



A Multi-center study on Safety and Efficacy of BTK **Everolimus-Eluting Stent** from Taiwan

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Clinical Assistant Professor

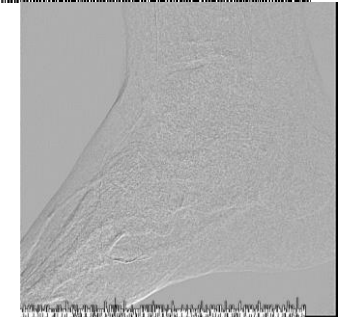
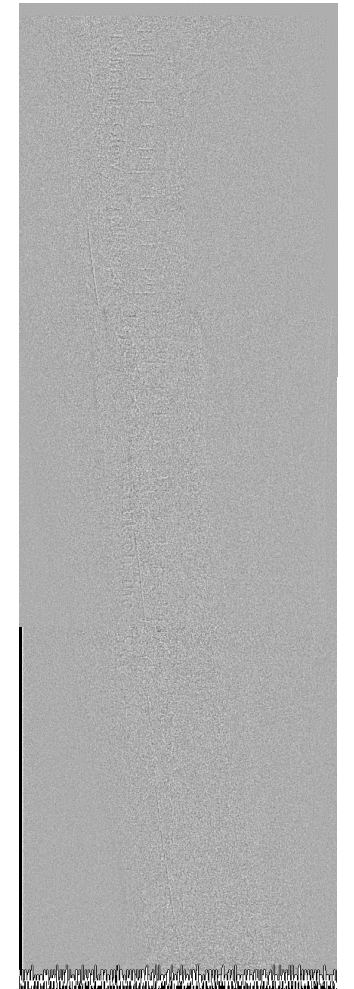
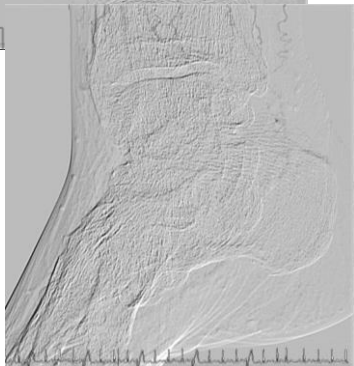
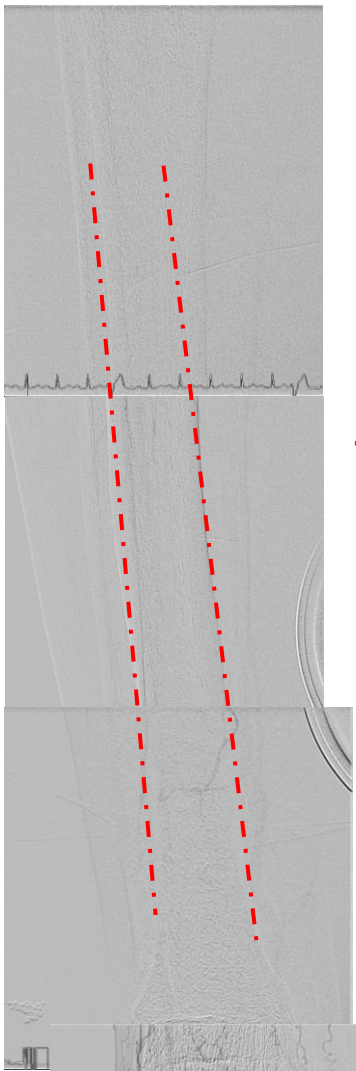
Division of Cardiology, Department of Internal Medicine/ Laboratory Medicine

