Clinical Case Presentation

Jacques Koolen MD PhD

Catharina Hospital Eindhoven

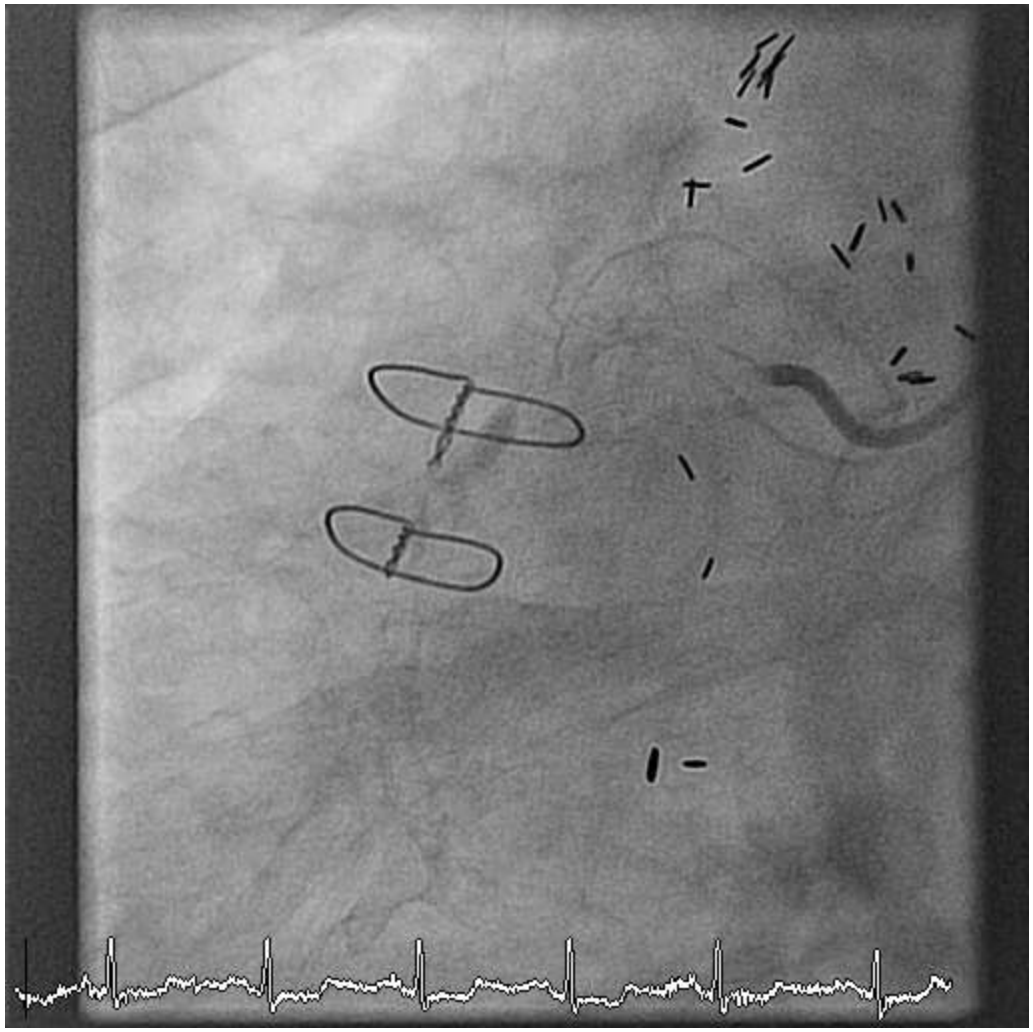
