# Resisting the Bioabsorble Stent "Bandwagon"

A Healthy Dose of Skepticism

David J. Cohen, M.D., M.Sc.

Director, Cardiovascular Research Saint-Luke's Mid America Heart Institute

Professor of Medicine
University of Missouri-Kansas City

#### **Disclosures**

#### **Grant Support/Drugs**

- Daiichi-Sankyo
- Janssen Pharmaceuticals
- Eli Lilly
- Astra-Zeneca

#### **Grant Support/Devices**

- Edwards Lifesciences
- Medtronic
- Biomet

- Abbott Vascular
- Boston Scientific
- Covidien

#### Consulting/Advisory Boards

- Medtronic
- Eli Lilly

- Boehringer-Ingelheim
- Astra-Zeneca

#### I will concede that...

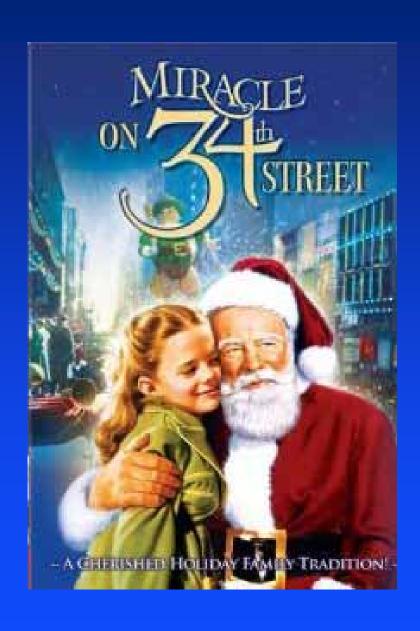
- I am a big fan of new technology
- DES are not perfect
- Early results with BVS have been very impressive and in many cases are comparable to the best current DES designs
- Patrick Serruys has rarely been wrong about important developments in interventional cardiology

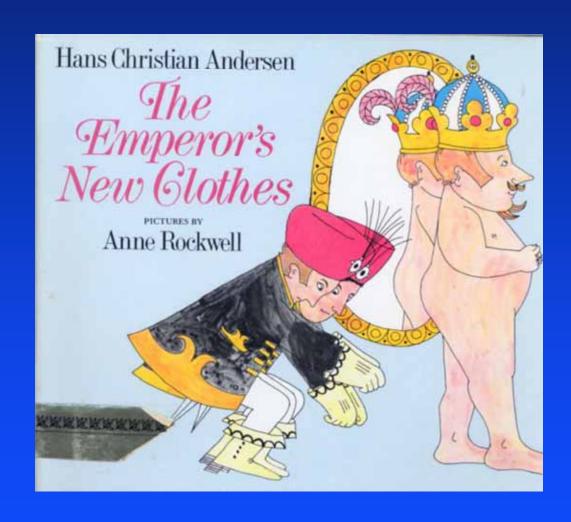
# Why we should be skeptical

#### The Annals of Anecdotal Mis-Information

- Positive inotropic agents in heart failure
- Lidocaine "prophylaxis" for acute MI
- Type I antiarrhythmic agents for patients with nonsustained VT
- Magnesium for acute MI
- Chelation therapy for vascular protection

# Literary Analogies for BVS





DES Limitation #1:
Long-term safety
(stent thrombosis)

- Even BMS are not immune to late thrombosis
- Current generation
   DES are actually safer
   than BMS (recent
   meta-analyses)

# DES Limitation #2: DAPT duration

- All trials with BVS to date require at least 6 months of DAPT
- Emerging evidence to support early DAPT interruption with EES and ZES

# DES Limitation #3: Late TLR

- Relatively minor problem with current generation DES (1%/yr)
- Possible advantage of BVS
   — will require very large trials

DES Limitation #4:

Long-term

consequences of
full-metal jacket

stenting

- How often is this really an issue in your practice (unless you are A. Colombo)?
- Most of these patients should probably get CABG anyway

DES Limitation #5:

Reduced

vasoreactivity

- BVS can definitely improve long-term epicardial vasoreactivity
- Is this really important, since most regulation of coronary blood flow occurs at the microvascular level?

## Disadvantages of Current BVS

- More challenging to deliver and deploy than current advanced alloy DES designs
- Need for advanced imaging to ensure proper sizing
- Achieving good apposition with vessel tapering
- † Cost– both due to the device, itself, and need for more complete lesion preparation

#### Fundamental Basis for Medical Intervention

# Patient's Perspective

- 1. Live longer
- 2. Feel better
- 3. Prevent morbid events

# Societal Perspective

1. Cost-effective (affordable)

At the present time, bioabsorbable vascular scaffolds have not demonstrated any one of these attributes

### My Position on Bioabsorbable Scaffolds

I'm from Missouri...



... Show me (the data)!