Cardiovascular Center/ Telehealth Center

National Taiwan University College of Medicine & Hospital

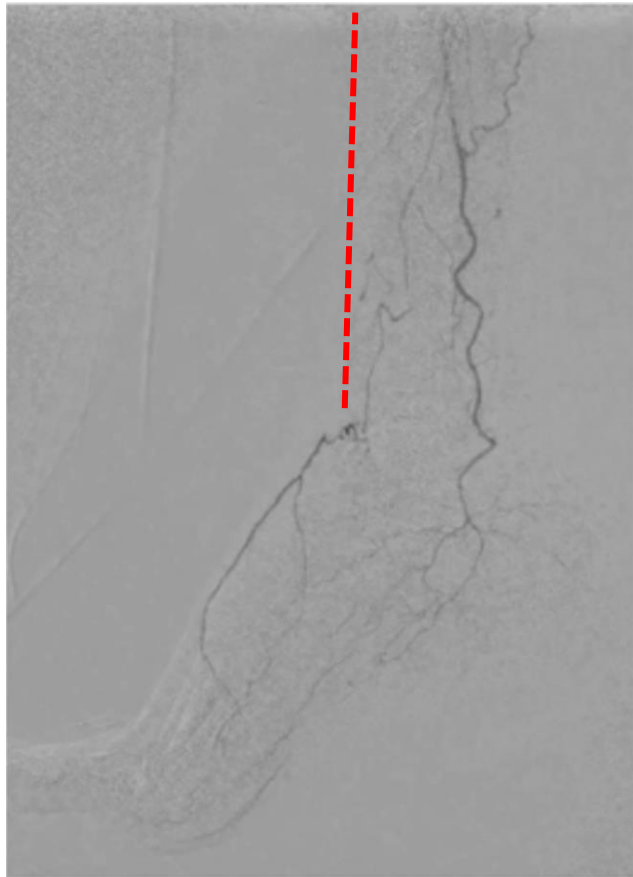
Daily routine for BTK intervention

Long vessel, long lesion, long procedure time



The outcome of BTK is frustrated

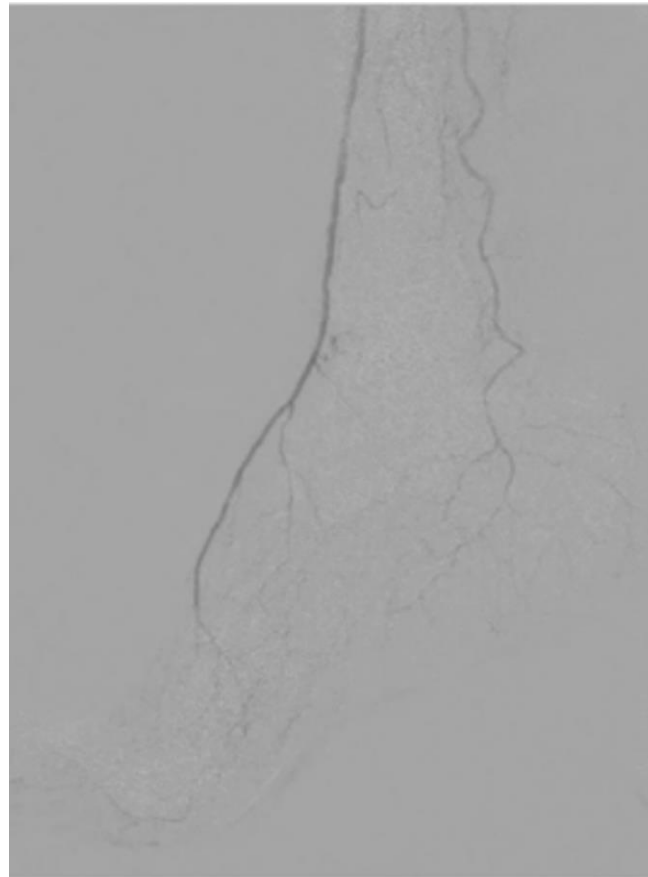
Pre EVT



Angioplasty



Post EVT

