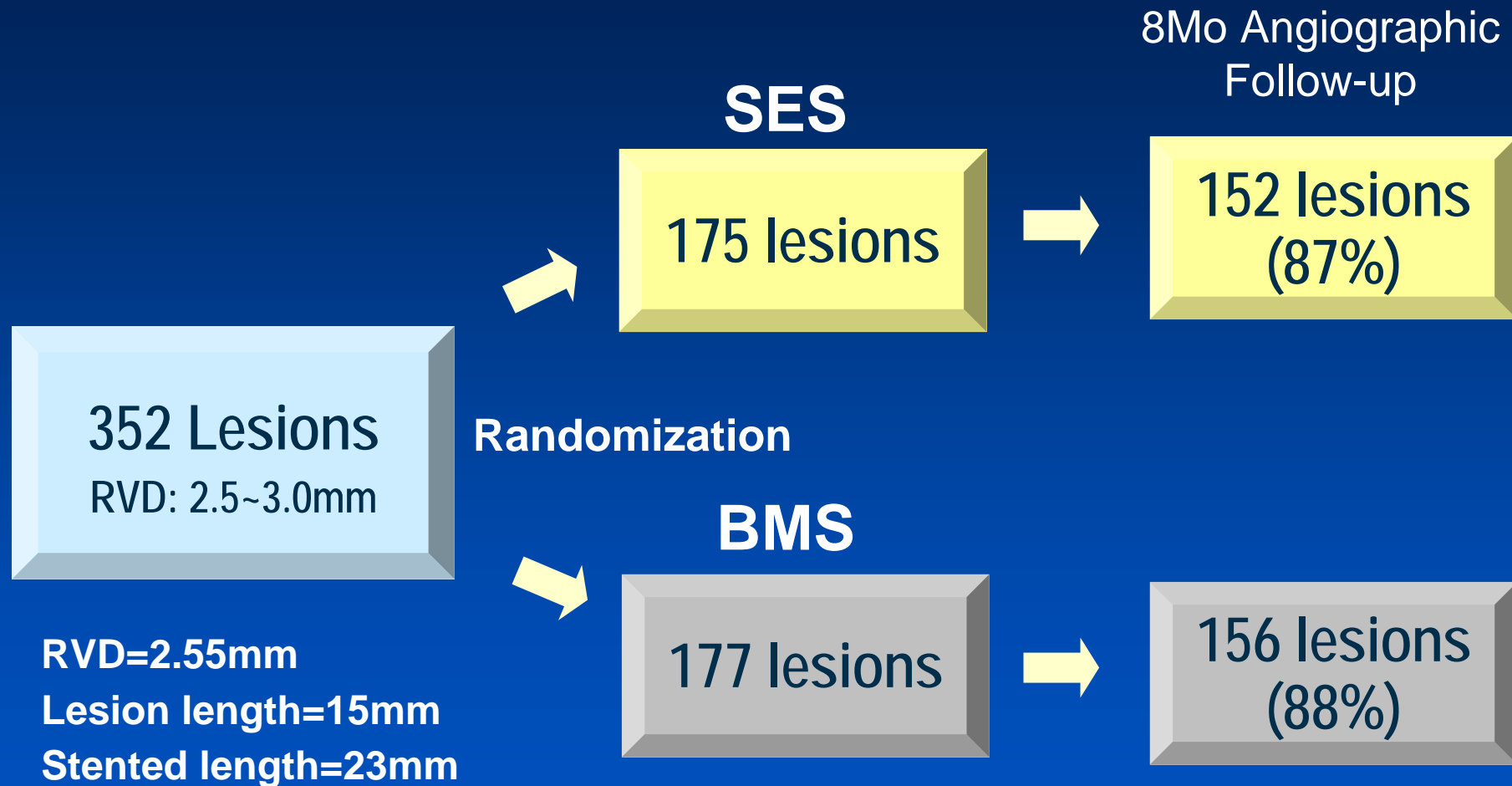
# Evidences

## DES in Small Vessels

- Subgroups of randomized studies
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  - TAXUS (PES vs. BMS)
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# E-SIRIUS Study

## 2.5~3.0mm



Schofer J et al. Lancet 2003;362:1093

# Angiographic Outcomes at 8 Mo

	SES	BMS	p
Reference size, mm	2.61±0.34	2.48±0.32	0.0006
In-stent MLD, mm	2.22±0.48	1.33±0.63	<0.0001
In-segment MLD, mm	1.97±0.48	1.29±0.61	<0.0001
In-stent late loss, mm	0.20±0.38	1.05±0.61	<0.0001
In-segment late loss, mm	0.19±0.38	0.80±0.57	<0.0001
In-stent restenosis	6/152 (3.9%)	65/156 (41.7%)	<0.0001
In-segment restenosis	9/152 (5.9%)	66/156 (42.3%)	<0.0001

Schofer J et al. Lancet 2003;362:1093

# Clinical Outcomes at 9 Mo

	SES (n=175)	BMS (n=177)	P
Death	2 (1.1)	1 (0.6)	0.62
MI	8 (4.6)	4 (2.3)	0.26
Q-MI	2 (1.1)	0 (0)	0.25
Non Q-MI	6 (3.4)	4 (2.3)	0.54
CABG	0 (0)	3 (1.7)	0.25
TLR	7 (4.0)	37 (20.9)	<0.0001
Total	14 (8.0)	40 (22.6)	0.0002

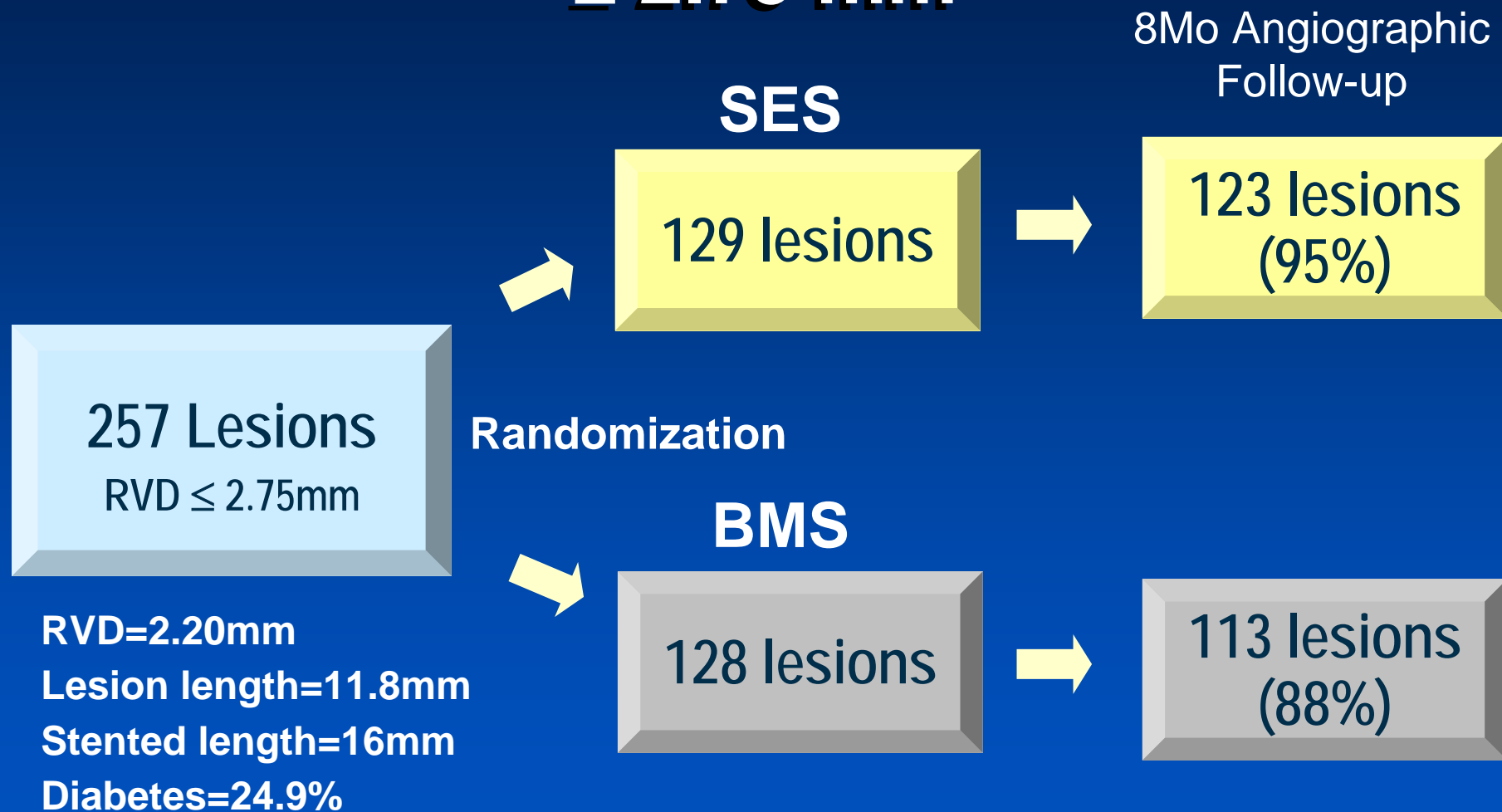
Data are shown as the number (%)

Schofer J et al. Lancet 2003;362:1093



# SES-SMART Study

$\leq 2.75$  mm



Ardissino D et al. JAMA 2004;292:2727

# Angiographic Outcomes at 8 Mo

	SES	BMS	p
In-stent MLD, mm	2.01±0.43	1.20±0.64	<0.001
In-segment MLD, mm	1.70±0.48	1.09±0.60	<0.001
In-stent late loss, mm	0.16±0.38	0.90±0.62	<0.001
In-segment late loss, mm	0.16±0.46	0.69±0.61	<0.001
In-stent restenosis	6/123 (4.9)	55/113 (49.1)	<0.001
In-segment restenosis	12/123 (9.8)	60/113 (53.1)	<0.001

Data are shown as the number (%)

Ardissino D et al. JAMA 2004;292:2727

# Clinical Outcomes at 8 Mo

	SES (n=129)	BMS (n=128)	P
Death	0	2 (1.6)	0.24
MI	2 (1.6)	10 (7.8)	0.04
Q-MI	0	2 (1.6)	0.24
Non Q-MI	2 (1.6)	8 (6.3)	0.06
CVA	1 (0.8)	1 (0.8)	>0.99
TLR	9 (7)	27 (21.1)	0.002
Total	12 (9.3)	40 (31.3)	<0.001