The Netherlands

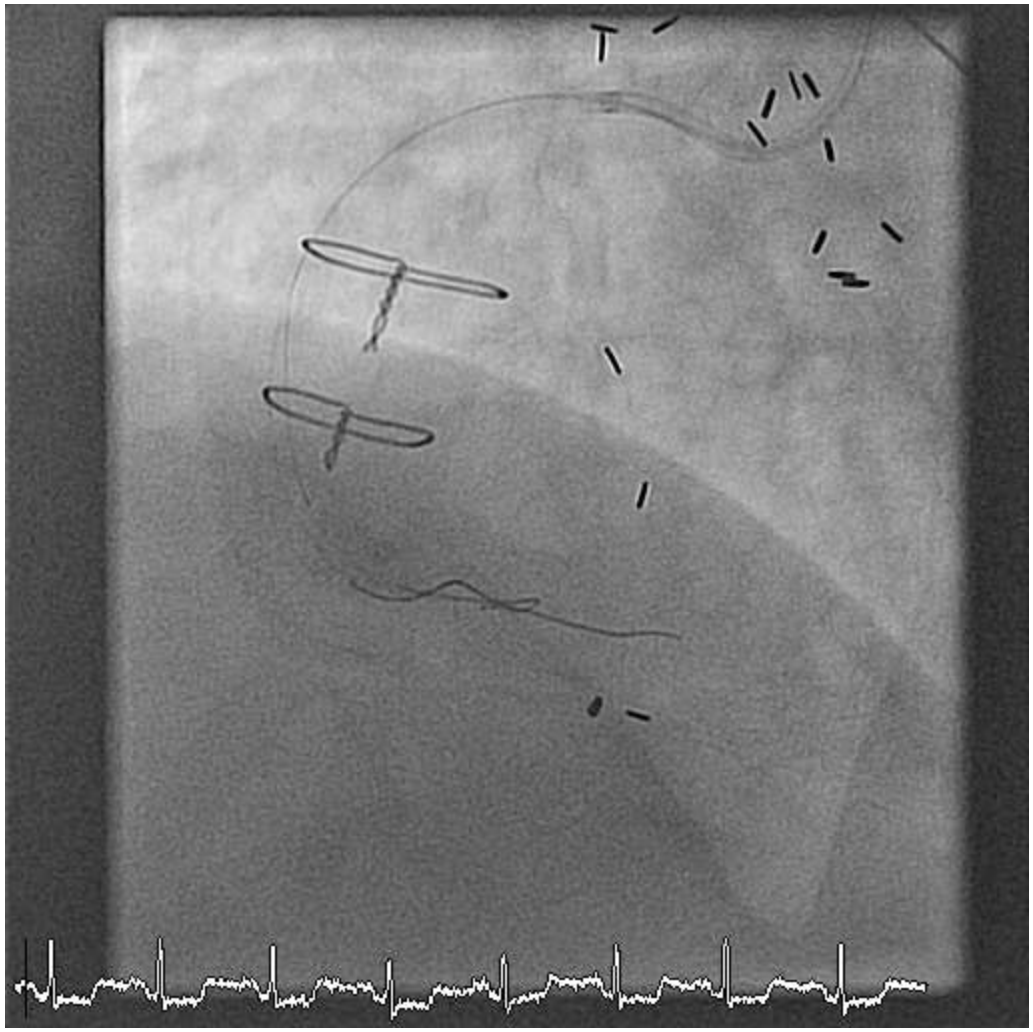
Gedreven door het leven.

