

Long Term Outcome (10 yrs) in Left Main PCI

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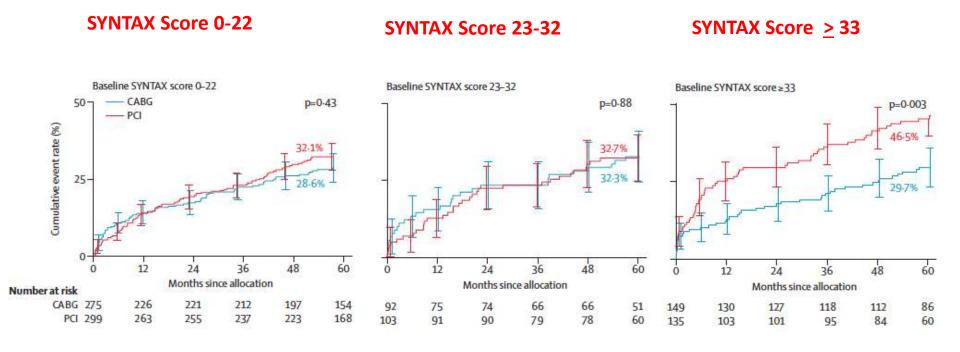
Background

- •Unprotected Left Main disease is burdened by relevant risk of death and MI (up to 10-15% of pts presenting both with ACS or stable presentation)
- •CABG has represented the standard of care for these patients for many years, offering if performed with LIMA grafts rates of patency up to 90% at ten years, but very inferior if performed with SVG vein grafts.
- •In the last 12 years PCI for LM disease has become widely used offering a feasible alternative
- •The 5-year follow up data from the Syntax trial and PRCOMBAT: similar rates of MACE in patients treated with PCI vs. CABG for ULM leading to significant change in ESC guidelines for patients with ULM
- Recently; Excel and Noble trials reported some conflicted data
- •Evaluation of very long term outcome of PCI vs. CABG is warranted , but few data have been reported on 10 year outcome of PCI on ULM.



SYNTAX Trial 5-year FU: The outcome is also different...

SYNTAX Trial: LM



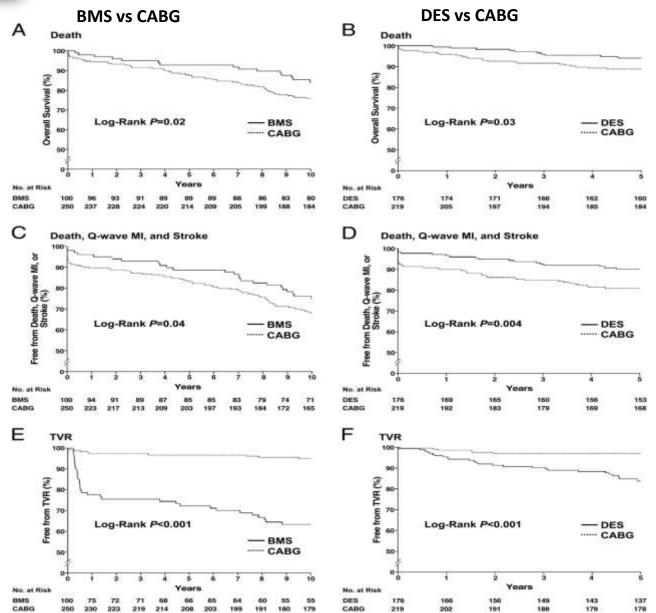


Main challenges of PCI

- Limitations of PCI in long term:
 - Restenosis
 - Late ST
 - De novo lesions (non-target segment)
 - Intermediate lesions
 - Late in-stent atherosclerosis
 - Lack of secondary prevention result in de novo lesions and late in-stent atherosclerosis and thrombosis

