Safety and Endeavor II Subsets

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*no conflicts of interest declared

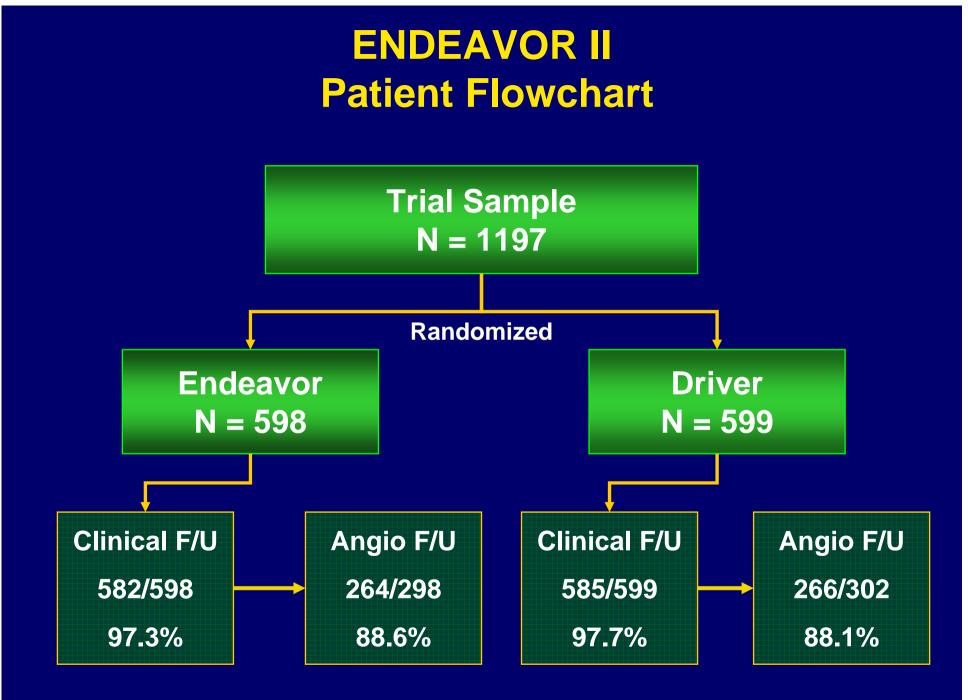
ENDEAVOR II A Randomized Trial to Evaluate the Safety and Efficacy of the Medtronic AVE ABT-578 Eluting Driver Coronary Stent in De Novo Native Coronary Artery Lesion

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for the Endeavor II investigators

*no conflicts of interest





Endeavor II

Procedure Characteristics

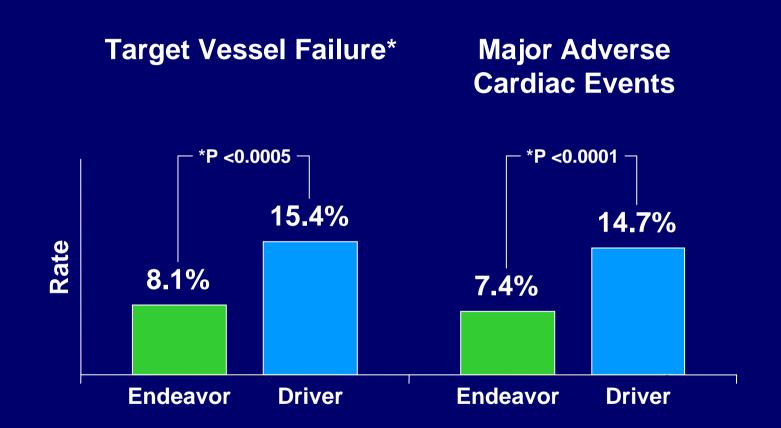
	Endeavor N = 588	Control N = 589	P Value
Stent Length:Lesion Length	1.84	1.79	ns
Stents per Lesion	1.12	1.11	ns
IIb/IIIa inhibitor use	13.2%	10.4%	ns
Lesion Success	99.8%	100%	ns
Device Success	99.3%	99.3%	ns
Procedure Success	97.4%	97.1%	ns

Lesion success Device success Procedure success

<50% residual in-segment percent diameter stenosis <50% residual in-segment percent diameter stenosis with assigned stent <50% residual in-segment percent diameter stenosis with assigned stent and without 30-day MACE