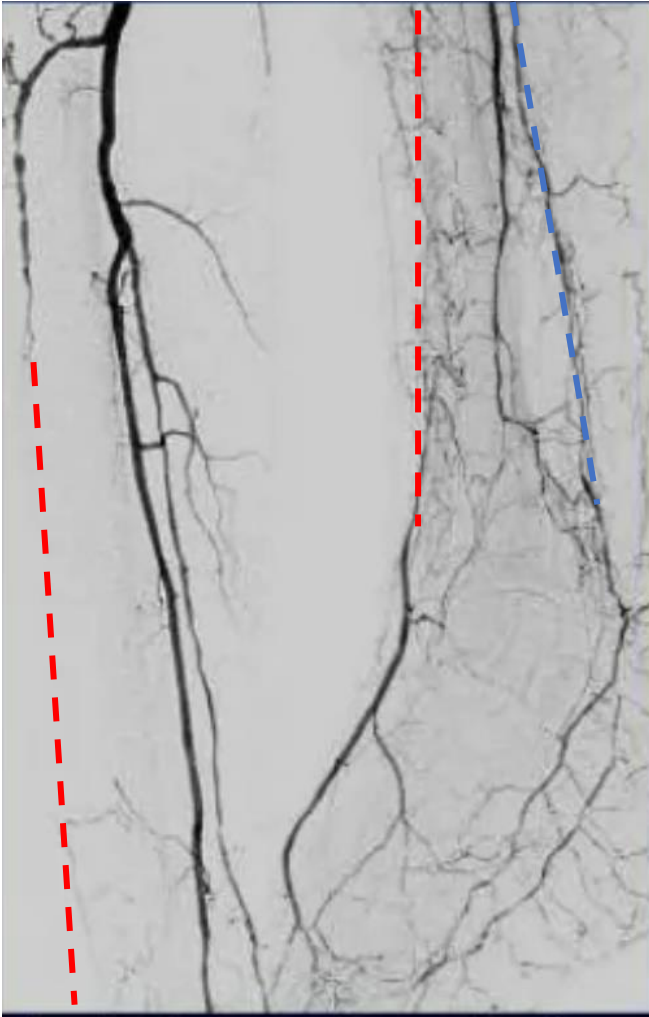


1 month later

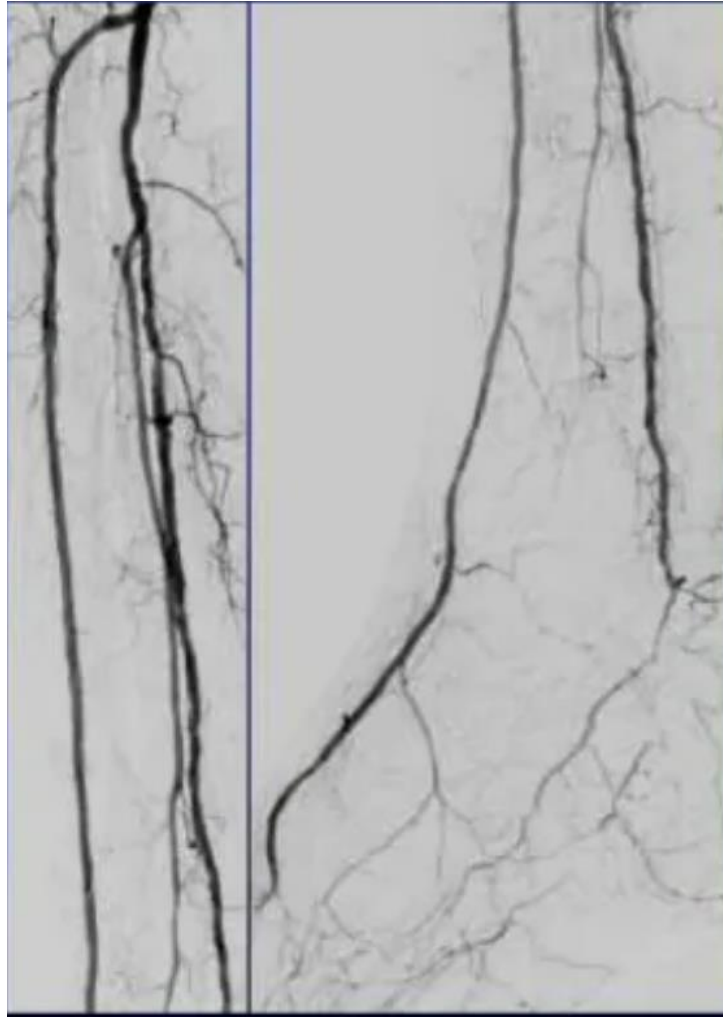


The outcome of BTK is frustrated

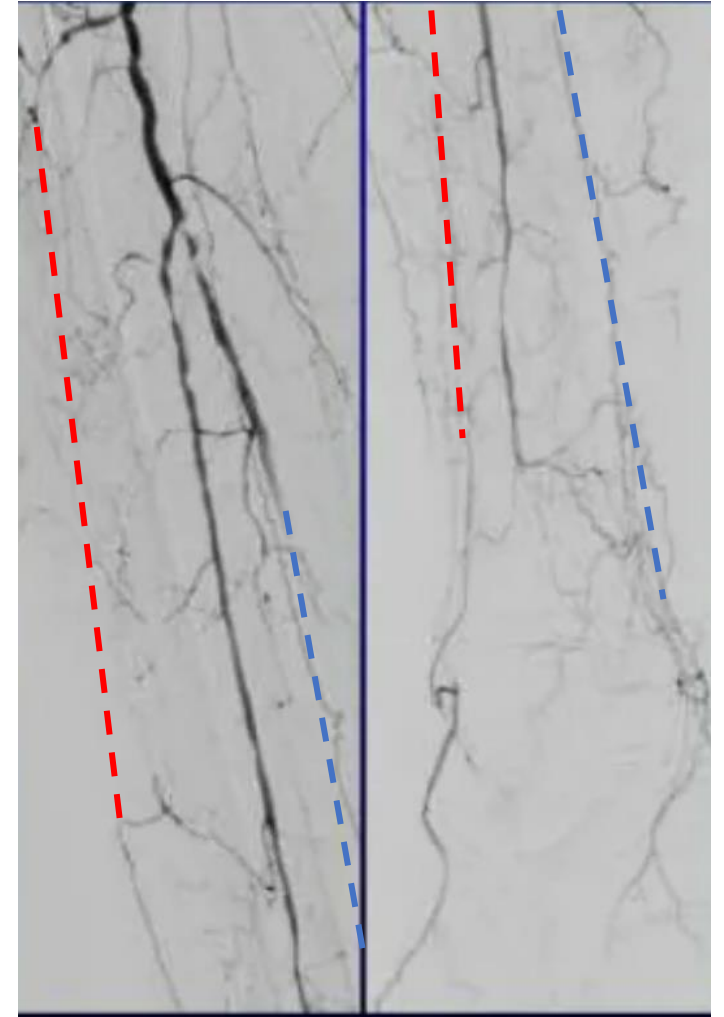
Pre EVT



Post EVT

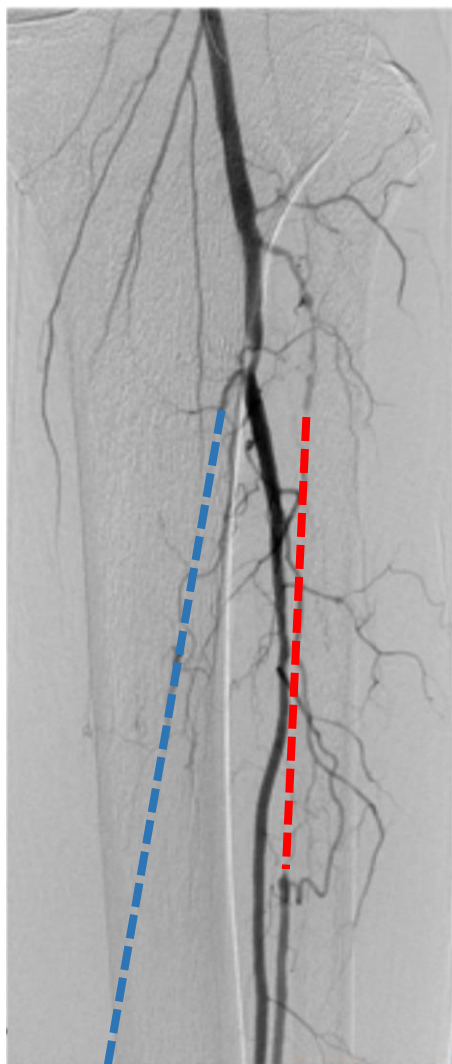


2 month later

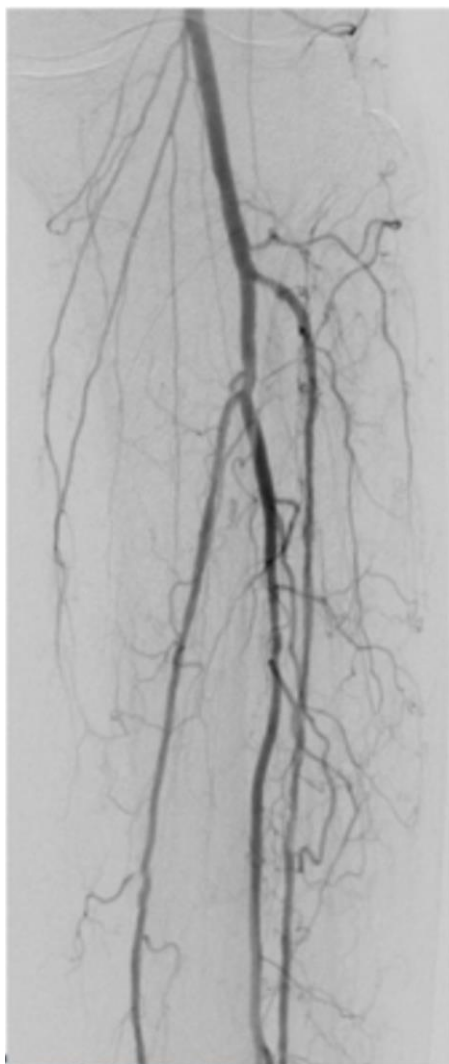


The outcome of BTK is frustrated

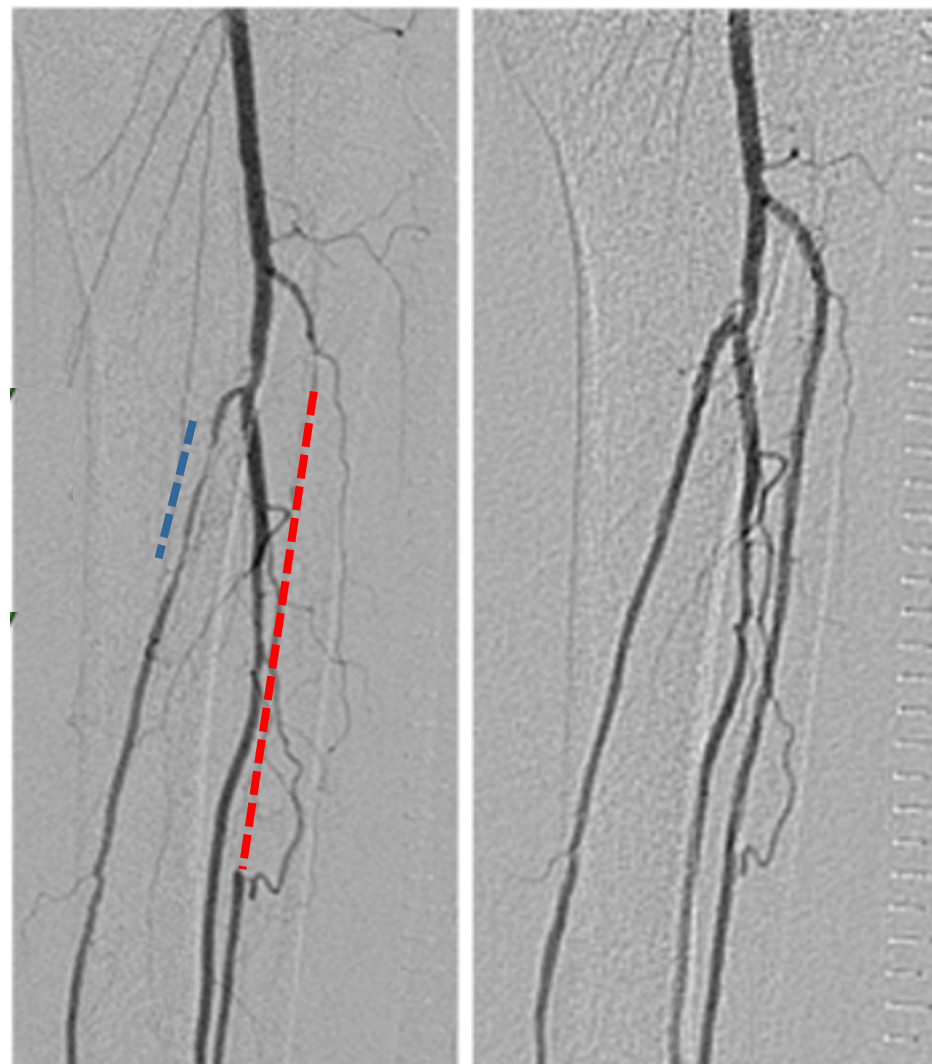
Pre EVT