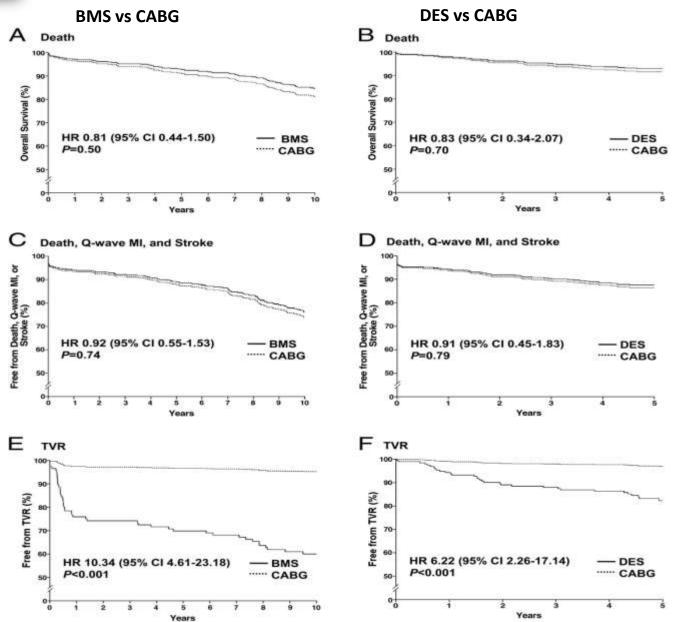


Unadjusted Survival Curves





Adjusted Survival Curves







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CLINICAL RESEARCH

CORONARY

Left Main Stenting in Comparison With Surgical Revascularization

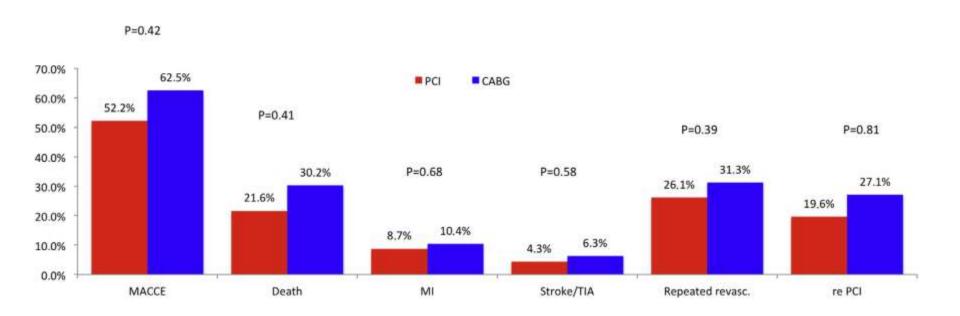


10-Year Outcomes of the (Left Main Coronary Artery Stenting)
LE MANS Trial

Pawel E. Buszman, MD, PhD, Ab Piotr P. Buszman, MD, PhD, California Banasiewicz-Szkróbka, MD, PhD, MD, California Banasiewicz-Szkróbka, MD, PhD, Aleksander Żurakowski, MD, PhD, Bartłomiej Orlik, MD, PhD, MD, MD, MD, MD, Aleksander Żurakowski, MD, PhD, Bartłomiej Orlik, MD, PhD, Aleksander Żurakowski, MD, PhD, Aleksander Zurakowski, MD, Aleksa