Endeavor II

Clinical Outcomes Primary Endpoint at 9 Month Follow-up



*Target Vessel Failure is a composite of target vessel revascularization, Q- or non Q-wave MI, or cardiac death

Endeavor II

Clinical Results to 9 months

	Endeavor N = 582	Control N = 585	P value
Composite MACE (%)	7.4	14.7	<0.0001
Death	1.2	0.5	ns
Q-Wave MI	0.3	0.9	ns
Non Q-Wave MI	2.4	3.1	ns
CABG	0.0	0.0	ns
TLR	4.6	12.1	<0.0001
CABG	0.3	0.5	ns
PCI	4.3	11.6	<0.0001
TVR (%)	5.7	12.8	<0.0001
TVF (%) (Primary endpoint)	8.1	15.4	<0.0005

Endeavor II

Endeavor II 9 month mortality

	Endeavor n = 582	Control n = 585	P value
Death	7 (1.2%)	3 (0.5%)	0.22
Cardiac*	5	3	
Non-Cardiac	2	0	

*Defined as death due to myocardial infarction, cardiac perforation or tamponade, arrhythmia, stroke within 30 days of the procedure or related to the procedure, death due to a complication of the procedure, and any death in which a cardiac cause cannot be excluded, as adjudicated by blinded clinical events committee.

Endeavor II

Endeavor II 9 month cardiac mortality*

Treatment	Post-procedure day	Cause
Endeavor	1	Subacute stent thrombosis
Control	38	Acute respiratory failure
Control	92	Non-target vessel Q wave infarction
Control	134	Sudden death
Endeavor	175	Sudden death
Endeavor	182	Sudden death
Endeavor	229	Sudden death
Endeavor	243	Surgical death 1d post TLR-CABG

*As adjudicated by blinded clinical events committee.

Endeavor II

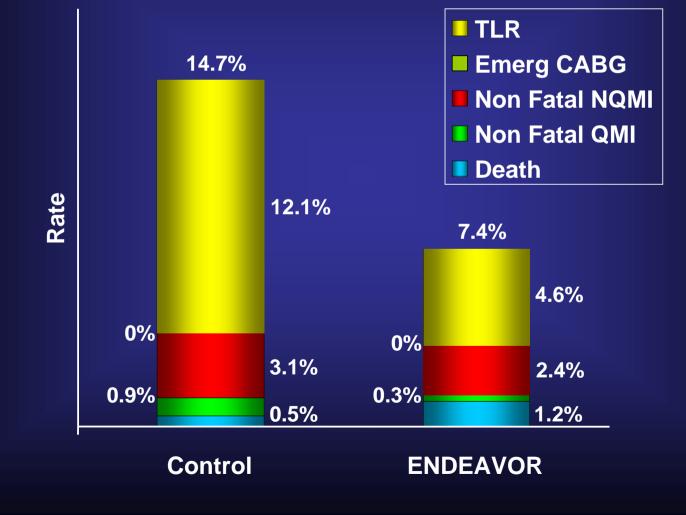
Endeavor II

9 month non-cardiac mortality*

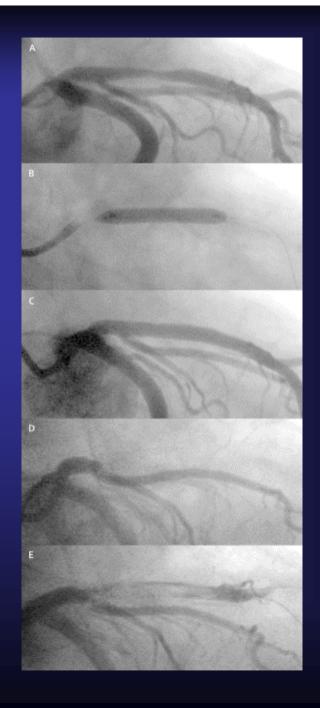
Treatment	Post-procedure day	Cause
Endeavor Endeavor		Metastatic lung cancer Intracerebral hemorrhage

*As adjudicated by blinded clinical events committee.