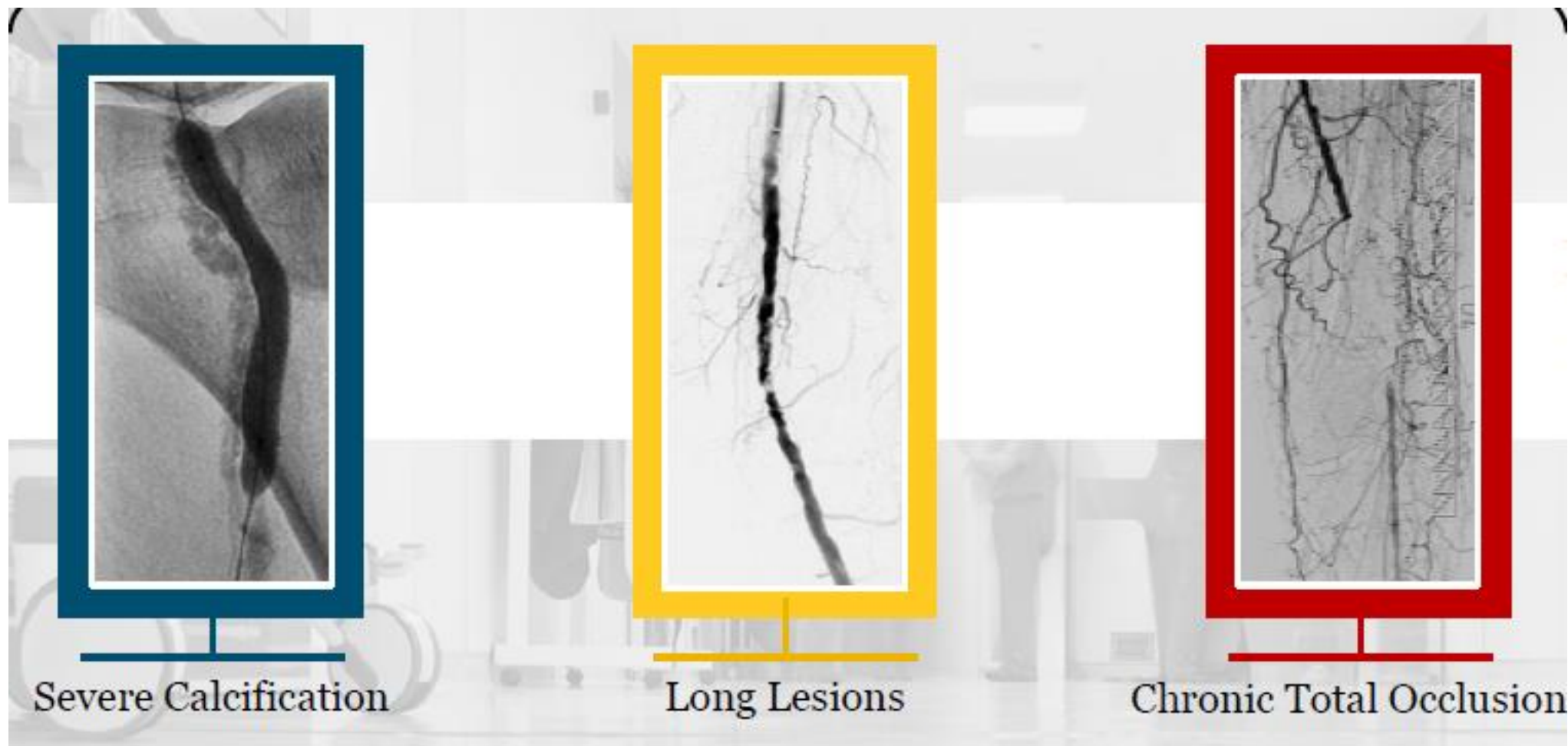
Post EVT



3 month later



BTK = Calcified, Long, CTO



Limitation of infrapopliteal angioplasty

Repeat EVT
@ 1 year

40%

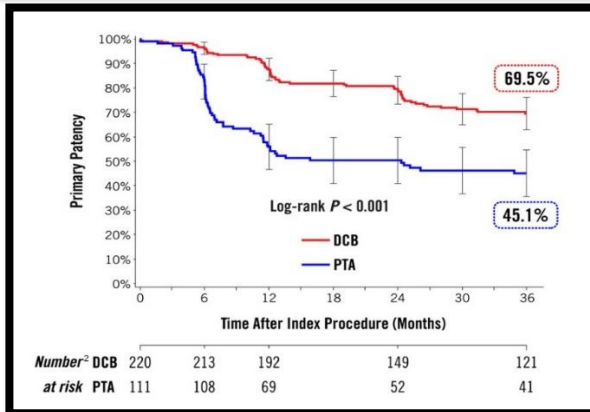
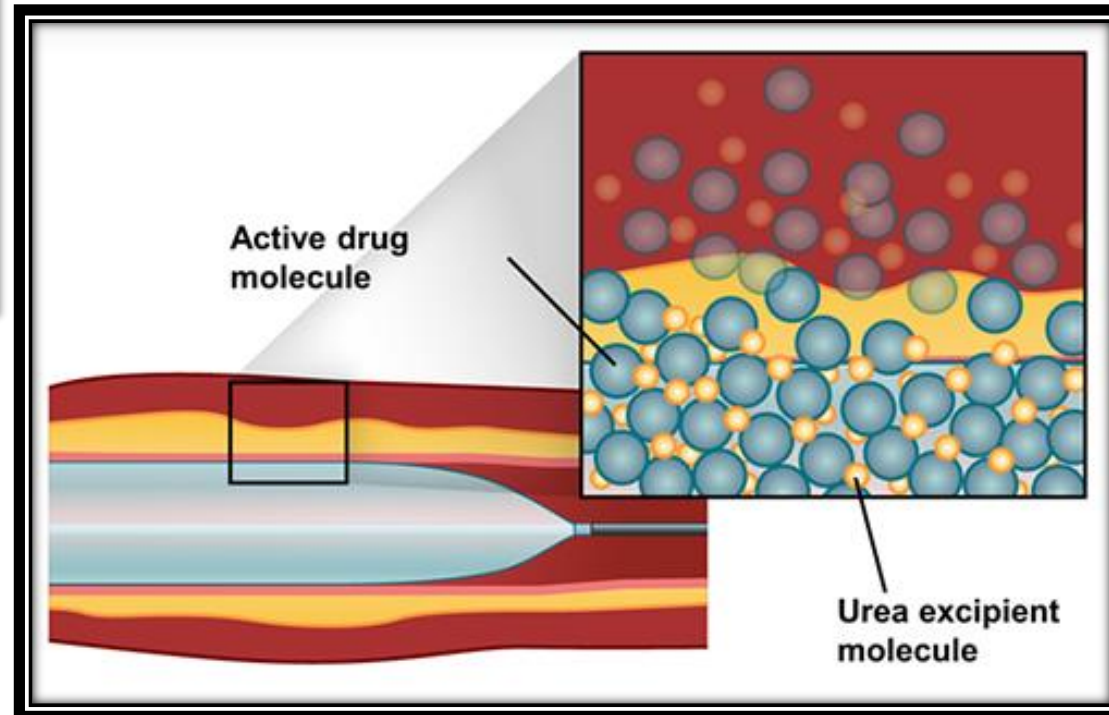
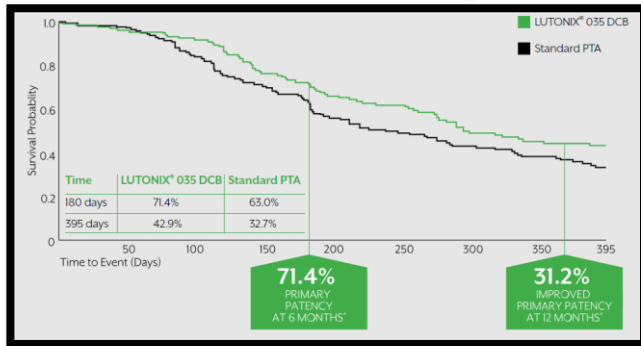
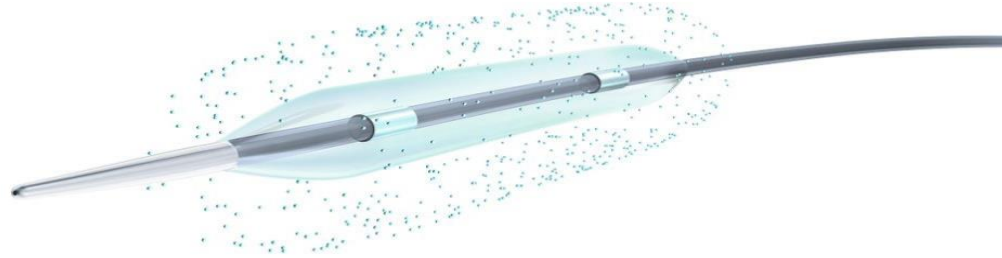
Restenosis
@ 3 months