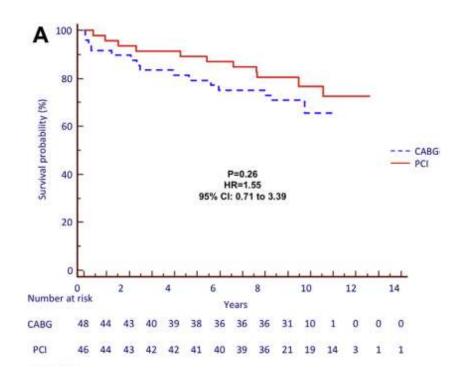


Major Adverse Cardiovascular Events at 10 Years

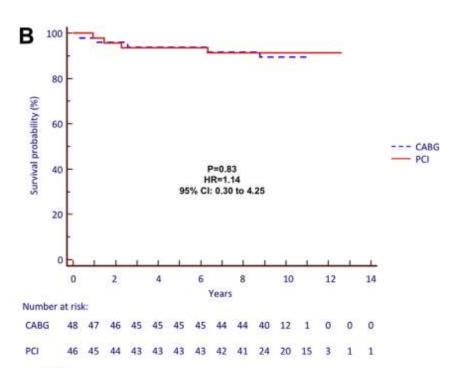




Death

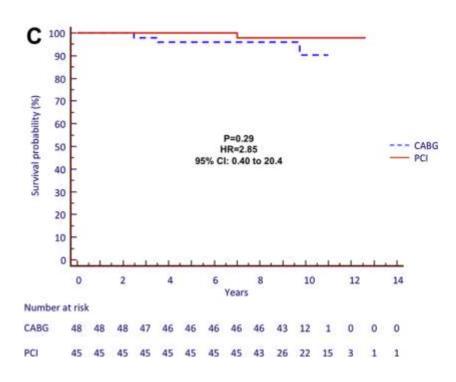


Myocardial Infarction

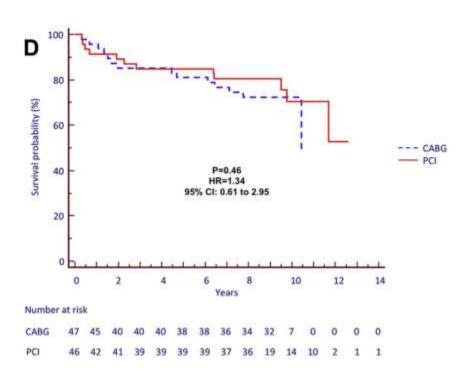




Repeat Revascularization

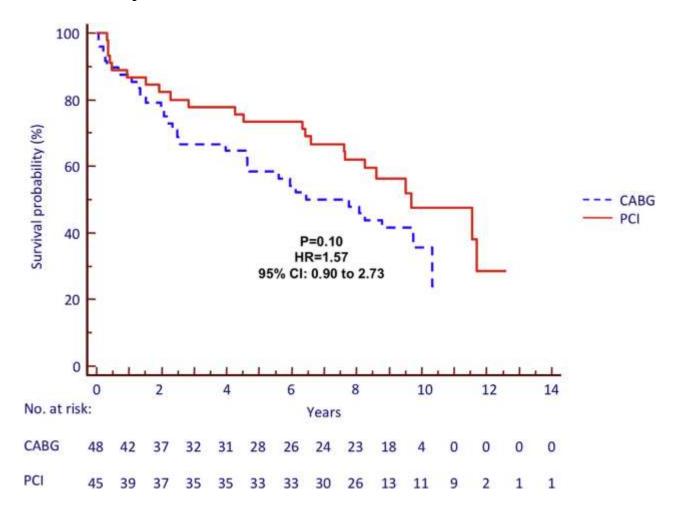


Stroke



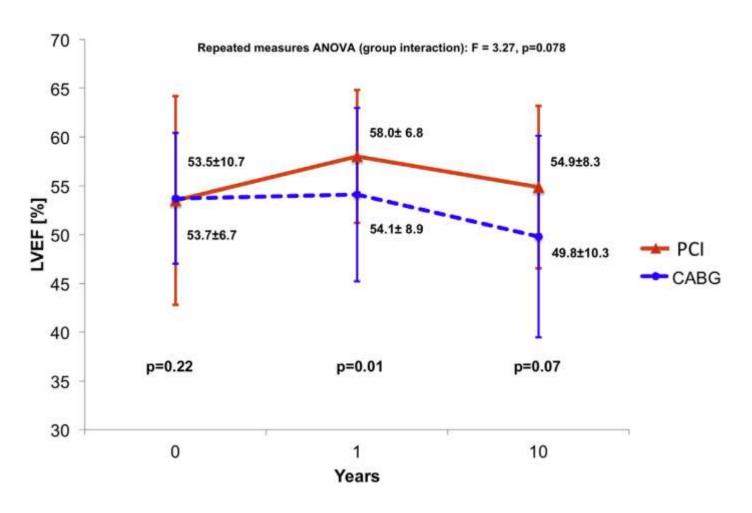


Major Adverse Cardiovascular Event-Free





Temporal Differences in LVEF

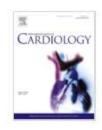






International Journal of Cardiology

Volume 225, 15 December 2016, Pages 47-49



Editorial

Long-term survival among patients with coronary angioplasty with drug eluting stent for the treatment of unprotected left main stenosis compared to coronary artery bypass grafting

Timo H. Mäkikallio^{a,} ♣ , ■, Juhani Junttila^a, Antti Kiviniemi^a, Sudhir Kurl^b, Kari Ylitalo^a, Jarkko Magga^a, Vesa Jokinen^c, Olli-Pekka Piira^a, Kari Kervinen^a, Matti Niemelä^a, Jari A. Laukkanen^{b, d}

Retrospective study

287pts with LM disease 239 received CABG