Endeavor II Secondary Endpoint Results Non-Hierarchical MACE to 9 months



DES Late Stent Thrombosis



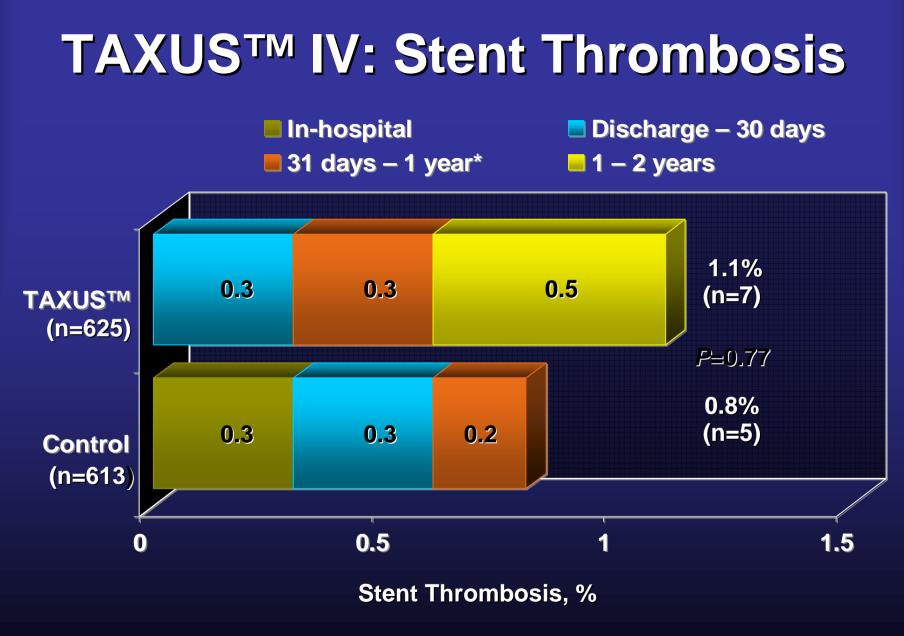
Drug Eluting Stent Late Stent Thrombosis

- EP McFadden, E Stabile, E Regar, et. al. Research Letter, *Lancet* 2004: 364:1519
 - 4 cases of angiographically documented late stent thrombosis, accompanied by acute MI
 - SES (335, 375 days)
 - PES (343, 442 days)
 - All cases occurred soon after clopidogrel cessation

TAXUS II Stent Thrombosis

	Combined Control (n=270)	TAXUS™ SR (n=131)	TAXUS™ MR (n=135)	<i>P</i> -Value SR vs Control	<i>P</i> -Value MR vs Control
≤1 d	0.0	0.8 (1/131)	0.0	NS	undef
2 d – 6 mo	0.0	0.0	0.0	undef	undef
6 mo – 1 yr	0.0	0.8 (1/130)	0.7 (1/134)	NS	NS
1 – 2 yr	0.0	0.8 (1/129)	1.5 (2/131)	NS	NS

A. Colombo, TCT 2004 : TAXUS[™] II 2 year results.



*All within 1 – 6 months. G.Stone, TCT 2004: TAXUS™ IV 2 year results.

SIRIUS Stent Thrombosis (1080 days)

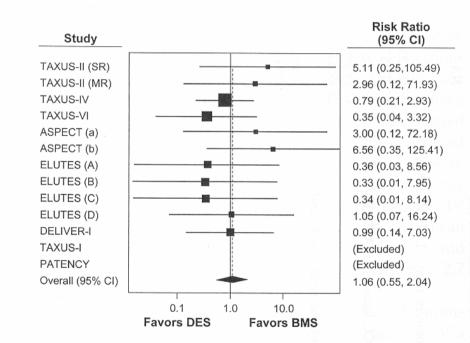
	Sirolimus (%) (n=533)	Control (%) (n=525)
Acute (< 24 hours)	0	0
Subacute (1-30 days)	0.2% (1)	0.2% (1)
Late (31-270 days)	0.2% (1)	0.6% (3)
Late (271-720 days)	0.2% (1)	0
Late (721-1080 days)	0.2% (1)	0
Total	0.8% (4)	0.8% (4)