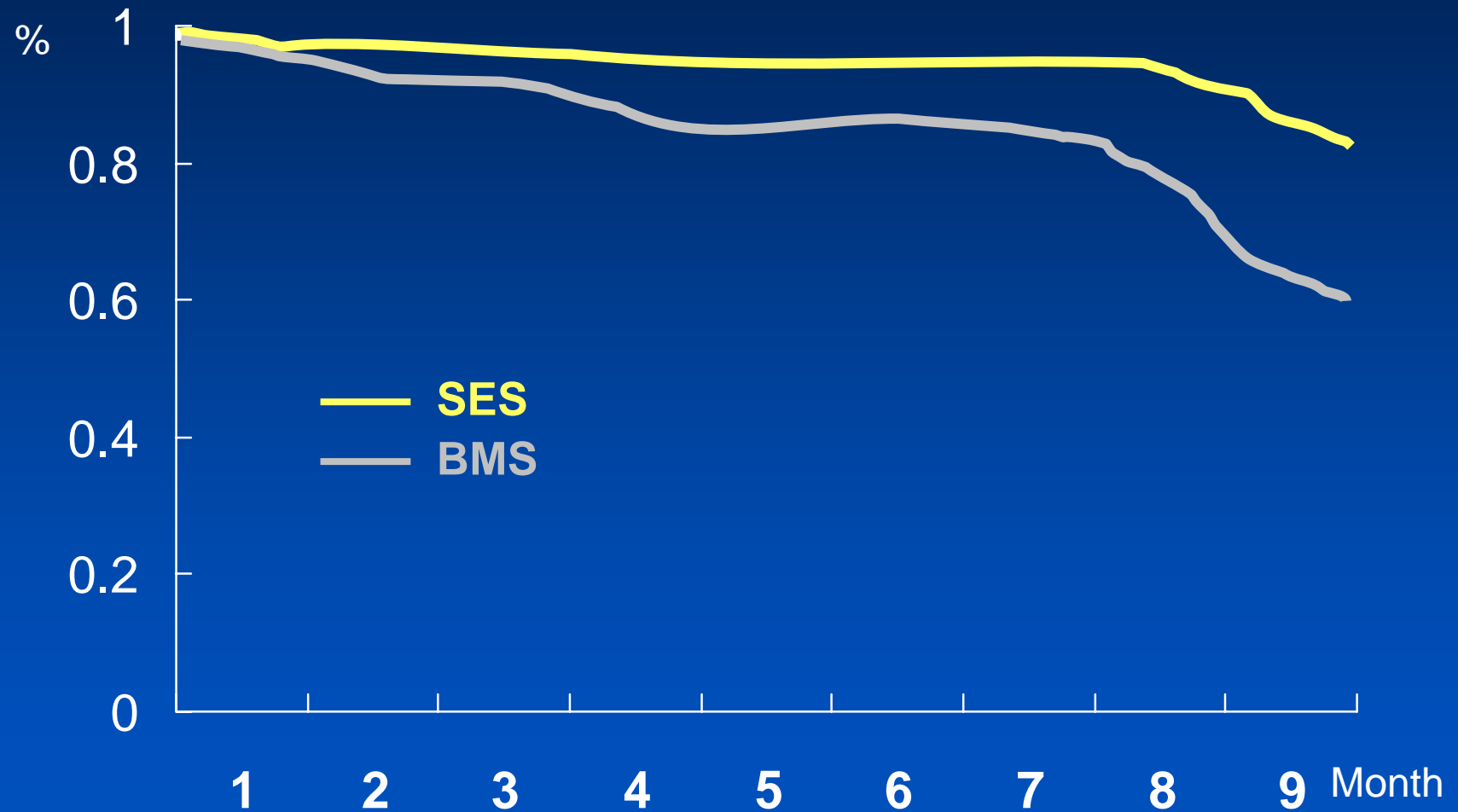
Data are shown as the number (%)

Ardissino D et al. JAMA 2004;292:2727





# Event-free Survival at 9 Mo



# Evidences

## DES in Small Vessels

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# SVELTE Study

101 Lesions  
RVD = 2.25~2.75mm

- Full-lesion coverage
- No edge injury

## SES-SVELTE

101 lesions

8Mo Angiographic  
Follow-up

94.1%

Non-randomized historical comparison

101 Lesions  
RVD=Lowest tertile  
from SIRIUS

## SES from SIRIUS

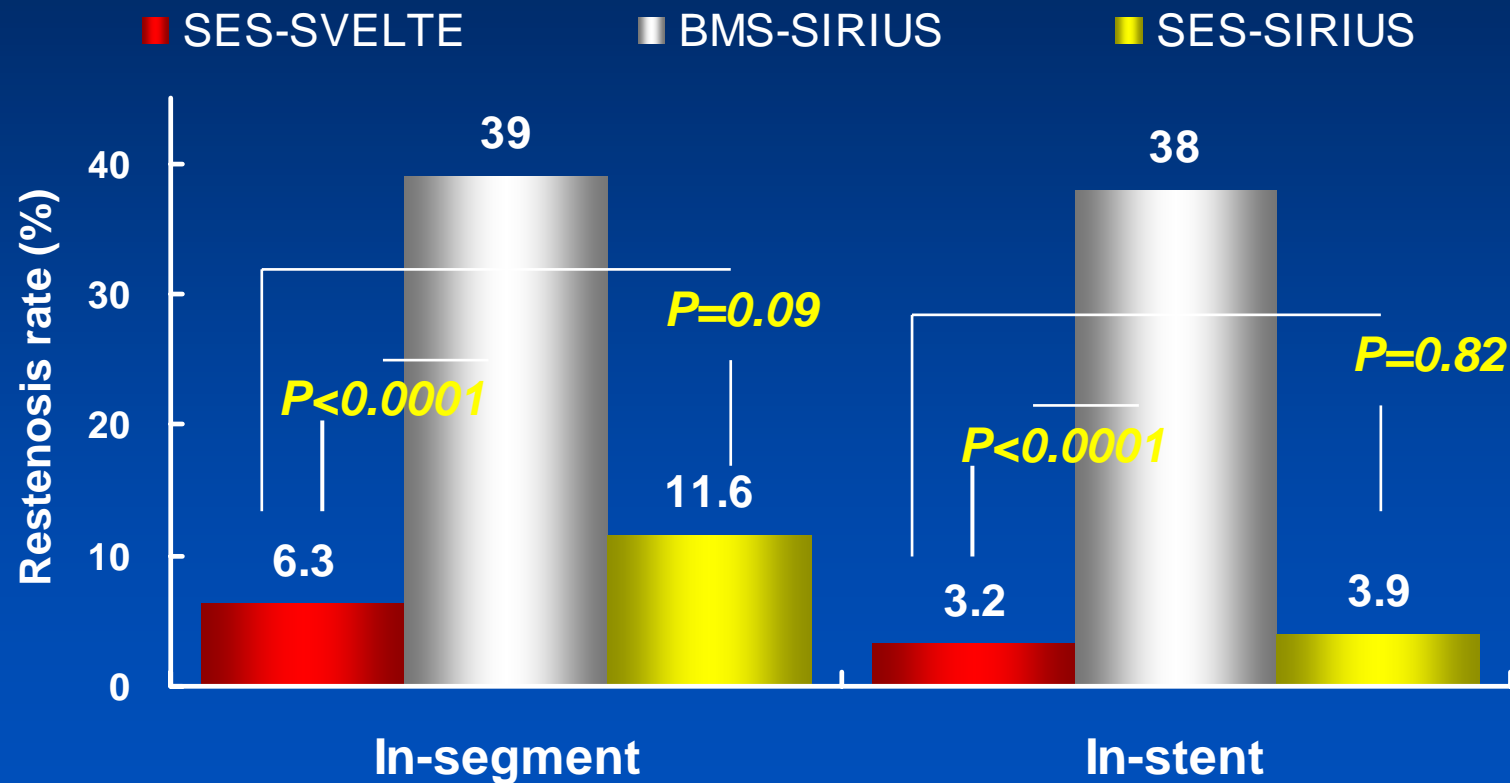
101 lesions

91%

Guagliumi G. TCT 2004

# Restenosis Rate at 8 Mo

## SES-SVELTE vs. BMS-SIRIUS vs. SES-SIRIUS



# EVOLUTION Study

## 2.0-2.5mm

Multicenter registry  
52 patients

- RVD= 2.0 ~ 2.5 mm
- Lesion length < 18mm
- SES heparin coated cobalt-Cr stent

<b>In-stent restenosis</b>	<b>4 (8.0%)</b>
<b>In-segment restenosis</b>	<b>5 (10.0%)</b>
<b>In-stent late loss</b>	<b>0.30 ± 0.44 mm</b>
<b>In-segment late loss</b>	<b>0.28 ± 0.45 mm</b>

Abizaid. TCT 2004



# Integrate Analysis of SES studies

## Angiographic Results

Small Vessels in Ravel, Sirius, New-Sirius, Direct and Svelte

	SES (n=909)	BMS (n=631)	p
In-stent late loss, mm	0.18	1.02	<0.0001
In-segment late loss, mm	0.21	0.81	<0.0001
In-stent restenosis, %	3.2%	38.5%	<0.0001
In-segment restenosis, %	6.9%	39.8%	<0.0001

Abizaid. TCT 2004



# Integrate Analysis of SES studies

## Clinical Results

in Small Vessels of Ravel, Sirius, New-Sirius, Direct and Svelte

	SES (n=909)	BMS (n=631)	p
Death	1.0%	0.7%	0.633
Q-MI	0.8%	0.3%	0.259
Non-Q MI	1.9%	2.9%	0.183
TVR	2.8%	3.4%	0.442
TLR	3.5%	17.1%	<0.0001
MACE	6.4%	19.4%	<0.0001