49 LM stenting with DES: 41% single stenting

59% complex stenting

At 10 years : Non significant difference in mortality



American Journal of Cardiology

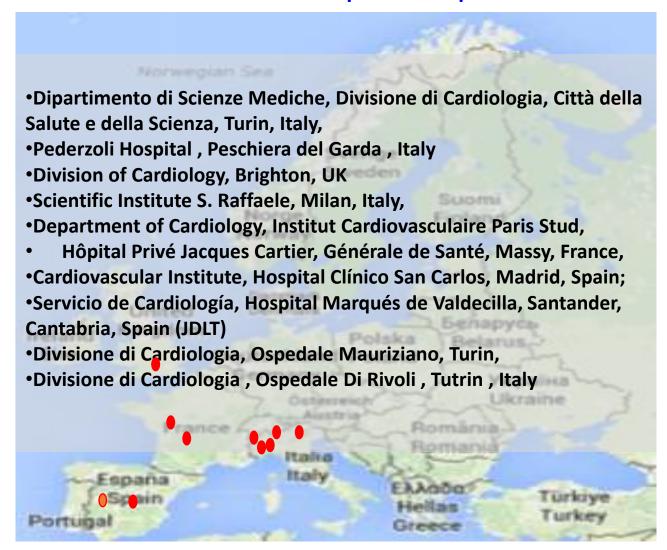
2016; 118, 1: 32-39

Long-Term (≥10 Years) Safety of Percutaneous Treatment of Unprotected Left Main Stenosis With Drug-Eluting Stents

Imad Sheiban, MD, Claudio Moretti, MD, Fabrizio D'Ascenzo, MD M, Alaide Chieffo, MD, Salma Taha, MD, Stephen O. Connor, MD, SujaySubash Chandran, MD, JM de la Torre Hernández, MD, SI Chen, MD, Ferdinando Varbella, MD, Pierluigi Omedè, MD, Mario Iannaccone, MD, Emanuele Meliga, MD, Hiroyoshi Kawamoto, MD, Antonio Montefusco, MD, Chong Mervyn, MD, Philippe Garot, MD, Lin Sin, MD, Valeria Gasparetto, MD, Mohamed Abdirashid, MD, Enrico Cerrato, MD, Giuseppe Biondi Zoccai, MD, Fiorenzo Gaita, MD, Javier Escaned, MD, David Hiddick Smith, MD, Thierry Lefèvre, MD, Antonio Colombo, MD



Multicenter Registry including 10 European Centers Index Procedure for ULM disease performed prior to 2004 with DES