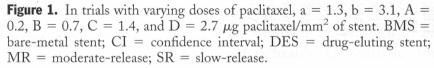
Clinical Trials with CYPHER® Stent

All Late Thrombosis at 720 Days					
	Control	CYPHER®			
	Events/ # of Patients	%	Events/ # of Patients	%	
RAVEL	0/118	0.0%	0/120	0.0%	
SIRIUS	3/525	0.6%	2/553	0.4%	
New SIRIUS	1/227	0.4%	1/225	0.4%	
Total	4/870	0.5%	3/878	0.3%	

Paclitaxel Stent Thrombosis Bavry et al, J Am Coll Cardiol 2005

 Meta-anlysis of 8 PES/BMS trials





PES, SES, and BMS Thrombosis Moreno et al, J Am Coll Cardiol 2005

Β

10 RCT DES studies of 5030 patients pooled

Study	DES n / N	BMS n/N	OR (95% CI Fixed)	Weight %	OR (95% CI Fixed)
RAVEL	0 / 120	0/118	Abb in Fach Stud	0.0	Not estimable
SIRIUS	2 / 533	4 / 525 🔶		27.6	0.49 (0.09,2.69)
E-SIRIUS	2/175	0/177	P Strohter	■→ 3.4	5.12 (0.24,107.32
C-SIRIUS	1/50	1/50 🔶	LOAD - YOUR	→ 6.7	1.00 (0.06,16.44)
ASPECT	0 / 90	0 / 48	+ E81.0 = 1900 - 183 +	0.0	Not estimable
ELUTES	1 / 153	1/39 🔶		- 10.9	0.25 (0.02,4.09)
TAXUS-I	0/31	0/30	-1.681 1.681	0.0	Not estimable
TAXUS-II	3 / 266	0 / 270	2761- 2 1	→ 3.4	7.19 (0.37,139.80
TAXUS-IV	4 / 662	5 / 652		34.4	0.79 (0.21,2.94)
DELIVER	2 / 522	2/519 -	102 StJ = -1.765	13.7	0.99 (0.14,7.09)
Total (95% CI)	15 / 2602	13 / 2428	6.6. <u>22</u> 224	100.0	1.05 (0.51, 2.15)
۸		-1 -1	2 1	5 10	
A	DES	Favo	rs DES F	avors BMS Weight	OR
A Study	DES n/N	Favo	rs DES F	avors BMS	OR (95% Cl Fixed)
		Favo	rs DES F	avors BMS Weight	
Study	n / N	Favo BMS n / N	rs DES F	Favors BMS Weight %	(95% CI Fixed)
Study RAVEL	n / N 0 / 120	Favo BMS n / N 0 / 118	rs DES F	avors BMS Weight %	(95% CI Fixed) Not estimable
Study RAVEL SIRIUS	n / N 0 / 120 1 / 533	Favo BMS n/N 0/118 3/525 ←	rs DES F	Favors BMS Weight % 0.0 43.1	(95% Cl Fixed) Not estimable 0.39 (0.09,3.15)
Study RAVEL SIRIUS E-SIRIUS	n / N 0 / 120 1 / 533 0 / 175	Favo BMS n/N 0/118 3/525 0/177 ←	rs DES F	Favors BMS Weight % 0.0 43.1 0.0	(95% CI Fixed) Not estimable 0.39 (0.09,3.15) Not estimable 0.33 (0.01,8.22) Not estimable