70%

Early Recoil
@ 15 minutes

97%

Drug-Coated Balloon

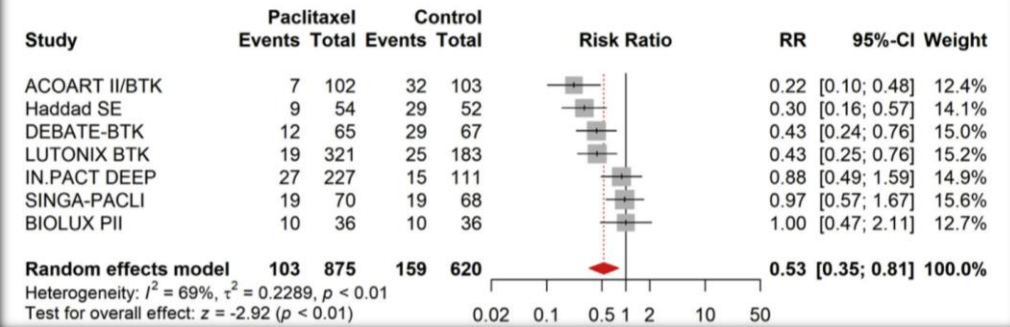


EVIDENCE-BASED REVIEW

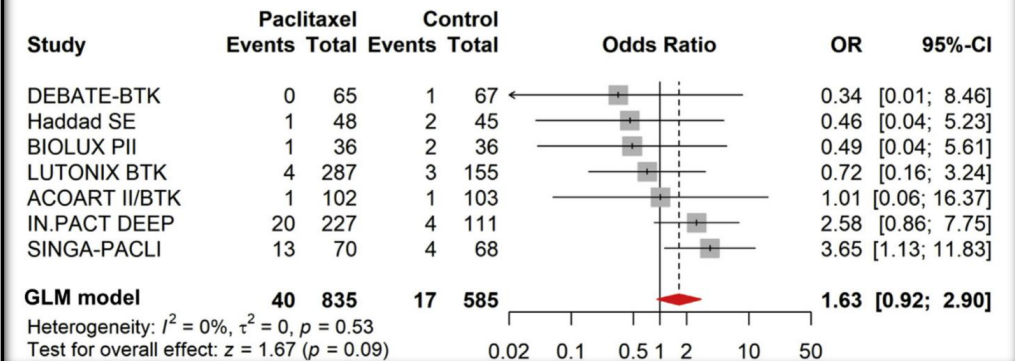
Risk of Death and Amputation with Use of Paclitaxel-Coated Balloons in the Infrapopliteal Arteries for Treatment of Critical Limb Ischemia: A Systematic Review and Meta-Analysis of Randomized Controlled Trials



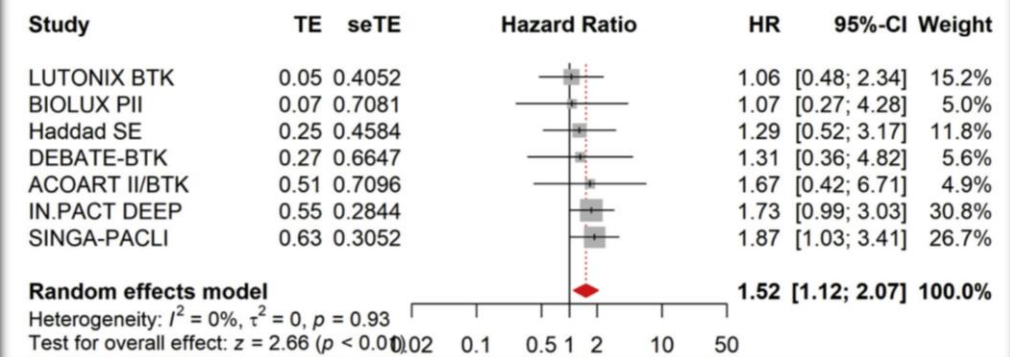
Freedom from TLR



Major amputations

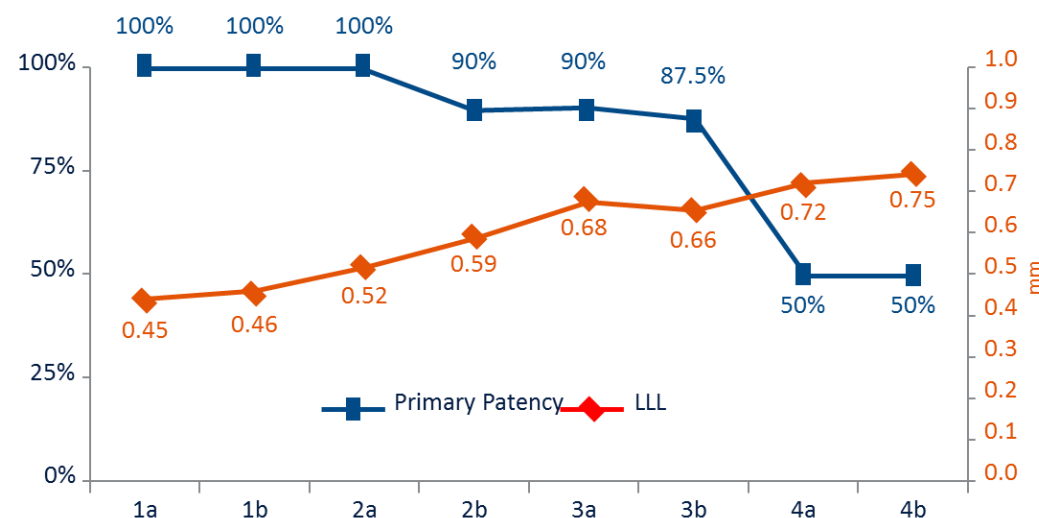
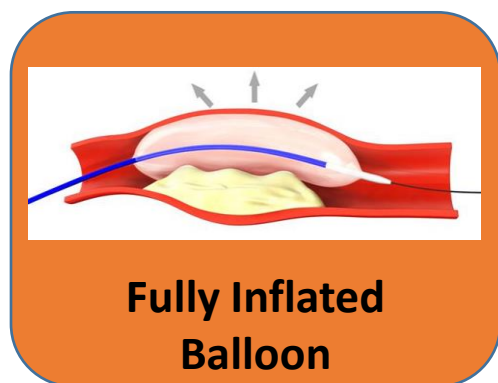


Amputation-free survival



Calcium **Limits** DCB efficacy

- Calcium distribution and severity may affect late lumen loss (LLL) and primary patency
- Calcium may represent a barrier to optimal drug absorption



Calcium distribution evaluation by CTA (circumf.) and DSA (longitud.); "a" <3cm and "b" >3cm



Restenosis: Causes & Solution

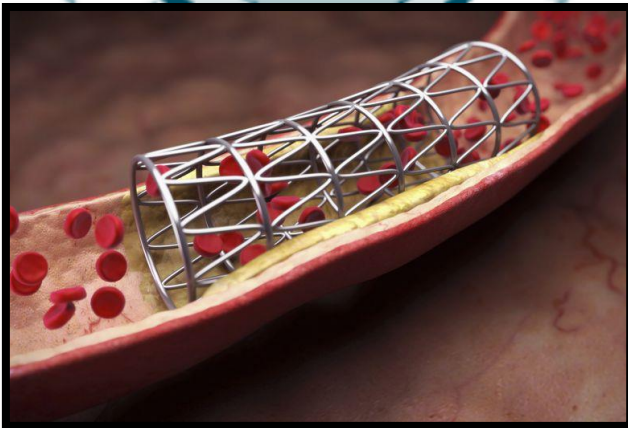
Causes

Recoil & Negative Remodeling (70%)

Neointimal Hyperplasia (30%)