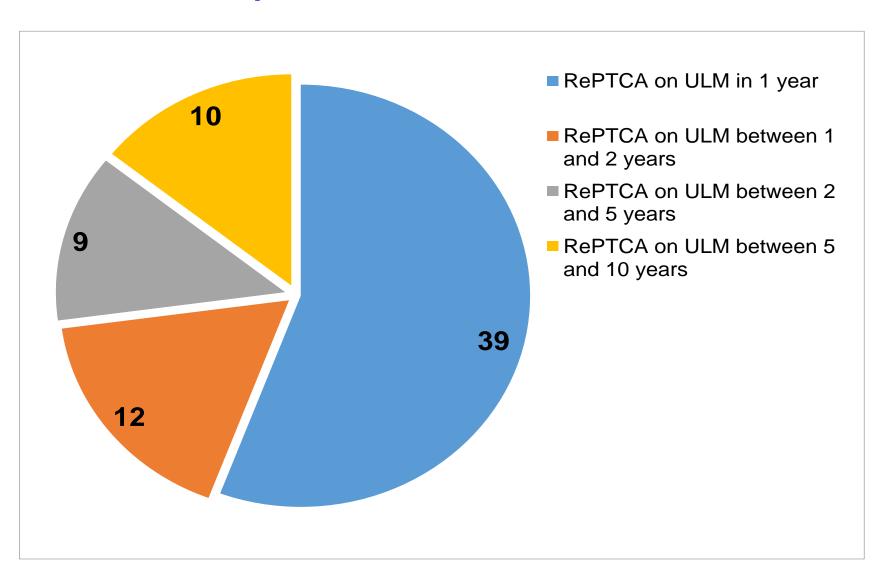


Registry Endpoint

- Primary End-point
 Re-PCI on ULM at 10 years
- Secondary End-point
 MACE (Major Adverse Cardiac Events) and its
 single components (cardiac and not cardiac
 death, myocardial infarction, re-PCI not on ULM
 and Stent Thrombosis)

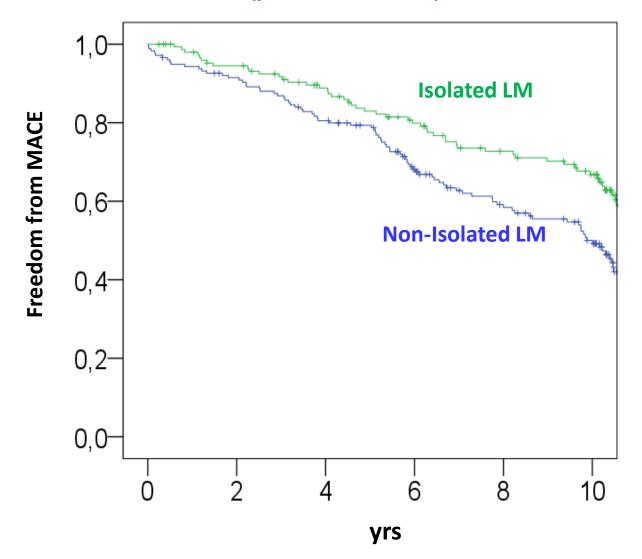


Temporal trend for rePTCA on LM.



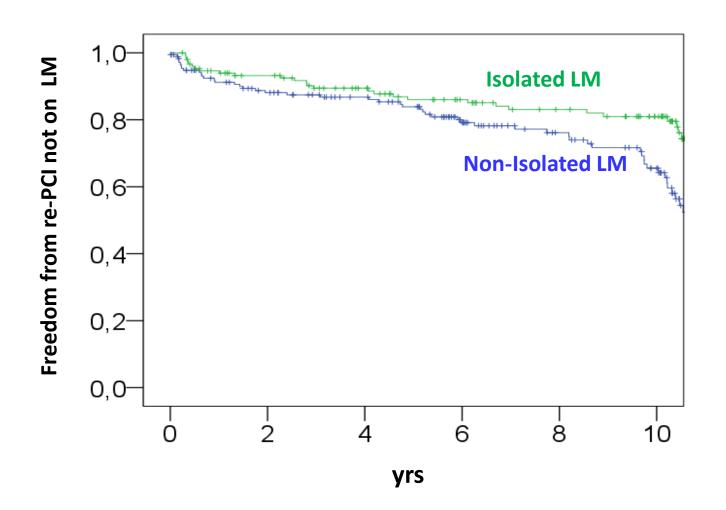


Freedom from MACE according to isolated vs. not isolated ULM disease (p for rank <0.01)