Abizaid. TCT 2004



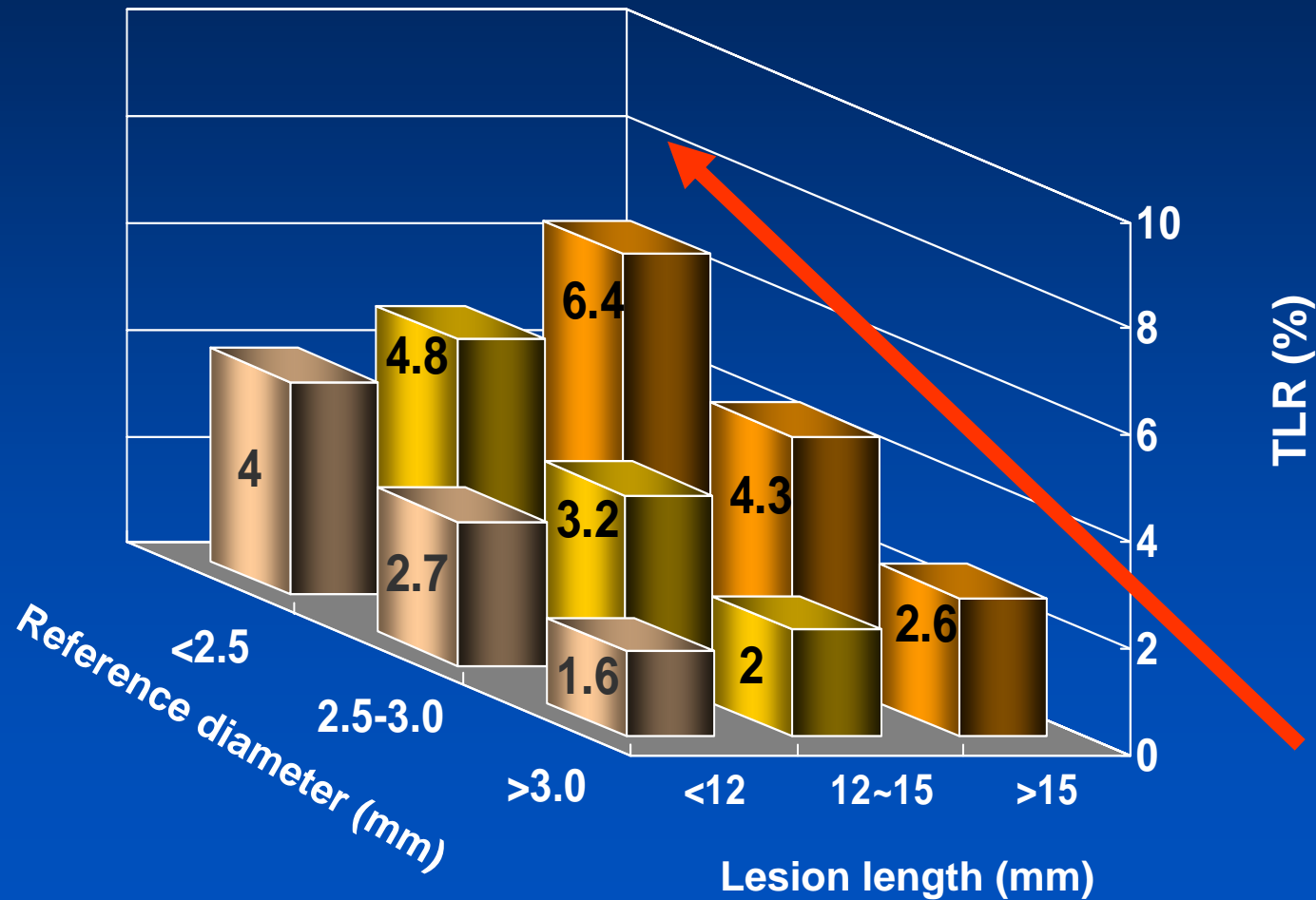
# DES in Small Coronary Lesions

## Impact of Small Diameter



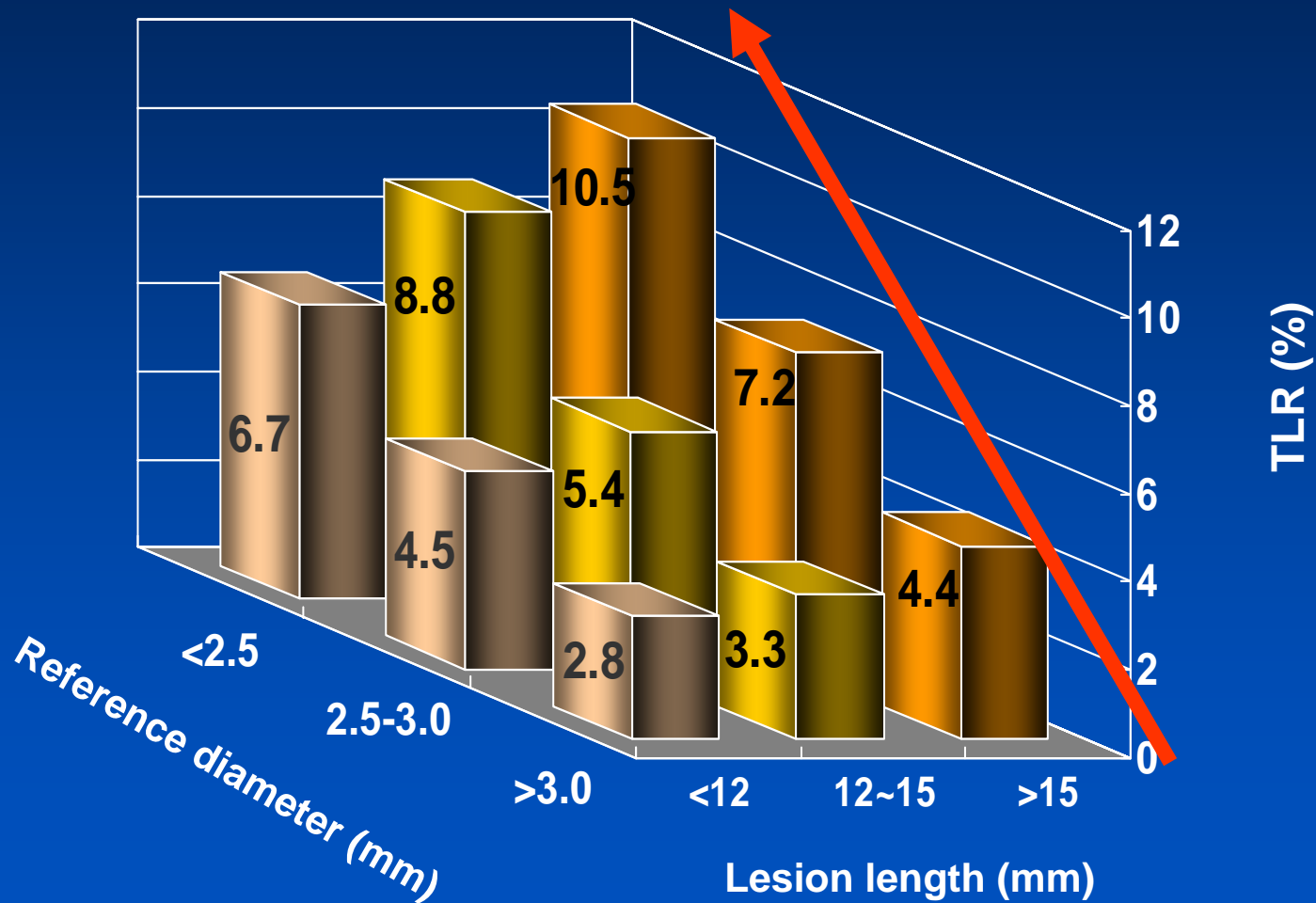
# Predictors of TLR

In non-diabetics from Ravel, Sirius, New-Sirius, Direct and Svelte



# Predictors of TLR

In diabetics from Ravel, Sirius, New-Sirius, Direct and Svelte



# DES vs. BMS in Small Vessels

- In patients with small coronary lesions, the treatment with DES (either Cypher or Taxus), compared to the BMS, is associated with a dramatic reduction of angiographic and clinical events as the other coronary lesion subsets.
- However, the small coronary vessel remains an independent predictor of angiographic restenosis even in the DES era.