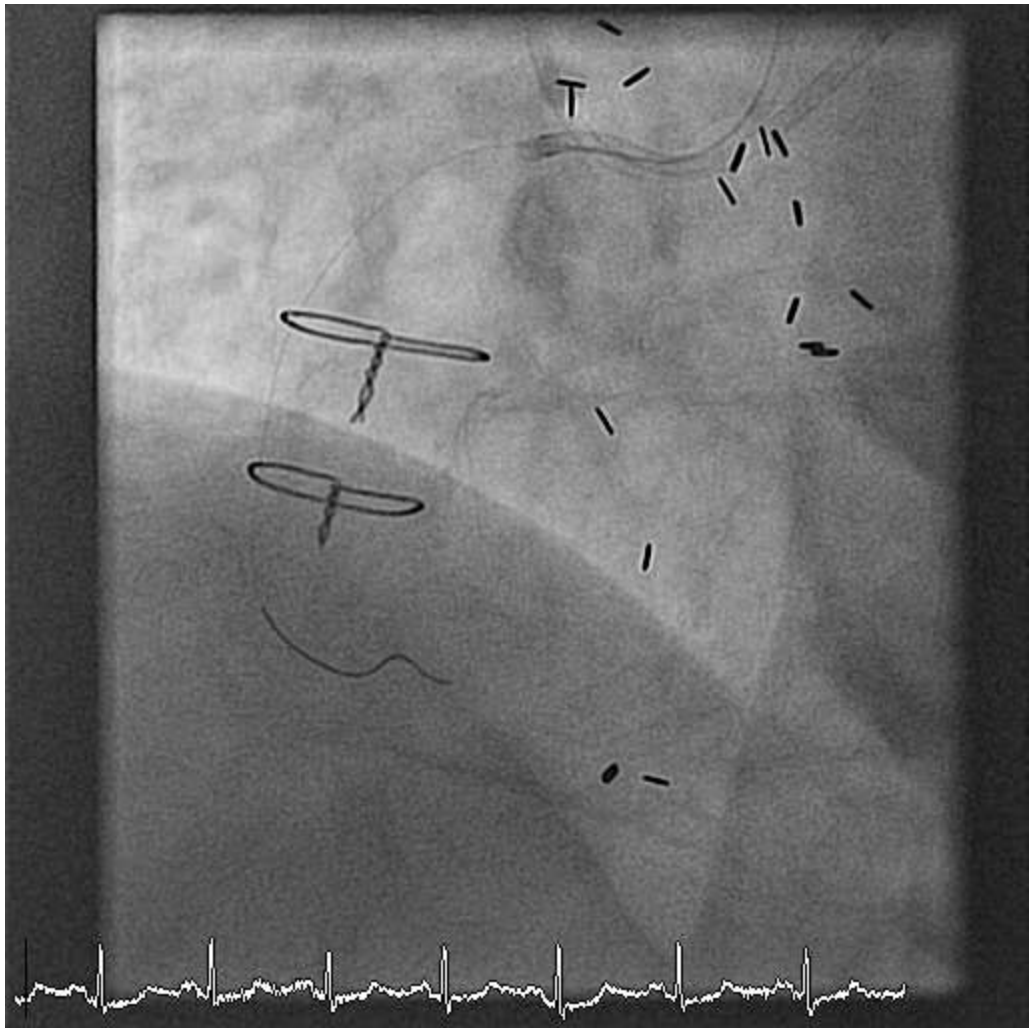
catharina ziekenhuis

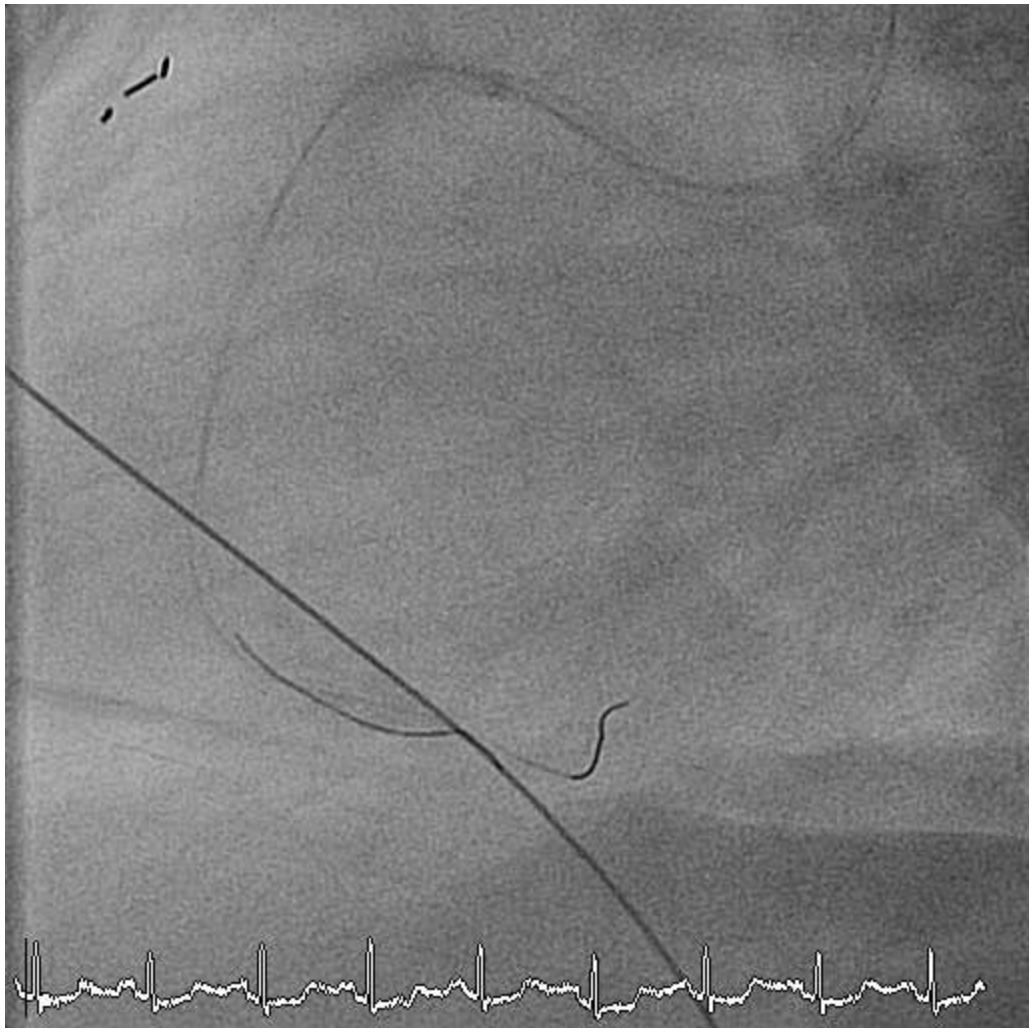