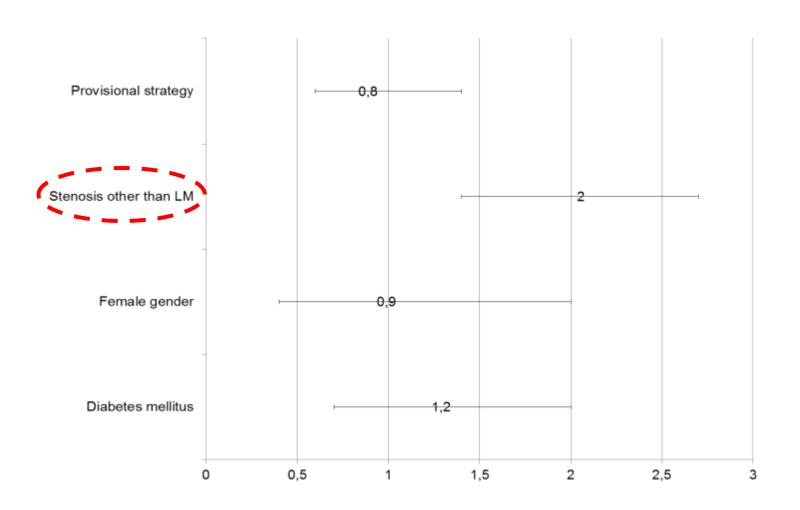


Freedom from rePTCA not on left main according to isolated vs. not isolated ULM disease (p for rank <0.001)





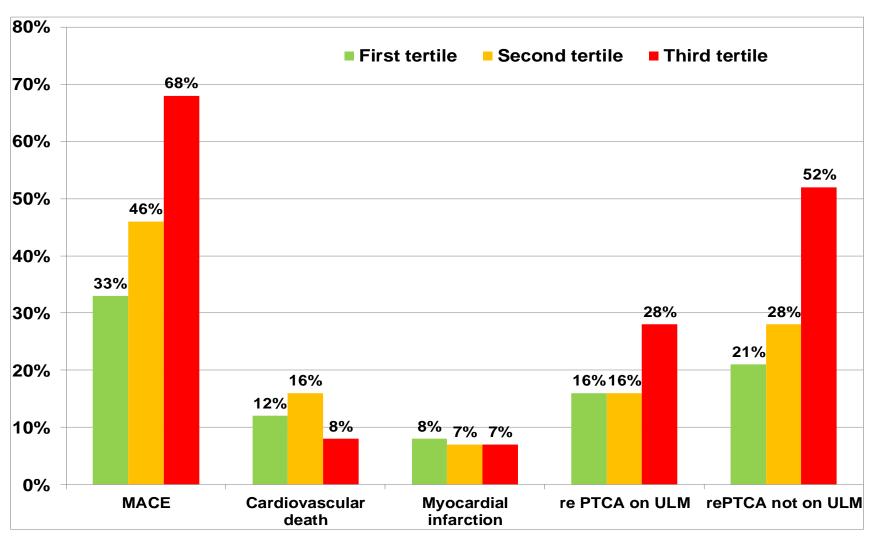
Independent predictors for MACE at 10 years follow up.