Study RAVEL SIRIUS E-SIRIUS C-SIRIUS	n / N 0 / 120 1 / 533 0 / 175 0 / 50	Favo BMS n/N 0/118 3/525 0/177 1/50 ◀	rs DES F	Tavors BMS Weight 0.0 43.1 0.0 21.2 0.0 0.0 0.0	(95% CI Fixed) Not estimable 0.39 (0.09,3.15) Not estimable 0.33 (0.01,8.22) Not estimable Not estimable
Study RAVEL SIRIUS E-SIRIUS C-SIRIUS ASPECT	n / N 0 / 120 1 / 533 0 / 175 0 / 50 0 / 90	Favo BMS n/N 0/118 3/525 0/177 1/50 0/48	rs DES F	avors BMS Weight % 0.0 43.1 0.0 21.2 0.0 0.0 0.0 0.0 0.0	(95% CI Fixed) Not estimable 0.39 (0.09,3.15) Not estimable 0.33 (0.01,8.22) Not estimable
Study RAVEL SIRIUS E-SIRIUS C-SIRIUS ASPECT ELUTES	n/N 0/120 1/533 0/175 0/50 0/90 0/153	Favo BMS n/N 0/118 3/525 0/177 1/50 0/48 0/39	rs DES F	Tavors BMS Weight 0.0 43.1 0.0 21.2 0.0 0.0 0.0	(95% CI Fixed) Not estimable 0.39 (0.09,3.15) Not estimable 0.33 (0.01,8.22) Not estimable Not estimable
Study RAVEL SIRIUS E-SIRIUS C-SIRIUS ASPECT ELUTES TAXUS-I	n/N 0/120 1/533 0/175 0/50 0/90 0/153 0/31	Favo BMS n/N 0/118 3/525 0/177 1/50 0/48 0/39 0/30	rs DES F	Favors BMS Weight % 0.0 43.1 0.0 21.2 0.0 0.0 0.0 0.0 0.0 14.4	(95% CI Fixed) Not estimable 0.39 (0.09,3.15) Not estimable 0.33 (0.01,8.22) Not estimable Not estimable Not estimable 5.11 (0.24,107.02 1.97 (0.18,21.81
Study RAVEL SIRIUS E-SIRIUS C-SIRIUS ASPECT ELUTES TAXUS-I TAXUS-II	n/N 0/120 1/533 0/175 0/50 0/90 0/153 0/31 2/266	Favo BMS n/N 0/118 3/525 0/177 1/50 0/48 0/39 0/30 0/270	rs DES F	avors BMS Weight % 0.0 43.1 0.0 21.2 0.0 0.0 0.0 0.0 0.0 0.0 7.0	(95% CI Fixed) Not estimable 0.39 (0.09,3.15) Not estimable 0.33 (0.01,8.22) Not estimable Not estimable 5.11 (0.24,107.02
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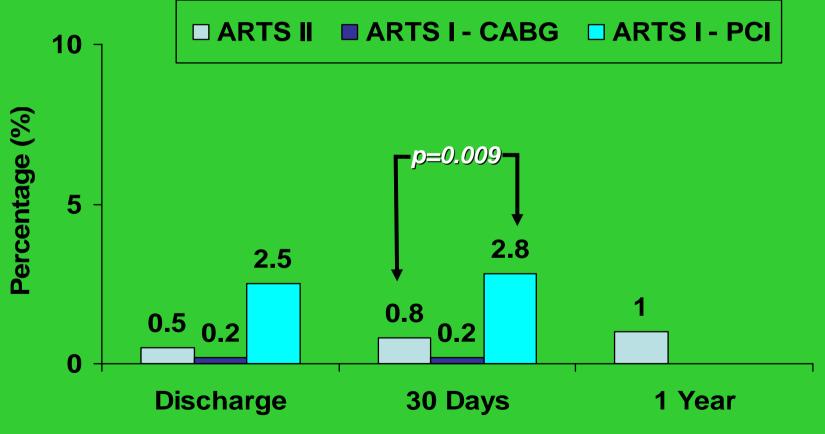
Figure 1. (A) Comparison between the rate of stent thrombosis in patients allocated to drug-eluting stents (DES) or bare-metal stents (BMS) in the randomized studies and in the pooled population. (B) Comparison between the rate of late stent thrombosis in patients allocated to DES or BMS in the randomized studies and in the pooled population. CI = confidence interval; OR = odds ratio.