Casus

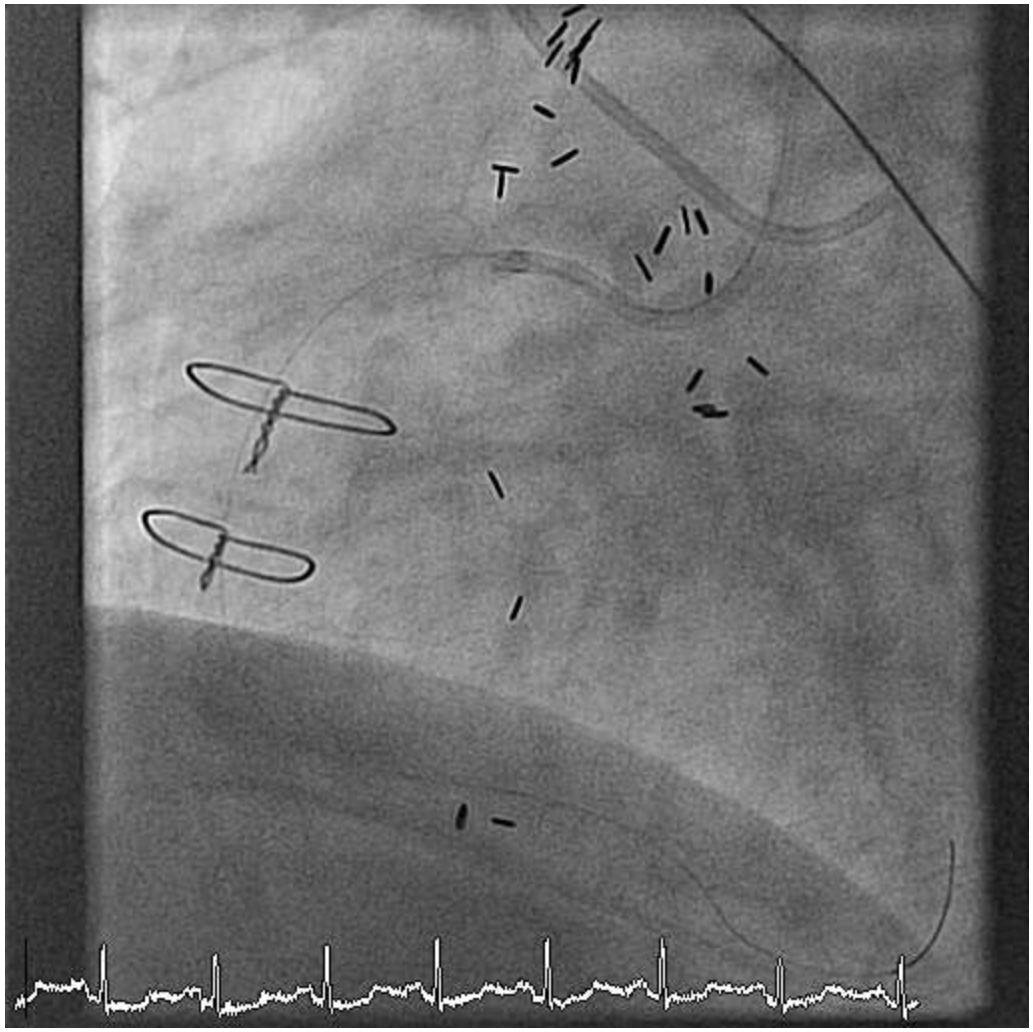
- 72 years old Male
- Referred