# Small Vessel Disease

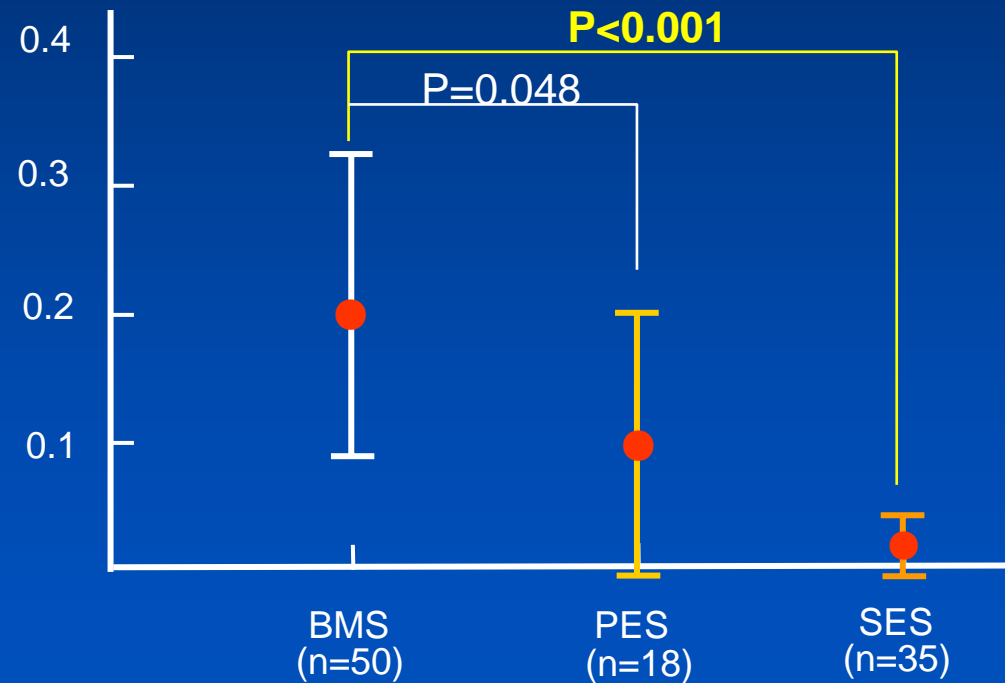
## DES vs. BMS

# IVUS Comparison of IH

BMS (Multi-Link) vs. PES (ACHIEVE) vs. SES

LL: 11.7mm, RVD: 2.6mm, DS:68.3%

## 6Mo Intimal Hyperplasia Thickness



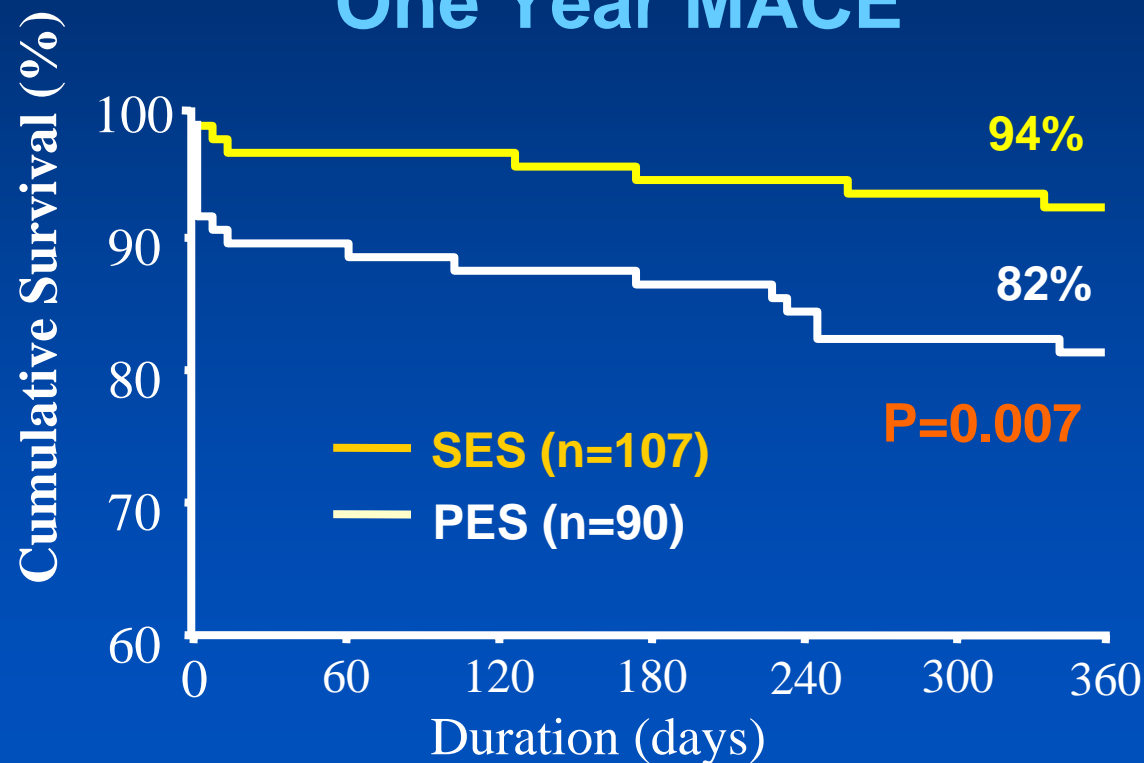
Hoffmann R. et al. Am J Cardiol 2004

# Comparison of Very Small Vessels in RESEARCH vs. T-SEARCH Registries

2.25mm SES and PES stents

RVD: 1.90mm, MLD: 0.52mm, DS:72.4%, Stent length: 17.8mm

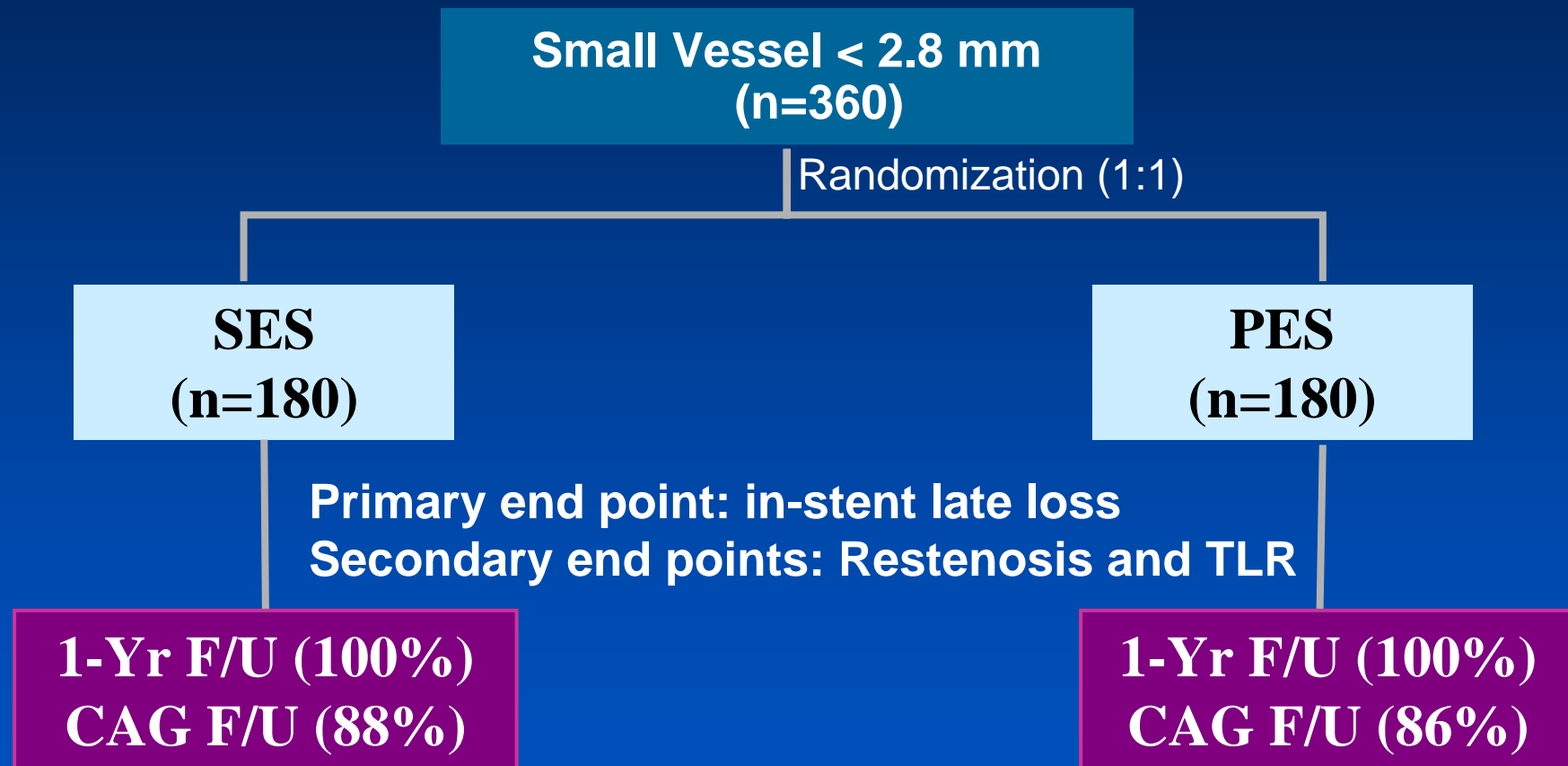
## One Year MACE



Rodriguez-Granillo GA. et al. J Invasive Cardiol 2005

# SES vs PES for Small Vessels

## ISAR-SMART 3 study



*Mehilli J. et al Eur Heart J 2006;27:260*

# Angiography before Procedure

	<b>TAXUS (n=204)</b>	<b>CYPHER (n=198)</b>	<b>P</b>
<b>Vessel size (mm)</b>	<b>2.40±0.38</b>	<b>2.44±0.38</b>	<b>0.34</b>
<b>Lesion length (mm)</b>	<b>11.7±6.7</b>	<b>12.9±8.0</b>	<b>0.12</b>
<b>MLD (mm)</b>	<b>10.3±0.39</b>	<b>0.99±0.40</b>	<b>0.33</b>
<b>DS (%)</b>	<b>57.2±14.4</b>	<b>59.4±15.3</b>	<b>0.15</b>
<b>Type B2/C lesions, n (%)</b>	<b>151 (74)</b>	<b>142 (72)</b>	<b>0.60</b>

*Mehilli J. et al Eur Heart J 2006;27:260*



# Angiography after Procedure

	TAXUS (n=204)	CYPHER (n=198)	P
Length of stent (mm)	21.0±7.8	21.4±9.8	0.65
<b>MLD</b>			
in-stent (mm)	2.44±0.37	2.44±0.36	0.80
in-segment (mm)	2.00±0.47	2.04±0.47	0.41
<b>DS</b>			
in-stent (%)	6.3±7.7	5.6±7.5	0.36
in-segment (%)	18.5±7.2	16.7±7.7	0.05

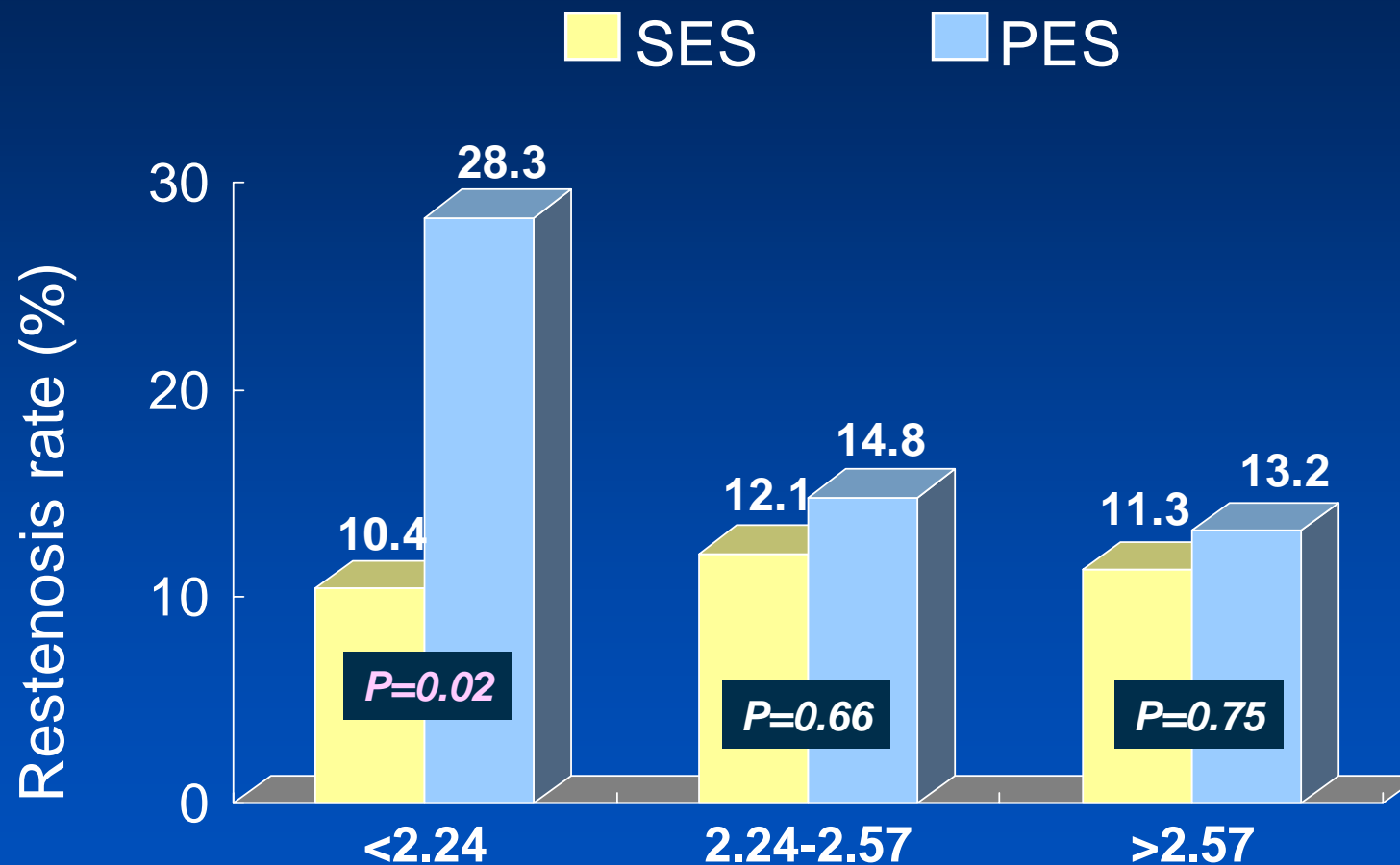
*Mehilli J. et al Eur Heart J 2006;27:260*