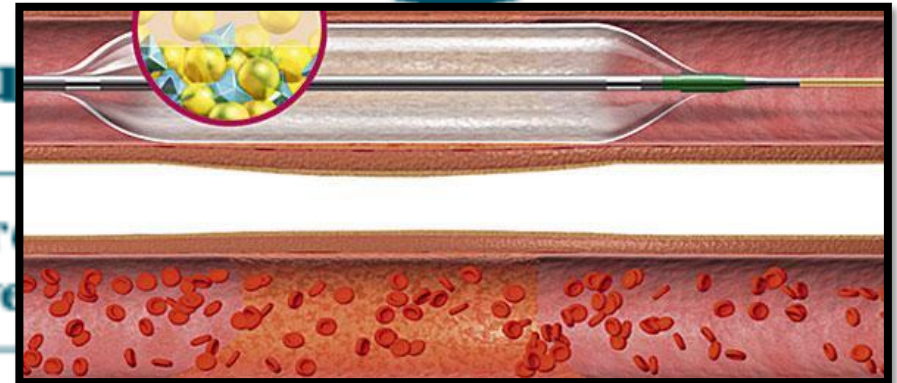


+



Solution

coil and re
t to preven



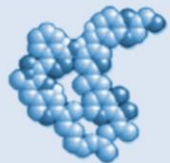
PromusPREMIERTM BTK Stent System

Boston
Scientific
Advancing science for lifeTM

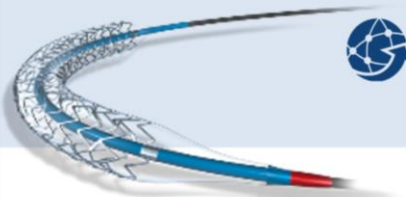
Key Components



Customized PtCr
Stent Architecture



Proven Everolimus &
PVDF-HFP Copolymer
Combination



Enhanced
Delivery System

Advantages

- Balance of Strength and Flexibility

- Outstanding Safety and Efficacy¹

- Improved Deliverability²



Multi-center **PromusPREMIER™** BTK registry

Jen-Kuang Lee



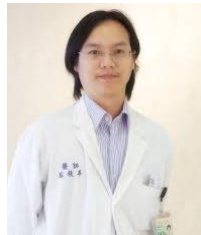
Dien-Yu Wu



Chiun-Chi Chen



Pin-Hsu Wu



Shu-Kai Hsueh
Wen-Jung Chung



Po-Chao Hsu



Chung-Ho Hsu



Multi-center **PromusPREMIER™** BTK registry

- The **efficacy** and **safety** of DES(Boston Promus®) in CLTI patients with BTK lesion

Inclusion

- **CLTI patients** with Rutherford IV and V
- **Three** stents most in each BTK vessel

Outcome (180 days)

- ABI, wound recovery time, amputation, primary patency, all-cause mortality

	N=84
Age	72.9 ± 12.5
Sex	44
DM	60
HTN	56
Dyslipidemia	62
CKD	64
ESRD	41
CAD	63
MI	25
Stroke	12
Rutherford IV	32
ABI	0.35 ± 0.21

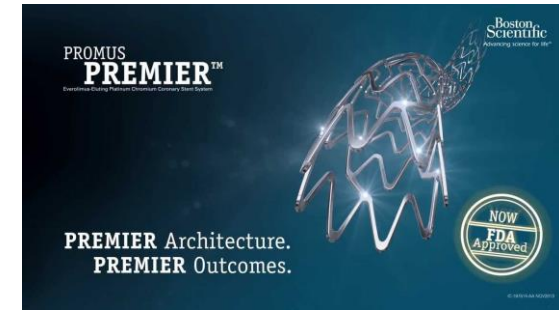
Intervention BTK	
ATA	64
Peroneal	45
PTA	55
De novo	72
CTO	61
Calcium	
Severe	57
Intravascular image	
IVUS	10
OCT	28
BTK portion	
Proximal	57
Mid	38
Distal	3
PP stent	
Size (mm)	3.17
Length (mm)	73.4
Concomitant lesion	
SFA	43
iliac	12
BTA	32

Result

- ABI: **0.87 ± 0.23**
- Amputation: **0**
- All-cause mortality: **0**



78 y/o man, H/D, RC V



Pre EVT-AP

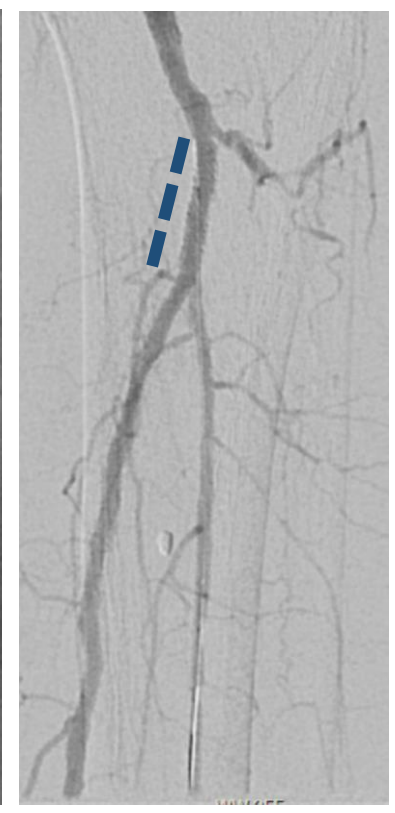
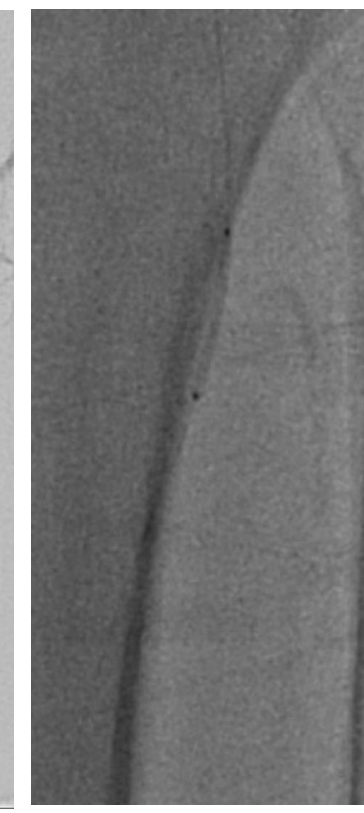
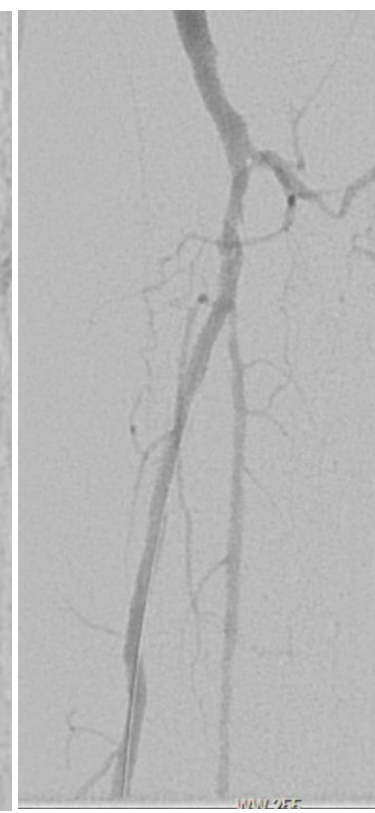
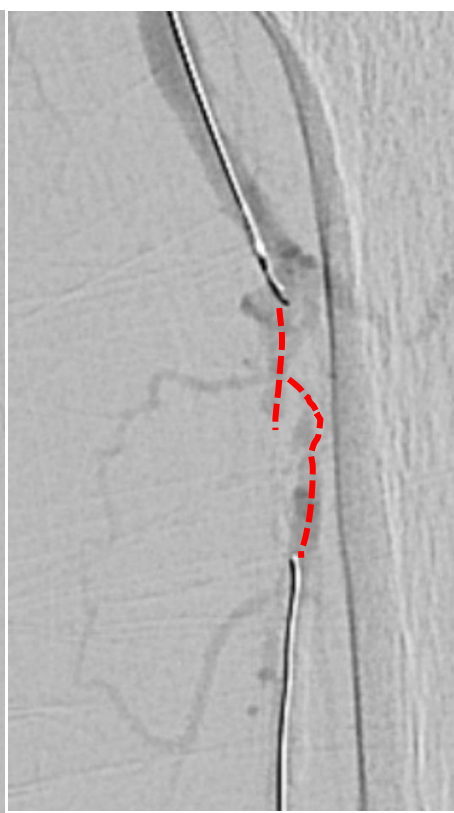
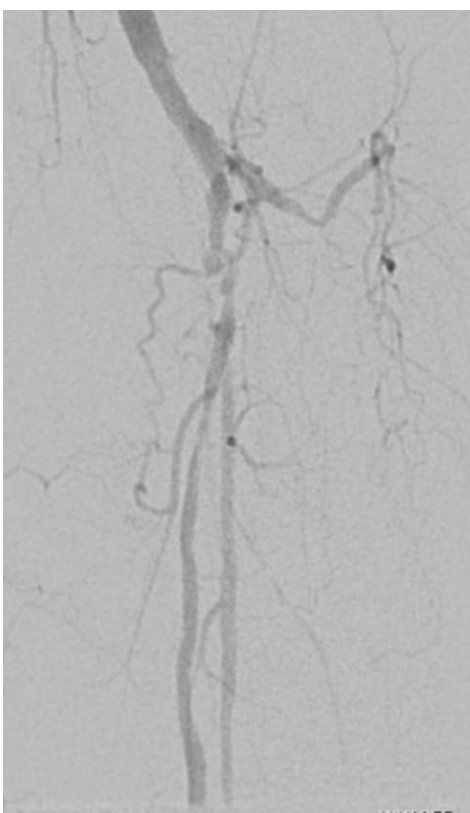
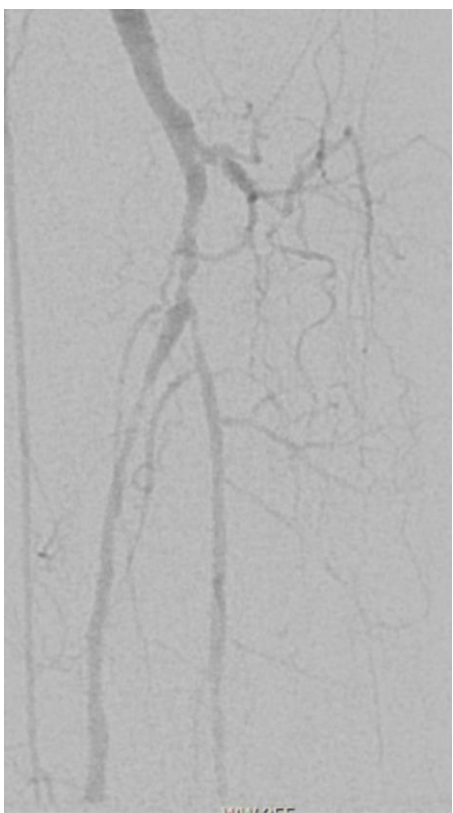
Pre EVT-RAO