Favors DES

Favors BMS

ARTS II Angiographic Occlusions

* Definition of thrombotic occlusion: Angiographically proven occlusion (TIMI 0 or 1) or flow limiting thrombus (TIMI 1 or 2)



ARTS II up to 1 year: 5 TLR (1 Q wave MI, 4 with substantial cardiac enzyme release)

Safety Results

Stent Thrombosis	Endeavor N = 582	Driver N = 585	P value
In-hospital	0.3% (2)	0.3% (2)	
Discharge to 30 days	0.2% (1)	0.9% (5)*	
>30 – 270 days	0	0	
Total at 270 days	0.5% (3)	1.2% (7)	0.34
IVUS Results	Endeavor N = 100	Driver N = 83	P value
Late Acquired Stent Malapposition	0%	0%	ns
Late Aneurysm	0%	0%	ns

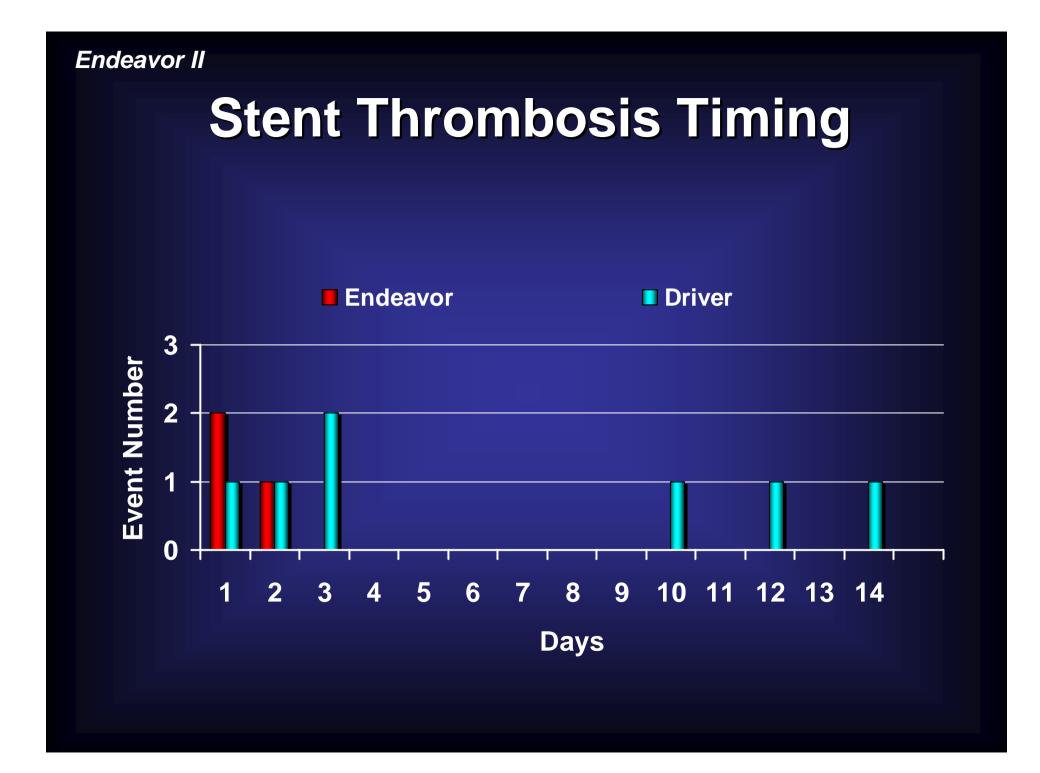
Stent thrombosis defined as angiographic thrombus or subacute closure in the stented vessel or any death not attributed to a non-cardiac cause within the 1st 30 days <u>*3/6 post-discharge stent thrombosis cases occurred in Driver arm when Plavix was stopped prematurely</u>

Endeavor II

Endeavor II

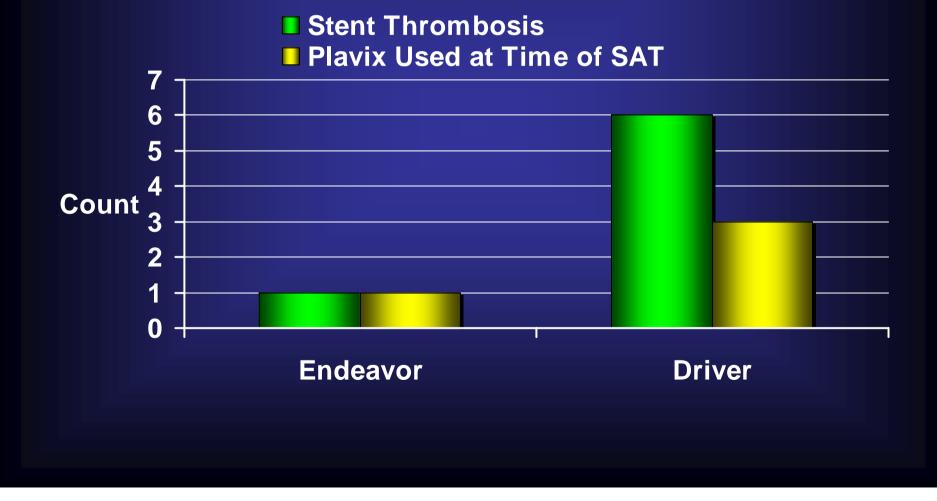
Stent Thrombosis and Plavix Use After Discharge (> 1 Day)