# Angiography at Follow-up

	TAXUS (n=204)	CYPHER (n=198)	P
<b>MLD</b>			
in-stent (mm)	1.88±0.67	2.21±0.66	<0.001
in-segment (mm)	1.67±0.63	1.91±0.61	<0.001
<b>Late lumen loss</b>			
in-stent (mm)	0.56±0.59	0.25±0.55	<0.001
in-segment (mm)	0.34±0.57	0.13±0.56	<0.001
<b>Binary restenosis</b>			
in-stent, n (%)	26 (14.9)	14 (8.0)	0.04
in-segment, n (%)	33 (19.0)	20 (11.4)	0.047

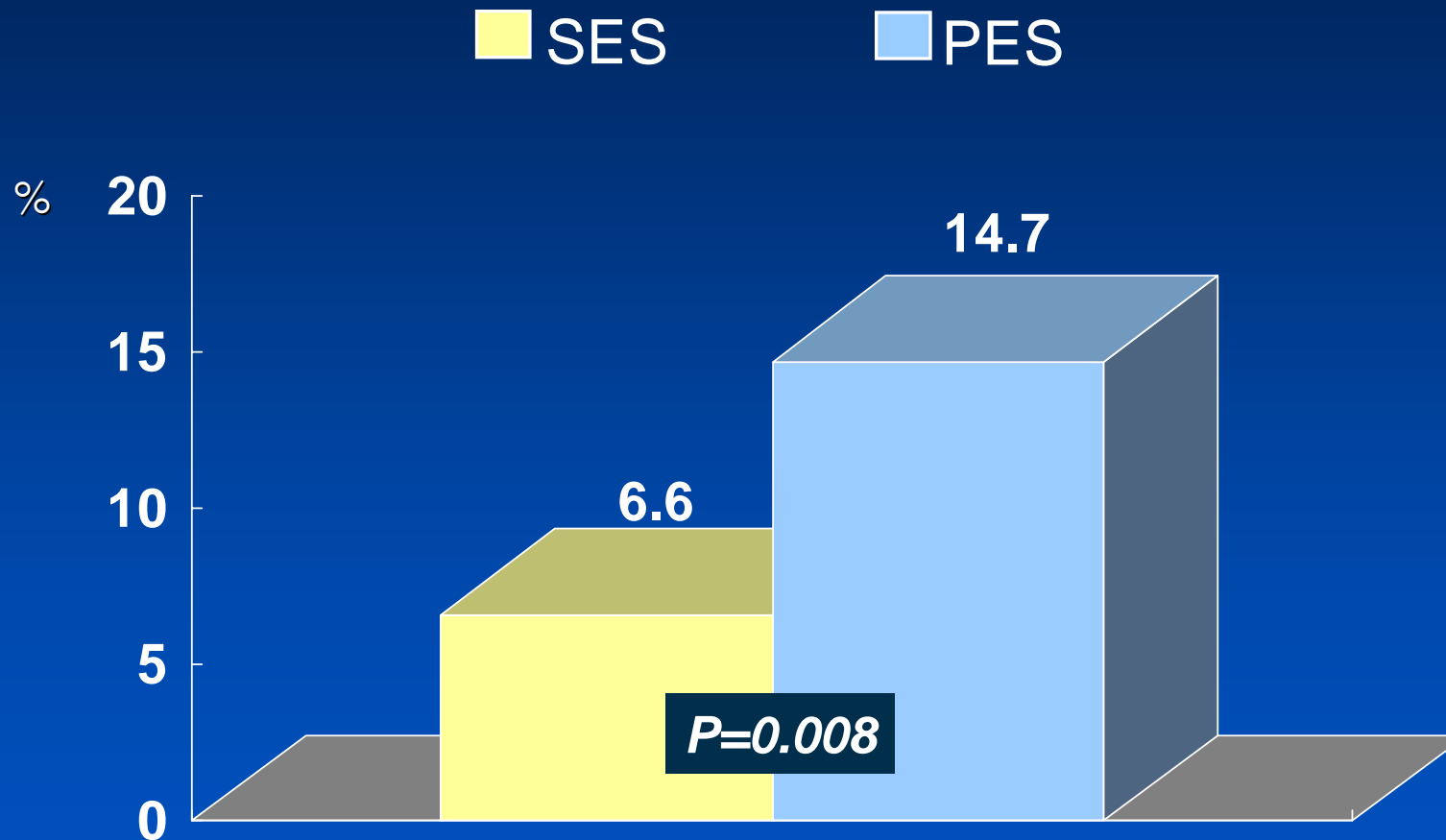
*Mehilli J. et al Eur Heart J 2006;27:260*

# Impact of Vessel Size on Restenosis



*Mehilli J. et al Eur Heart J 2006;27:260*

# Target Lesion Revascularization



*Mehilli J. et al Eur Heart J 2006;27:260*

# AMC Experience in Small Vessel Disease

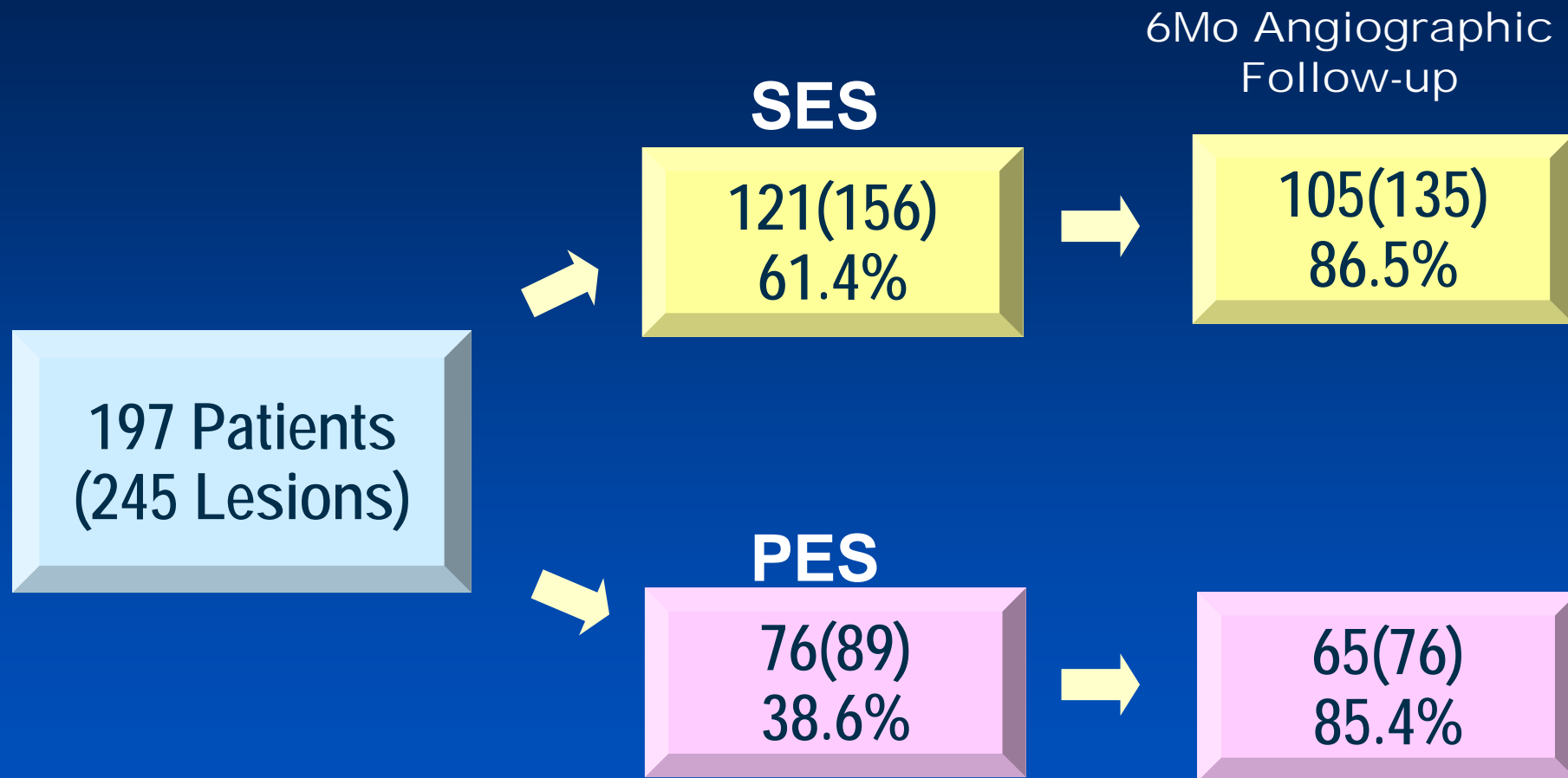


# Subjects

- Between June 2003 and July 2004
- Inclusion criteria
  - Reference diameter  $\leq 2.75\text{mm}$
  - Diameter stenosis  $\geq 70\%$
- Exclusion criteria
  - AMI within 48 hrs
  - LVEF  $\leq 40\%$
  - LM, Bifurcation, CTO and ISR lesions
  - History. of PCI or CABG