Wiring

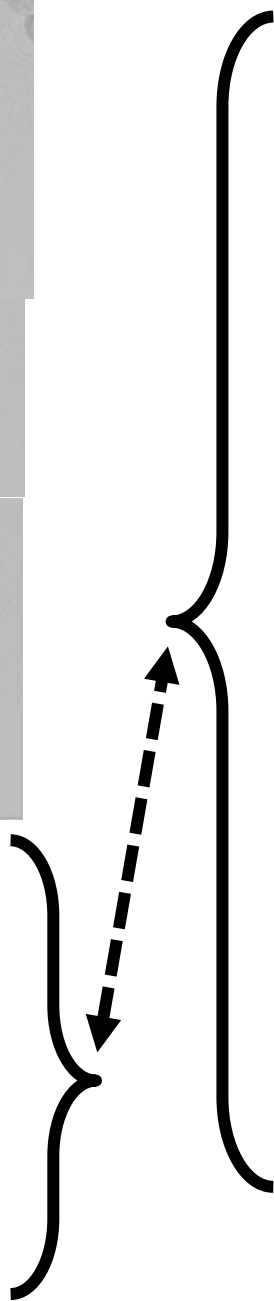
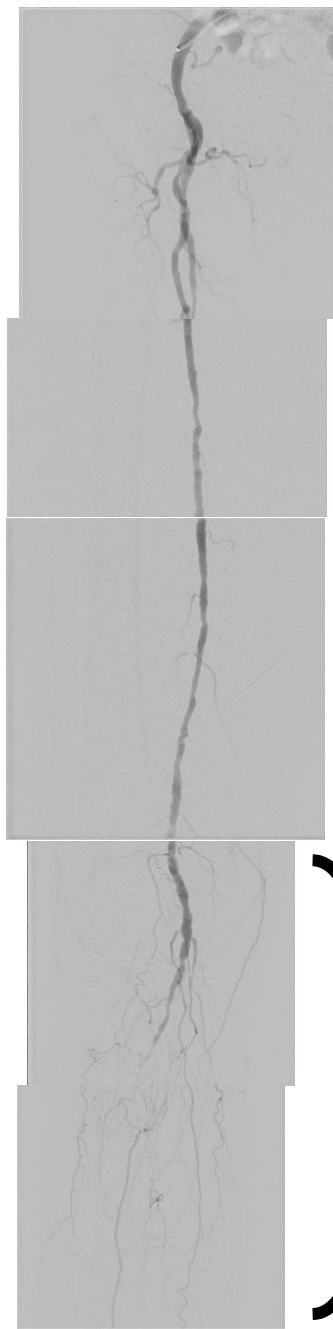
Angioplasty

Stenting

Post EVT



**86 y/o
woman,
H/D, RC V**



3D
Volume Rendering No cut
DFOV 71.0 x 128.2 cm
STND/+AR30 No Filter
5649046
Ex:Nov 16 2021

R
3
4
1
L
3
6
9

Nb Views: 24

No VOI
kV 120
1.2mm 0.984:1/1.25sp
W = 700 L = 200

Rotation: 15.0 deg.

1 of 23

3D
HD MIP No cut
DFOV 71.0 x 128.2 cm
STND/+AR30
5649046
Ex:Nov 16 2021

R
3
4
1
L
3
6
9

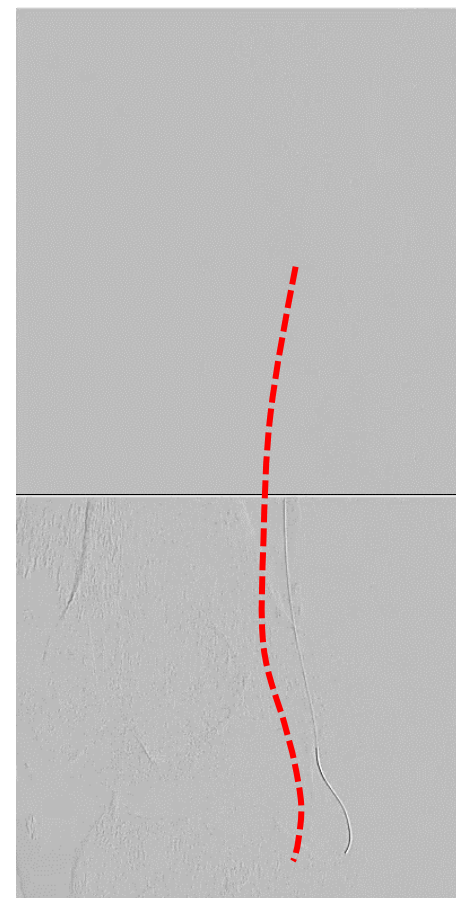
Calc. incl.

