

## Case 3: Cutting vs. Scoring Balloon in partially calcified In-stent stenosis

## Nikos Werner, MD, PhD Heart Center Trier Krankenhaus der Barmherzigen Brüder Trier, Germany



# **Disclosure**

- Boston Scientific: Honorarium, travel grants, consulting
- Shockwave: Scientific grants, honorarium, travel grants, consulting





## **PATIENT CHARACTERISTICS**

- We report on a 73-year-old female patient.
- Admission to the Chest Pain Unit due to unstable angina.
- Cardiovascular risk factors include:
  - Arterial hypertension
  - Hyperlipoproteinemia
  - Diabetes

• PCI of the ostial RCA with a Promus Premier Select 3.0 x 16mm stent in

2018





### **SET UP SHOTS**



- Intermediate in-stent restenosis of the ostial RCA with pressure dumping.
- For further analysis, we decided to perform an IVUS (Avigo+).

#### <sup>29\*</sup> TCTAP2024



### **SET UP SHOTS - IVUS**





In-stent restenosis of the RCA (A) with ostial calcification (B).

Mechanism: stent underexpansion with neointima and neoatherosclerosis





### **Mechanisms of Instent ostial RCA stenoses**







### STRATEGY

- Moderate calcification of the ostial RCA with fibrotic In-stent restenosis;
  - 4.0mm vessel; lenght of lesion 12mm





Significant treatment effect-by-modified balloon type interaction for the outcome MACE in patients assigned to cutting balloon compared with control therapy [RR = 0.40 (0.28-0.56), P for interaction (*P*int) < 0.001].

#### Scalamogna et al., Clinical Research in Cardiology; online Nov. 6th 2023 https://doi.org/10.1007/s00392-023-02324-y

### **Wolverine Cutting Balloon - Mechanism of Action**

Innovative design for safe and efficient calcium cracking<sup>3</sup>

### Atherotome Amplified Force.<sup>1</sup>

The atherotomes anchor into the plaque and amplify pressures generated by the balloon. This creates controlled, longitudinal cracks in the calcium.<sup>1</sup>

### Safely Cracks Calcium.

Due to its design, Wolverine can modify calcium at lower pressures than POBA.<sup>3</sup> Atherotomes penetrate a small distance into the vessel wall, even in healthy tissue.<sup>4</sup>



Atherotome Cutting Height	127 µm
Human LAD Media Thickness <sup>2</sup>	320 µm
Human LAD Wall Thickness <sup>2</sup>	900 µm

1 Xiaodong Zhu et al.; Circ Rep 2021; 3: 1 – 8 doi: 10.1253/circrep.CR-20-0070. Results of computer models are not predictive of clinical performance. Clinical results may vary.

2 Bonan, J InvasivCardiol, 1999; 11: 230

3 Mangieri, A. Cutting Balloon to Optimize Predilatation for Stent Implantation: The COPS Randomized Trial, TCT 2022

4 BSC Data on file. Photos taken by Boston Scientific. Results of internal bench studies are not representative of clinical performance. Clinical results may vary.



 Moderate calcification of the ostial RCA as well as fibrotic In-stent restenosis; 4.0mm vessel; lenght of lesion 10mm

- » Cutting balloon Wolverine 3.5/10mm @ 12 atm.
- » Dilatation with a NC Quantum Apex 4.0/15mm @ 14atm.
- » Promus Element DES 4.0/16mm





### **LESION PREP – WOLVERINE 3.5/10mm**



### **Stent or DCB ?**



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EuroIntervention 2023;19:e383-e393



### **KEY LEARNINGS**

- Intravascular imaging is one of the basic pillars for planning the appropriate strategy in the treatment of in-stent restenosis.
- Cutting balloons are ideal for fibrotic/calcified stenoses
- Adequate preparation of the stenosis is crucial for the final result.
- The use of a cutting balloon vs. a scoring balloon may have beneficial effects in lesion preparation with limited data available.







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# Thank you for your kind attention!

### **Nikos Werner**

n.werner@bbtgruppe.de