*KH Park. Catheter Cardiovasc Interv 2006;67:589*

# Subjects $\leq 2.75$ mm



*KH Park. Catheter Cardiovasc Interv 2006;67:589*

# Baseline Characteristics

	SES (n=121)	PES (n=76)	P- Value
Age, yrs	61.0±8.6	59.2±10.6	0.22
Male, n (%)	76 (62.8)	54 (71.0)	0.28
LVEF, %	59.1±8.5	58.8±7.6	0.79
Hypertension, n (%)	62 (51.2)	34 (44.7)	0.38
Diabetes mellitus, n (%)	39 (32.2)	21 (24.5)	0.53
Current smoker, n (%)	35 (28.9)	28 (36.8)	0.21
Hypercholesterolemia, n (%)	39 (32.2)	30 (39.5)	0.36
ACS	61 (50.4)	33 (43.3)	0.20

*KH Park. Catheter Cardiovasc Interv 2006;67:589*



# Angiographic and Procedural Results

	SES (n=156)	PES (n=89)	P- Value
Multivessel, n (%)	62 (76.0)	63 (82.8)	0.51
Lesion location			0.21
LAD, n (%)	52 (52.6)	53 (59.6)	
LCX, n (%)	50 (32.0)	20 (22.4)	
RCA, n (%)	24 (15.3)	16 (18.0)	
Total stent length (mm)	31.4±17.5	32.8±14.4	0.69
Maximal pressure (atm)	15.9±3.0	15.1±2.9	0.09
Maximal device diameter (mm)	2.91±0.2	3.0±0.22	0.23

*KH Park. Catheter Cardiovasc Interv 2006;67:589*

# Baseline QCA

	Cypher (n=156)	Taxus (n=89)	P- Value
<b>Baseline</b>			
Lesion length (mm)	25.2±14.7	27.1±12.7	0.34
Reference (mm)	2.47±0.21	2.44±0.25	0.19
MLD (mm)	0.86±0.33	0.81±0.42	0.31
Diameter stenosis (%)	65.4±13.0	67.5±16.0	0.22
<b>After procedure</b>			
MLD (mm)	2.52±0.33	2.42±0.35	0.45
Diameter stenosis (%)	3.7±7.1	5.8±8.3	0.06
Stent length (mm)	31.4±17.5	32.8±14.4	0.69

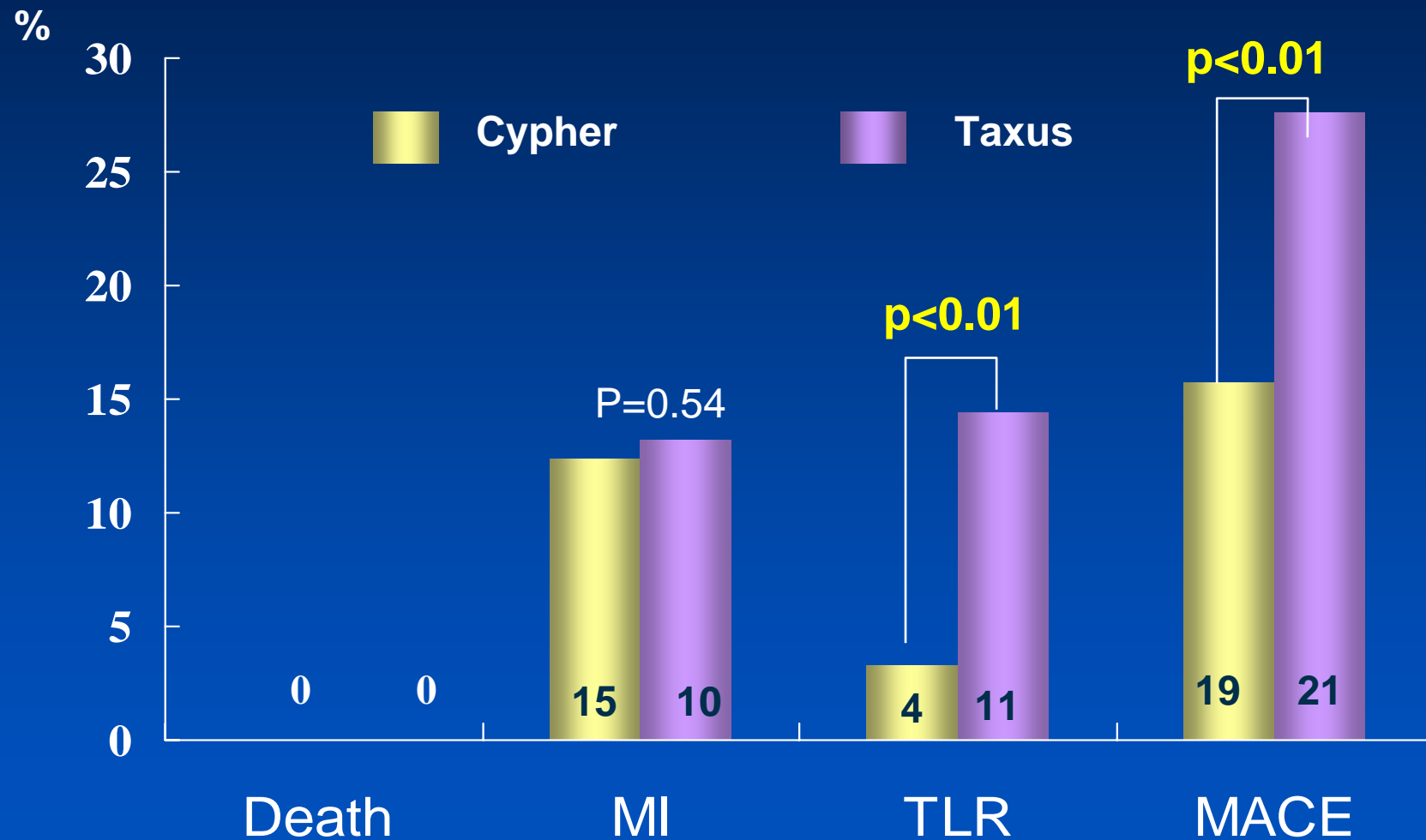
*KH Park. Catheter Cardiovasc Interv 2006;67:589*

# QCA at 6 months

	Cypher	Taxus	P- Value
Lesions, n (%)	135 (86.5)	76 (85.4)	0.85
Reference (mm)	2.46±0.28	2.43±0.39	0.54
MLD (mm)	2.32±0.56	1.77±0.77	<0.001
DS (%)	5.38±22.5	31.7±34.9	<0.001
Late loss (mm)	0.29±0.42	0.69±0.62	<0.001
Restenosis, n (%)	9 (6.7)	21 (27.7)	<0.001

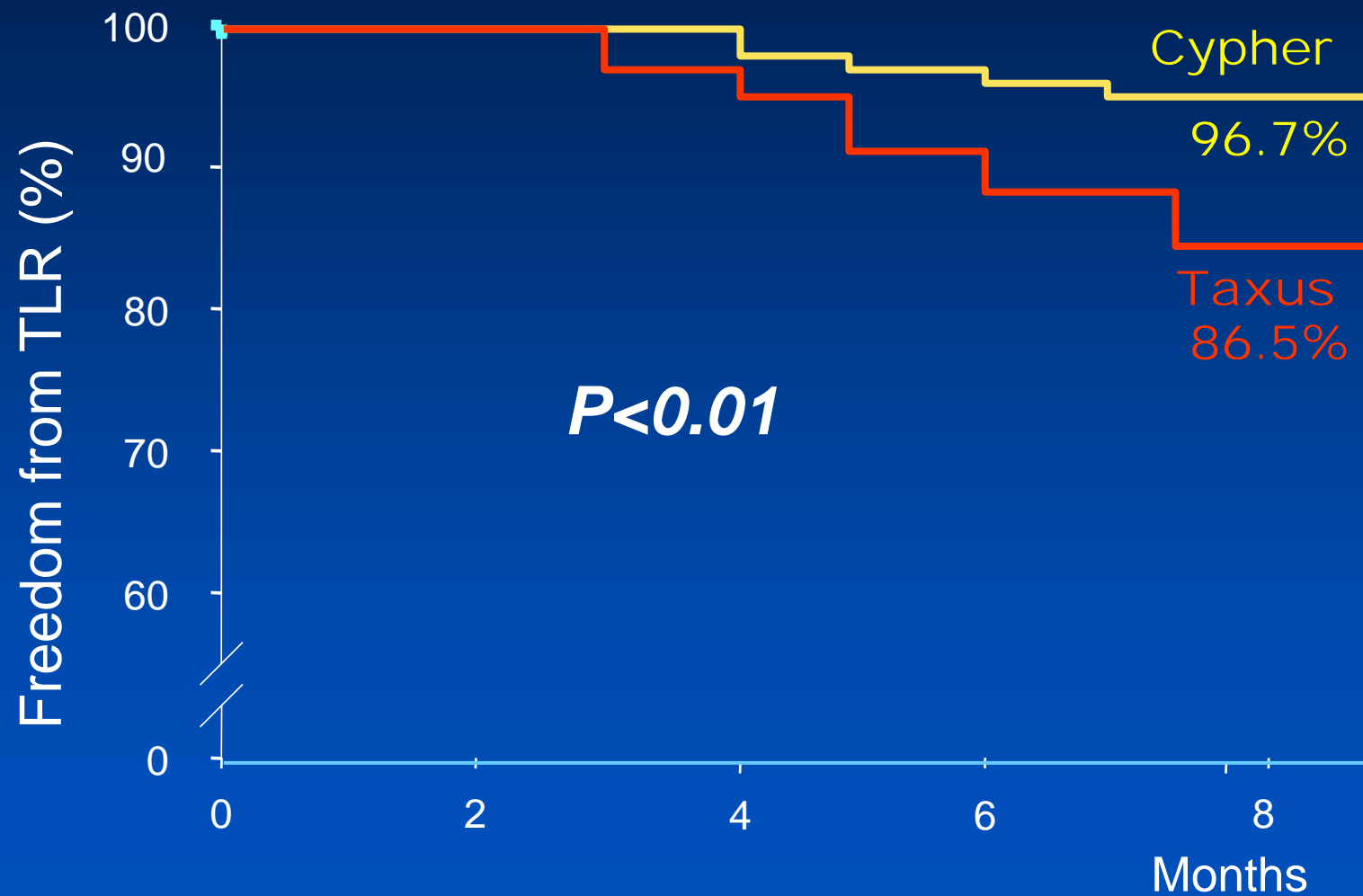
*KH Park. Catheter Cardiovasc Interv 2006;67:589*