Nb Views: 12

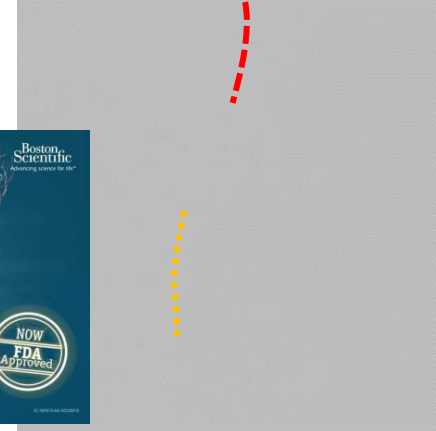
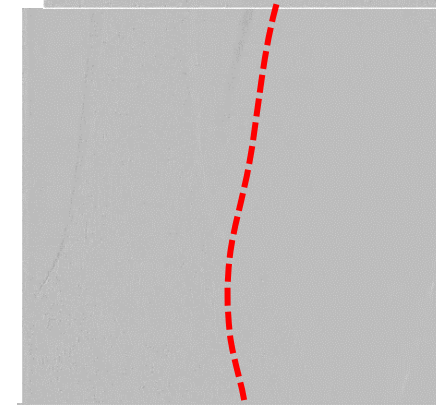
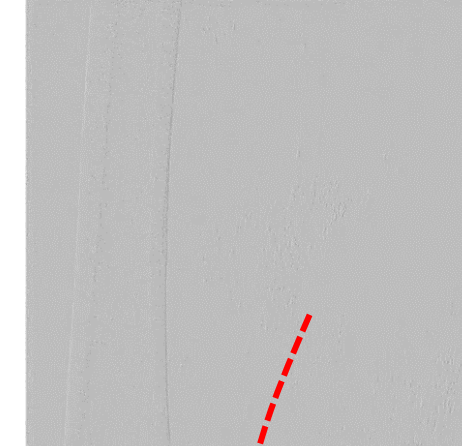
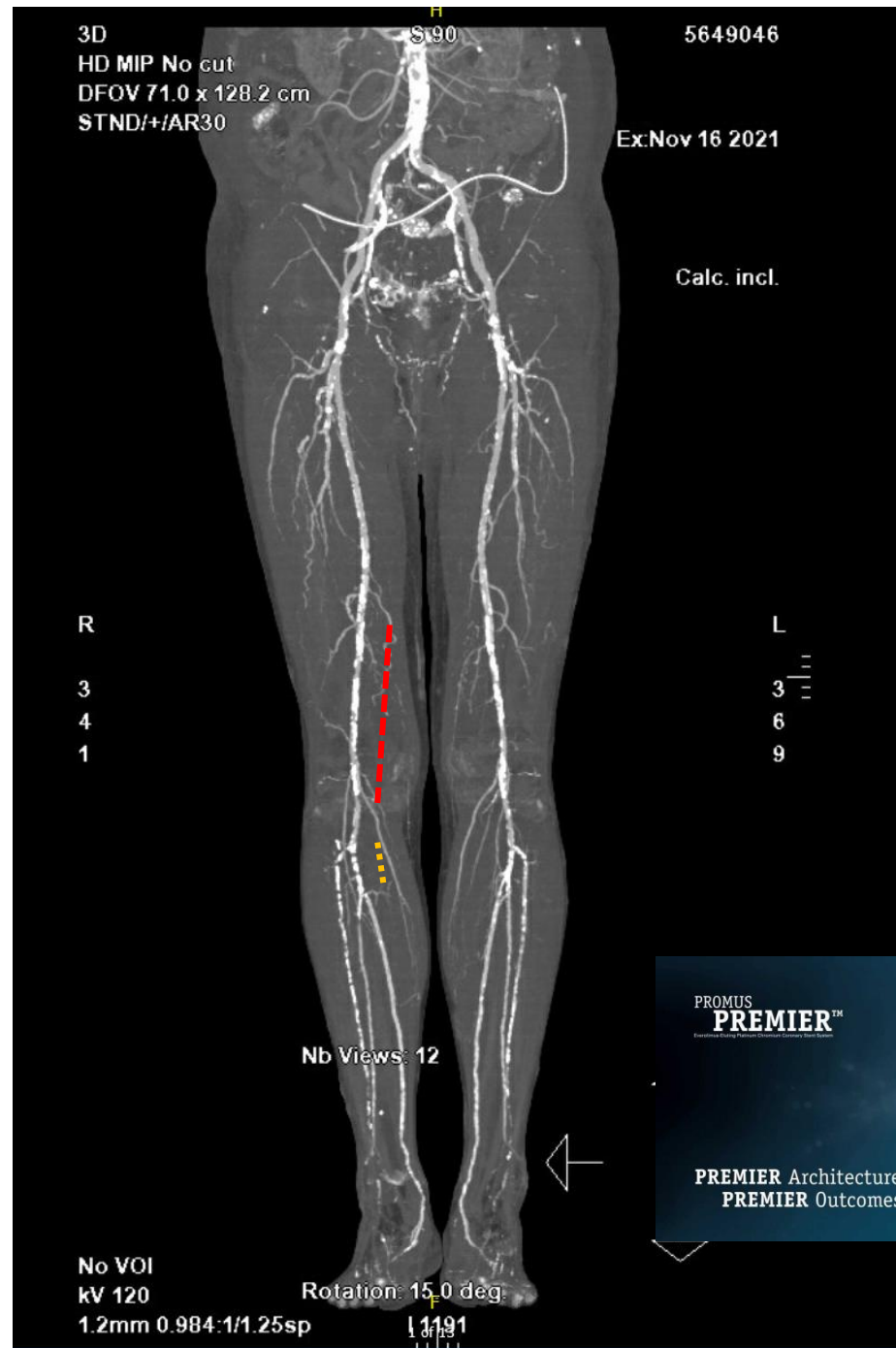
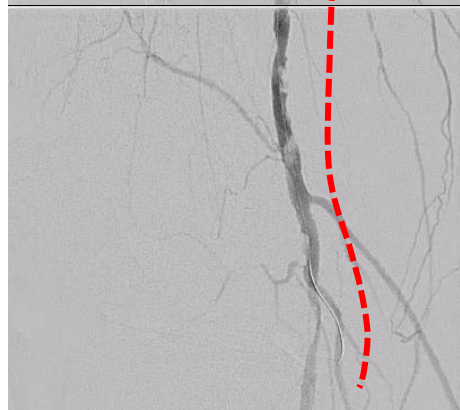
No VOI
kV 120
1.2mm 0.984:1/1.25sp

Rotation: 15.0 deg.

1 of 23







Chronic limb-threatening ischemia (CLTI) @6 months



Take home message

- **BTK lesion** is difficult to maintain even **short-term** patency
 - Calcification, long lesion, CTO
- **DCB** is **NOT** the “**Savior**” in BTK lesion
 - RCT, meta-analysis, RWD, personal experience
- **DES** (PromusPREMIER™) may be the “**Game Changer**”
 - Location, length, radial force, long-term result