Endeavor II

Stent Thrombosis and Plavix Use After Discharge (> 1 Day)



Endeavor Safety

Device success was >99%

Driver has a good reputation for delivery and ease-of-use

Stent Thrombosis rate was 0.5%
Clinical Restenosis rate was <5%

Conclusion: Endeavor is a Safe and Effective Stent

What about the higher, non-significant sudden death rate?

Endeavor II 9 month mortality

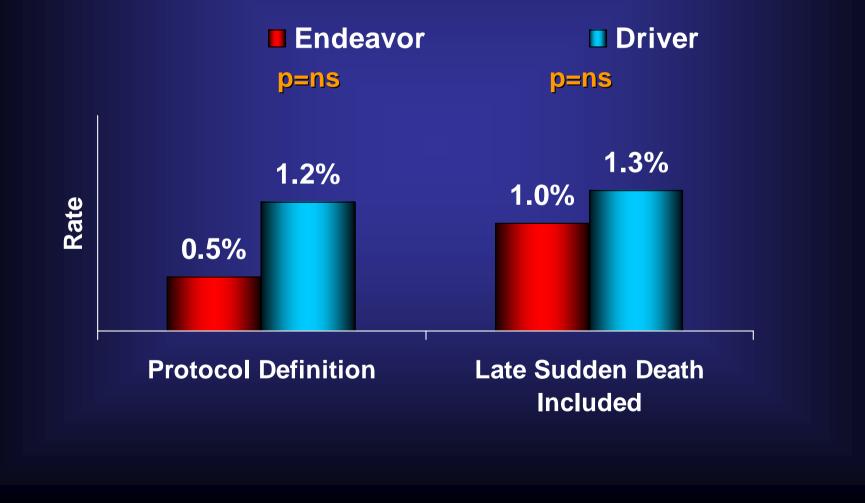
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Sudden deaths in E2

- 4 late (>30 day) sudden deaths in Endeavor II
 - 3 in Endeavor arm
 - 1 in Driver arm
- How many ways can you divide up 4 deaths? Answer: 5
 - 4:0
 - 3:1
 - 2:2
 - 1:3
 - 0:4

Stent Thrombosis Rates Protocol Definition vs. Late Sudden Death Inclusive



Should We Include Late Sudden Deaths as Possible Stent Thromboses?

- What is the experience with stent thrombosis timing and clinical presentation?
- Is it common or possible to see stent thrombosis as sudden death only?
- Is it expected that at least 4 of 1197 patients with coronary disease will have sudden death over 9 month follow-up?

Definition of Stent Thrombosis

• Common definition:

 Angiographic evidence of partial or total stent occlusion, or sudden cardiac death in 30 days, or MI not attributable to another non-target vessel

Stent Thrombosis and Mortality

<u>Study</u>	Ν	ST	Death	<u>Mortality</u>
¹ Leons 1653	38	1	2.6%	
² Cutlip	6186	53	10	18.9%
³ Ong	2512	26	3	11.5%
⁴ Fujii	C-Con	15	1	6.7%
Summary		159*	15	11.6%

1 STARS Trial *NEJM* 1998

2 BMS Overview Circulation 2001

3 SES, PES and BMS pooled J Am Coll Cardiol 2005

4 Fujii Case-Control Study J Am Coll Cardiol 2005 (IVUS only patients)

* Sum total does not included 3 pts counted twice in Leon and Cutlip

Timing of ST in BMS

- Cutlip overview of 6186 patients: 51/53 ST occurred in the first week after PCI.
- Ong overview of 2152 PES/SES and BMS stent patients: 24 of 26 ST occurred by 11 days