# Clinical outcomes at 9Mo



*KH Park. Catheter Cardiovasc Interv 2006;67:589*

# Freedom from TLR at 9Mo



*KH Park. Catheter Cardiovasc Interv 2006;67:589*

# SES vs. PES in Small Vessels

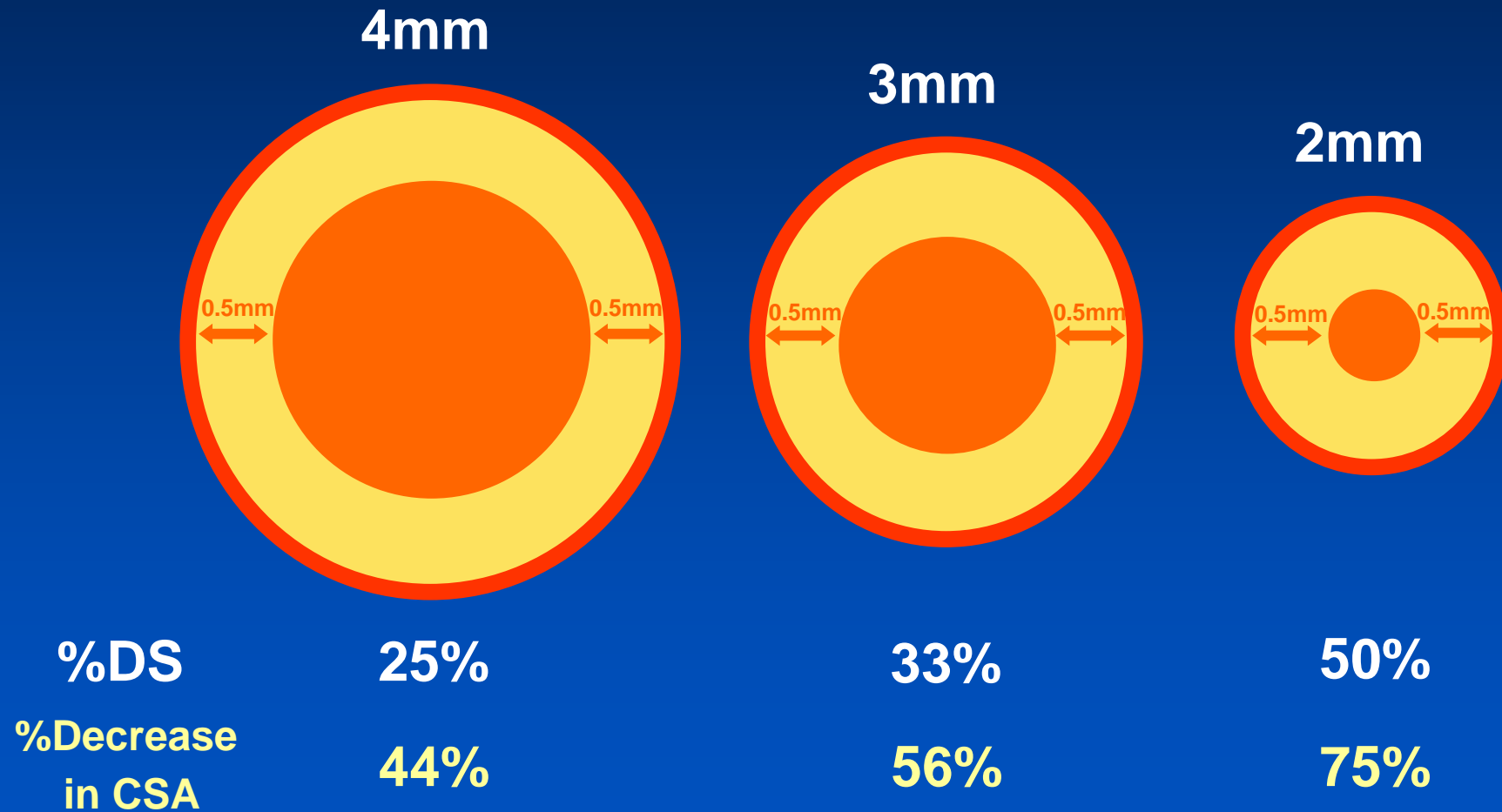
- In patients with small vessels, use of the SES appears to be associated with a decrease in the extent of late luminal loss, angiographic restenosis, and the need of target lesion revascularization, as compared to use of the PES.
- Our finding in the AMC registry was in line with the recent randomized studies comparing the efficacy of SES versus PES.
- However, a randomized study for small coronary lesions is warranted to verify this registry result.