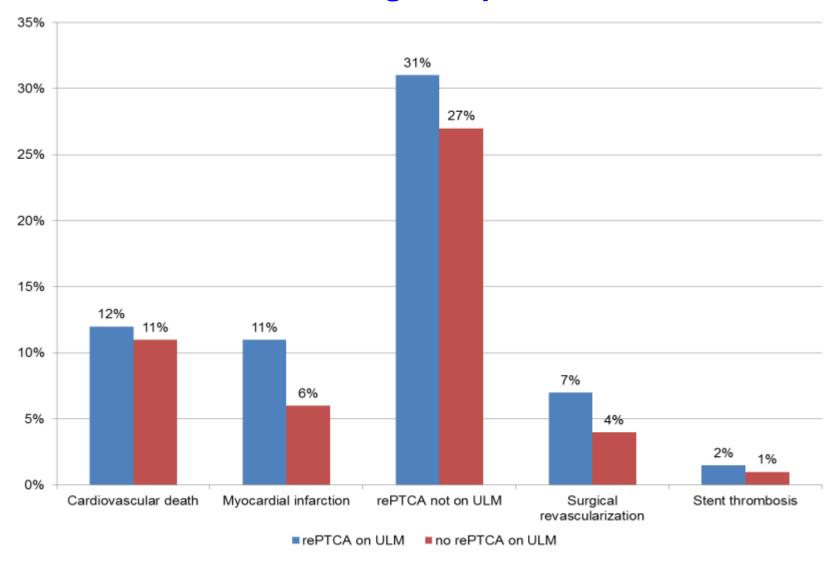
Sensitivity analysis for outcomes according to Syntax score

(p<0.01 for MACE and rePTCA not on ULM).





Outcome according to repeat PCI on LM

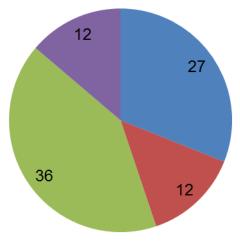


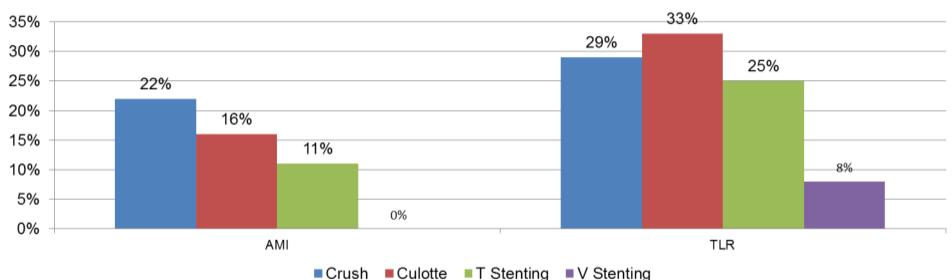


What about 2 stents vs. provisional for patients with true bifurcation?



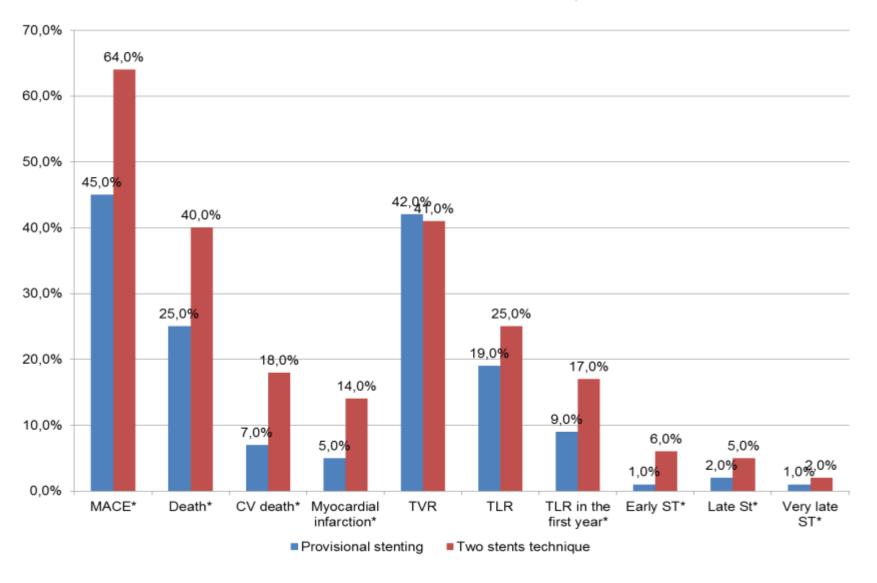
Two stents strategy: incidence of acute myocardial infarction and TLR (p not significant)