PES, SES, and BMS Thrombosis Ong et al, J Am Coll Cardiol 2005

 ST Timing in 2152 pts with overall 1.1% stent thrombosis rate

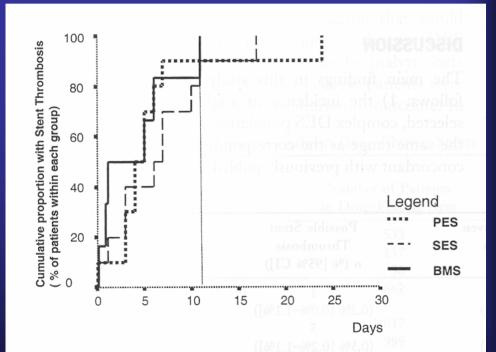
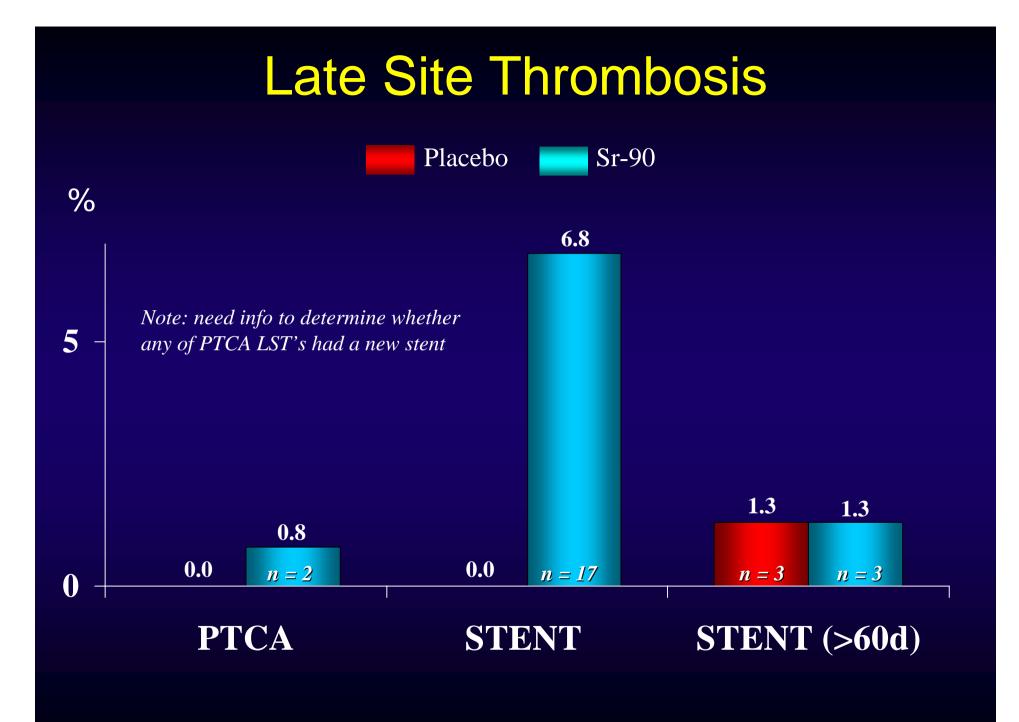


Figure 1. Cumulative incidence of angiographic stent thrombosis stratified by groups against time. **Vertical line** = day 11 on horizontal axis. BMS = bare-metal stents; PES = paclitaxel-eluting stents; SES = sirolimus-eluting stents.

Late Site Thrombosis Beta-Cath Trial

	Sr-90	Placebo	P value
PTCA	2 (0.8%)	0 (0.0%)	
Stent	17 (6.8%)	0 (0.0%)	
Stent ≥ 60/90d	3 (1.3%)	3 (1.3%)	



Sudden deaths in E2

- 4 late (>30 day) sudden deaths in Endeavor II
 - 3 in Endeavor arm
 - 1 in Driver arm
 - NO late stent thromoses seen!
- If these sudden deaths were caused by a stent thrombosis problem, we should have seen 4-8 times as many patients with non-fatal MI and Stent thrombosis
 - Similar to Beta Cath
 - We would expect a ST rate of at least 3% if the sudden deaths represented the ST fatalities
- The likelihood of late stent thrombosis manifesting as late sudden death alone: ~0%.

Endeavor and Safety Assessment

- The Enedavor stent has been studied in a rigorous fashion in E1 and E2
- The ST rate is 0.5%
- There are no other safety concerns

The combination of excellent safety, Driver ease-of-use, and low (<5%) clinical restenosis make the Endeavor stent a logical treatment choice for patients who suffer from coronary disease.