# New DES for Small Vessels



# Greater impact of late loss in small vessel

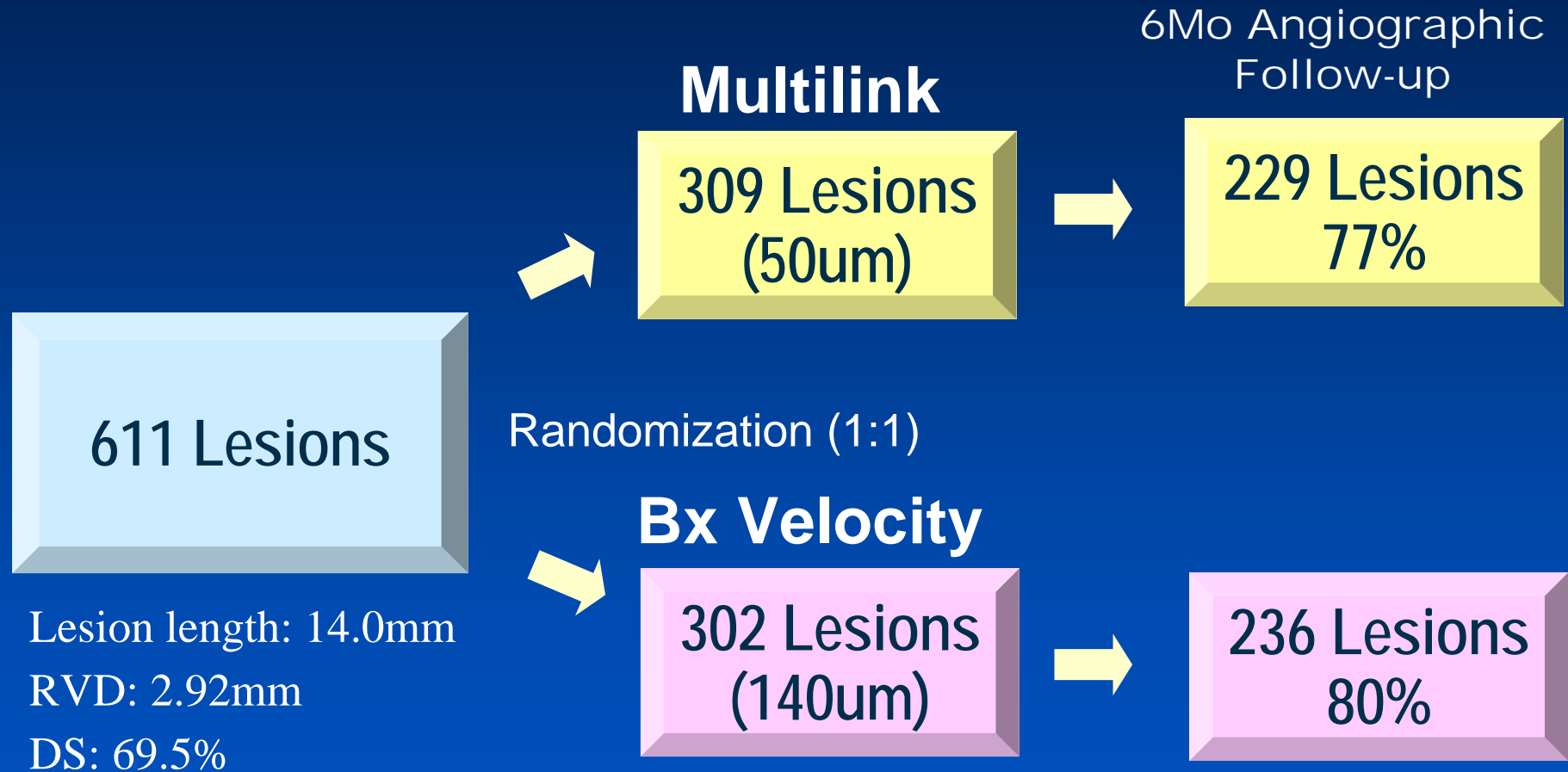
## Late Loss 1mm





# ISAR-STEREO-2

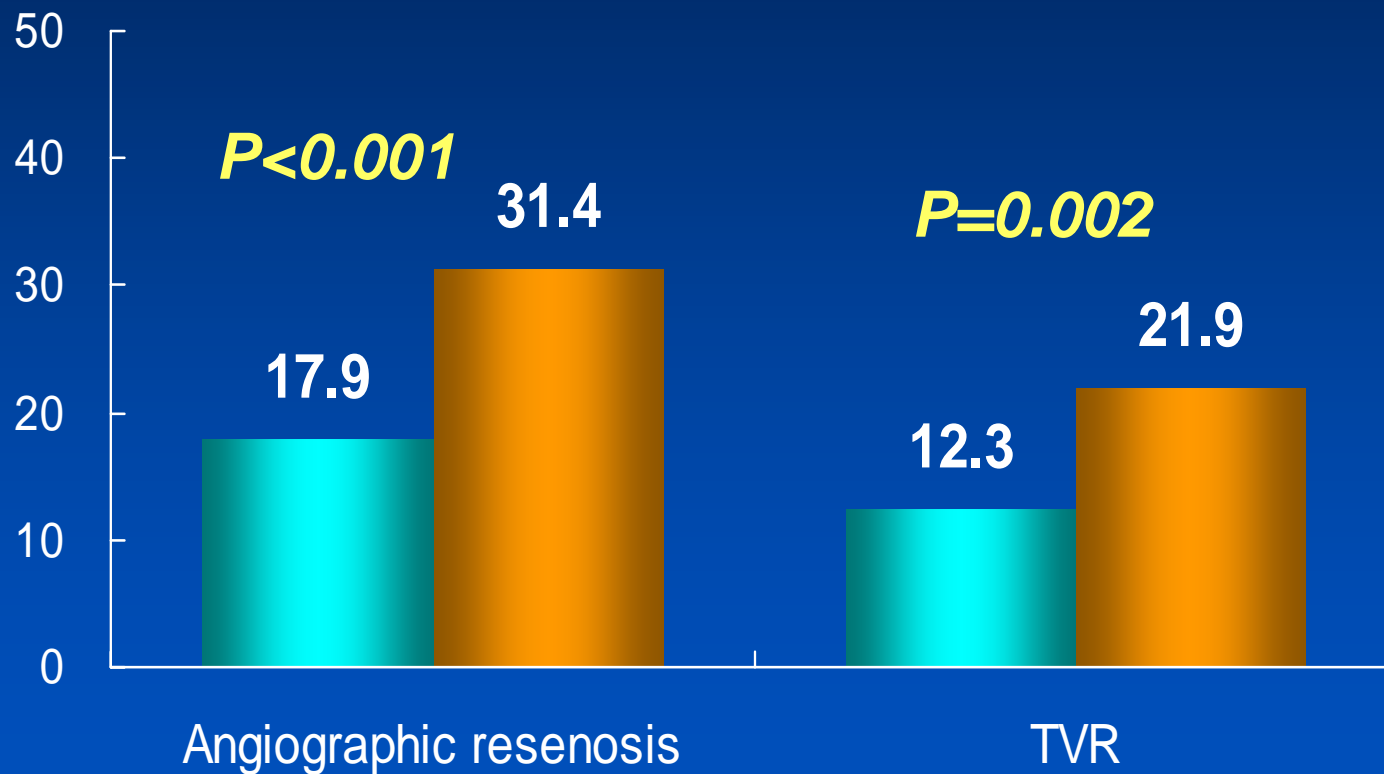
## BMS Study



Pache J et al. J Am Coll Cardiol 2003;41:1283

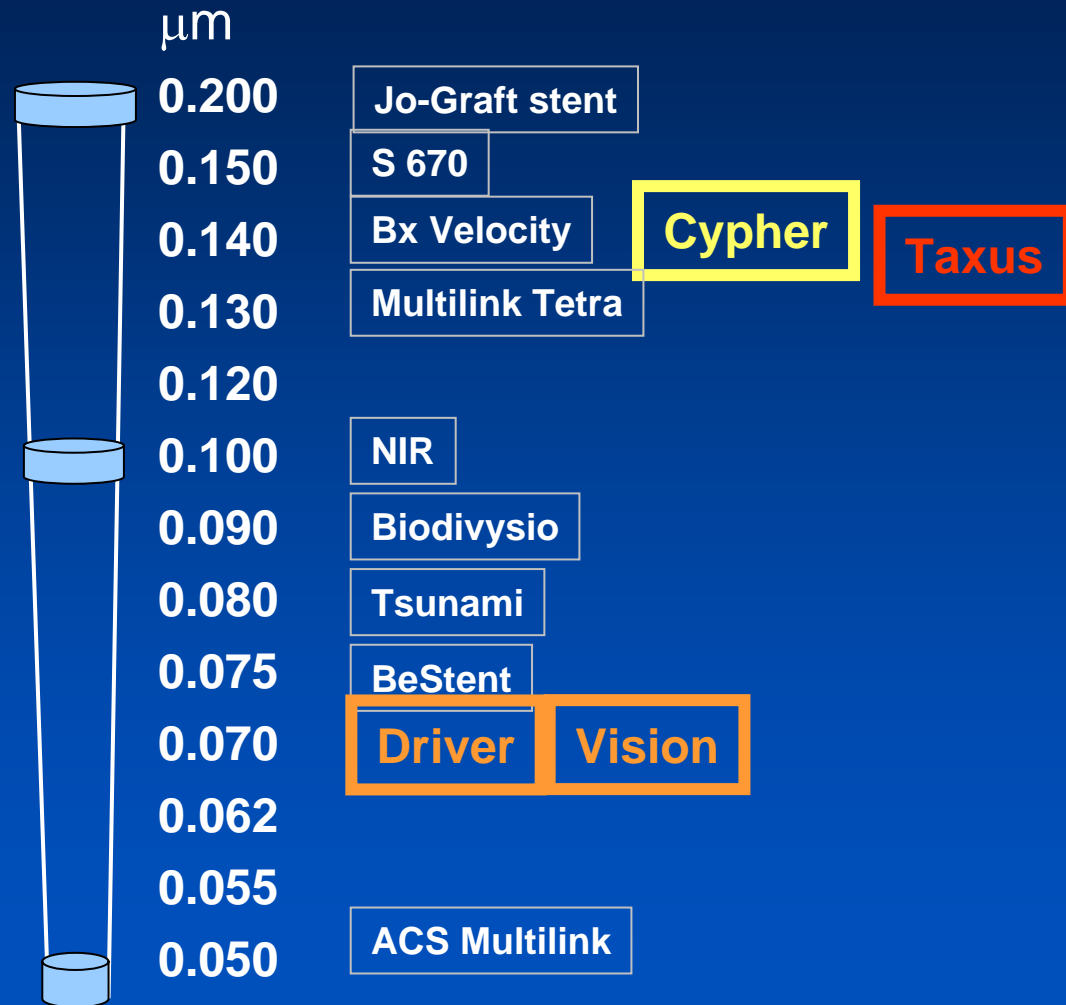
# Angiographic and Clinical Outcomes

■ Thin-strut ■ Thick-strut



Pache J et al. J Am Coll Cardiol 2003;41:1283

# Thin Strut BMS vs. DES ?



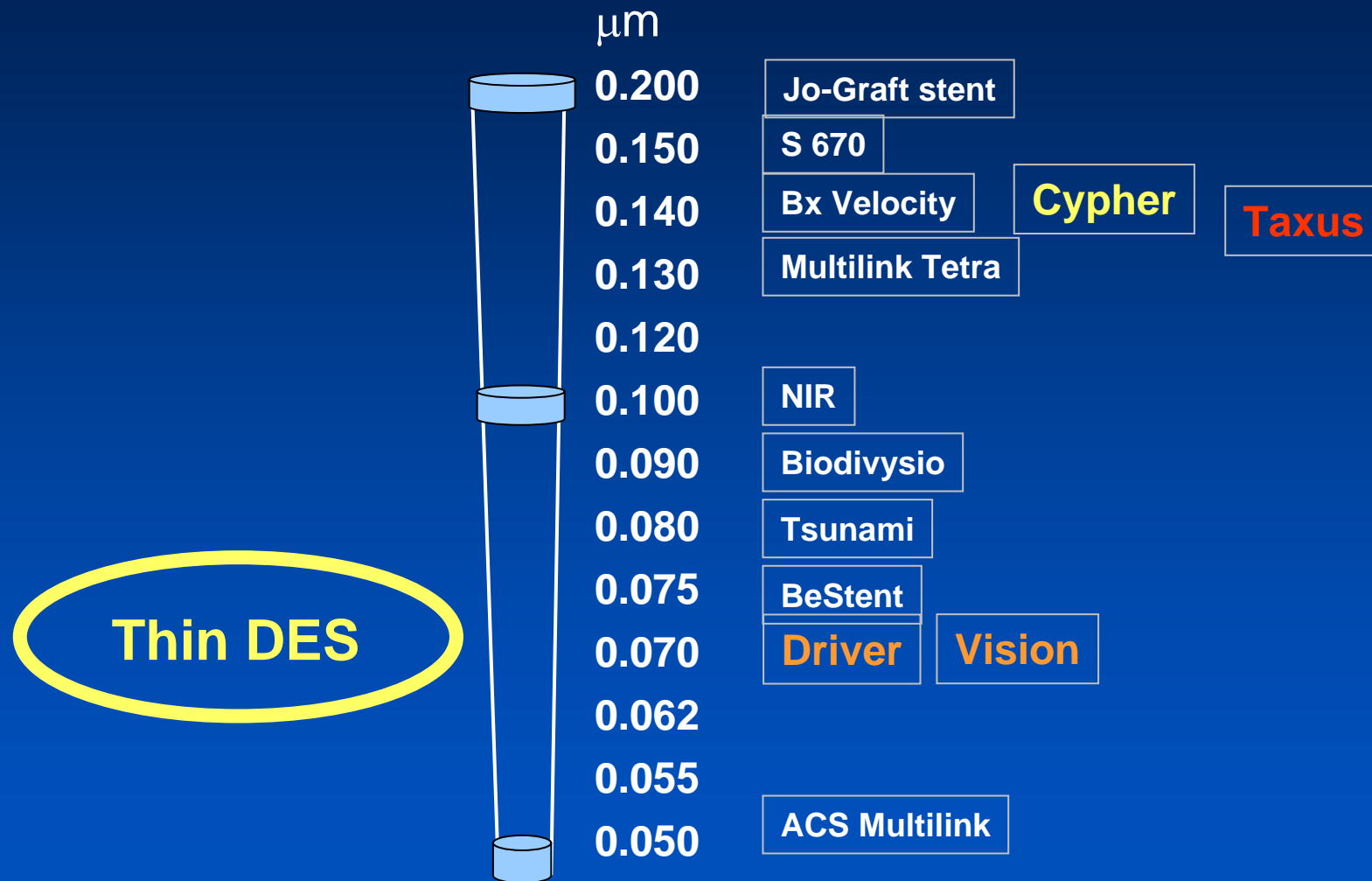
# Strut Thickness and Restenosis in Small Vessel Disease

Thin-strut BMS (BeStent; 76 $\mu$ m) vs Thick-strut DES (Cypher; 140 $\mu$ m)

	Cypher	BeStent	P
Entire group (n=409)	9.0	22.5	<0.001
> 2.8mm (n=235)	7.0	34.2	<0.001
$\leq$ 2.8mm (n=174)	10.0	13.1	0.52

*Pache J. et al. Eur Heart J 2005*

# However, Thin-Strut DES ?



# New DES in Small Vessels

- In the studies with BMS, thinner strut has been shown to decrease neo-intimal hyperplasia.
- However, a recent randomized study failed to observe a similar efficacy of the thin-strut BMS compared to that of the SES in small coronary lesions.
- Nonetheless, a more smart DES stent platform with better conformability, trackability, and thinner stent strut is being investigated to improve the outcomes of small coronary interventions.