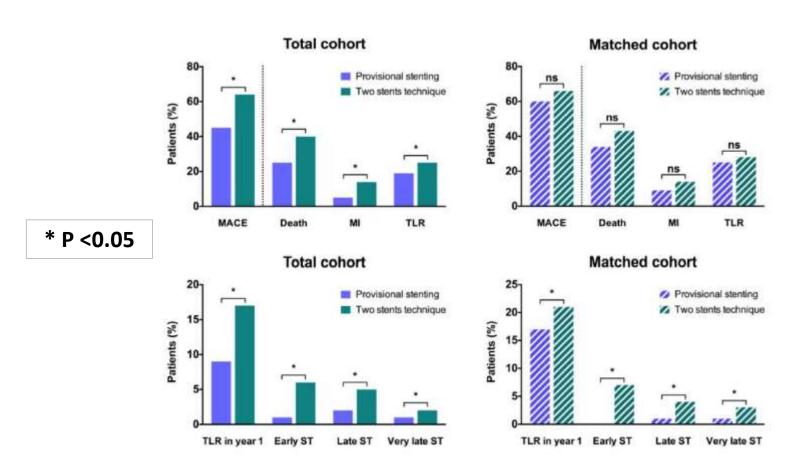


Provisional vs. two stents technique after ten years follow up. (*p<0.05)





Provisional vs. 2 stent technique after 10 year and 1 year FU before and after propensity score matching



F. D'Ascenzo et al; International Journal of Cardiology 2016; 211 37–42



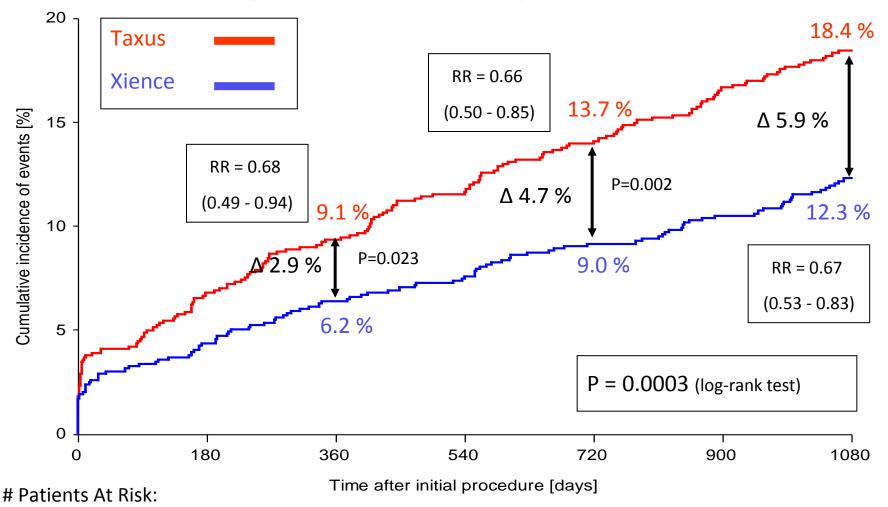
What is changed in the last 10 years

- Better operator training, better patients' selection
- New stents : II generation DES
- FFR, OCT, IVUS
- New anti-platelets drugs, new strategies for double anti-platelet treatment:
 - Prasugrel
 - Ticagrelor
 - Double dose of clopidogrel



The Compare trial: Primary Endpoint Result @ 3 yr

MACE (all death, non-fatal MI and TVR)







Final Remarks

- Despite the use of first generation stents, PCI on ULM safety and efficacy are long lasting over time (10 yrs) with low rates of recurrent events due to index-revascularization.
- ➤ Progression of atherosclerotic lesions on other coronary vessels (and not LM itself) represents an important independent predictive factor for prognosis following index procedure.
- ➤ CAD extension (high Syntax Score) continue to exert a negative impact on long and very long term clinical outcome