- Diabetes
- Previous CABG
- Triple therapy
- Angina 3+/4 Positive MIBI-Spect
- Inferoposterior lateral

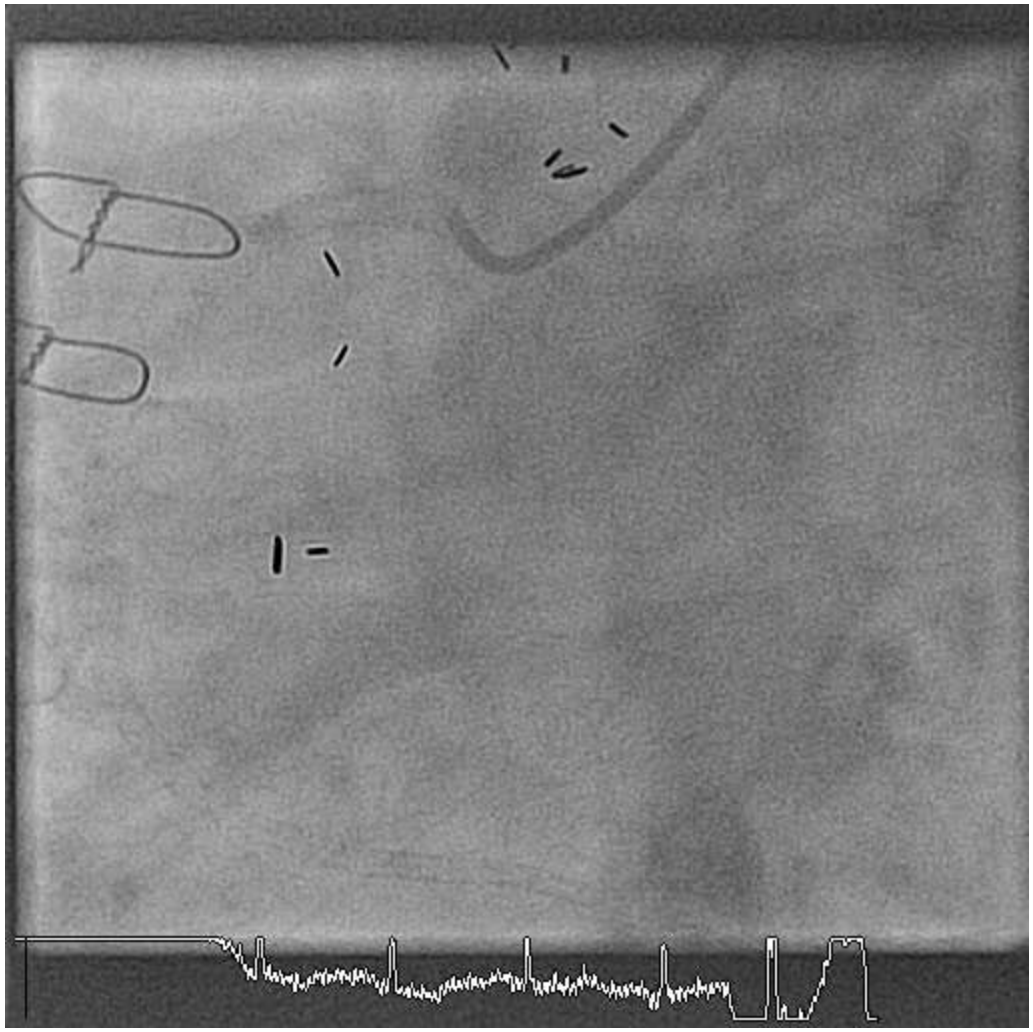




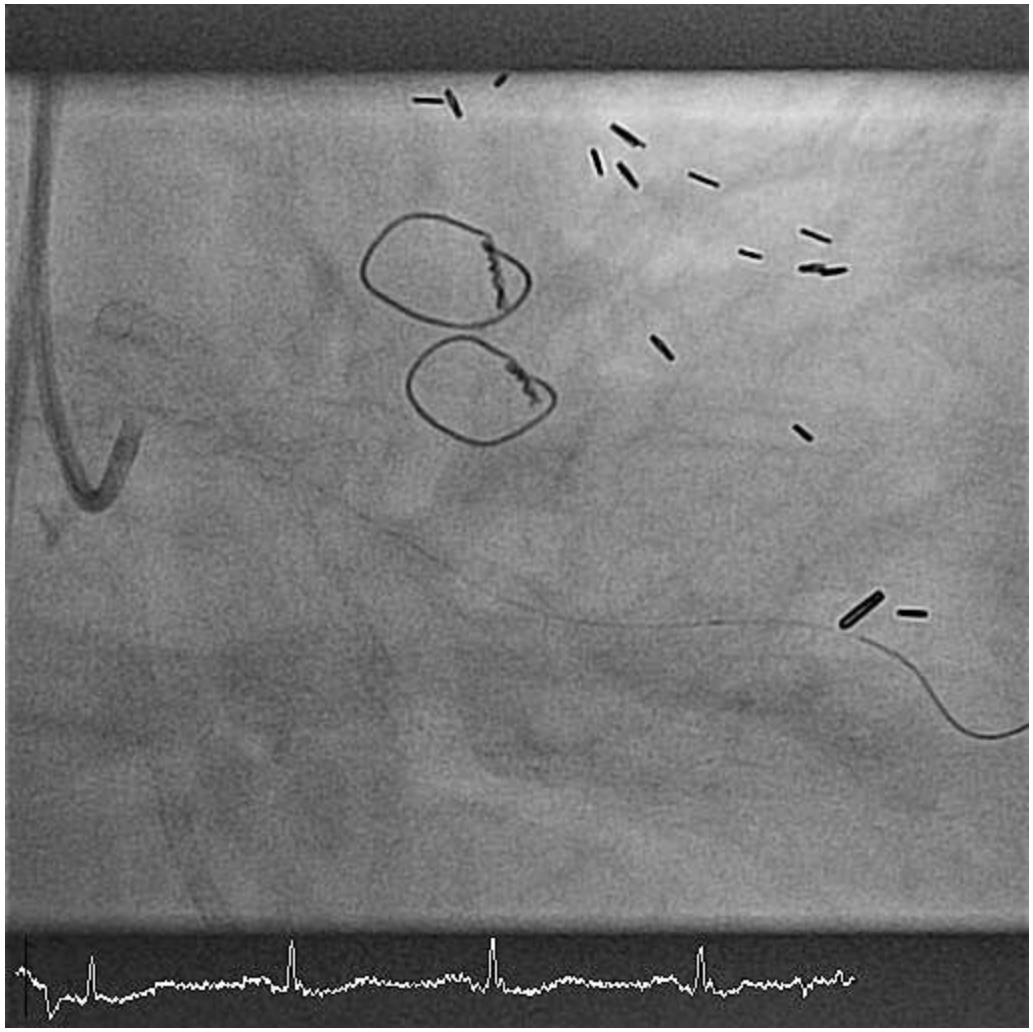

T

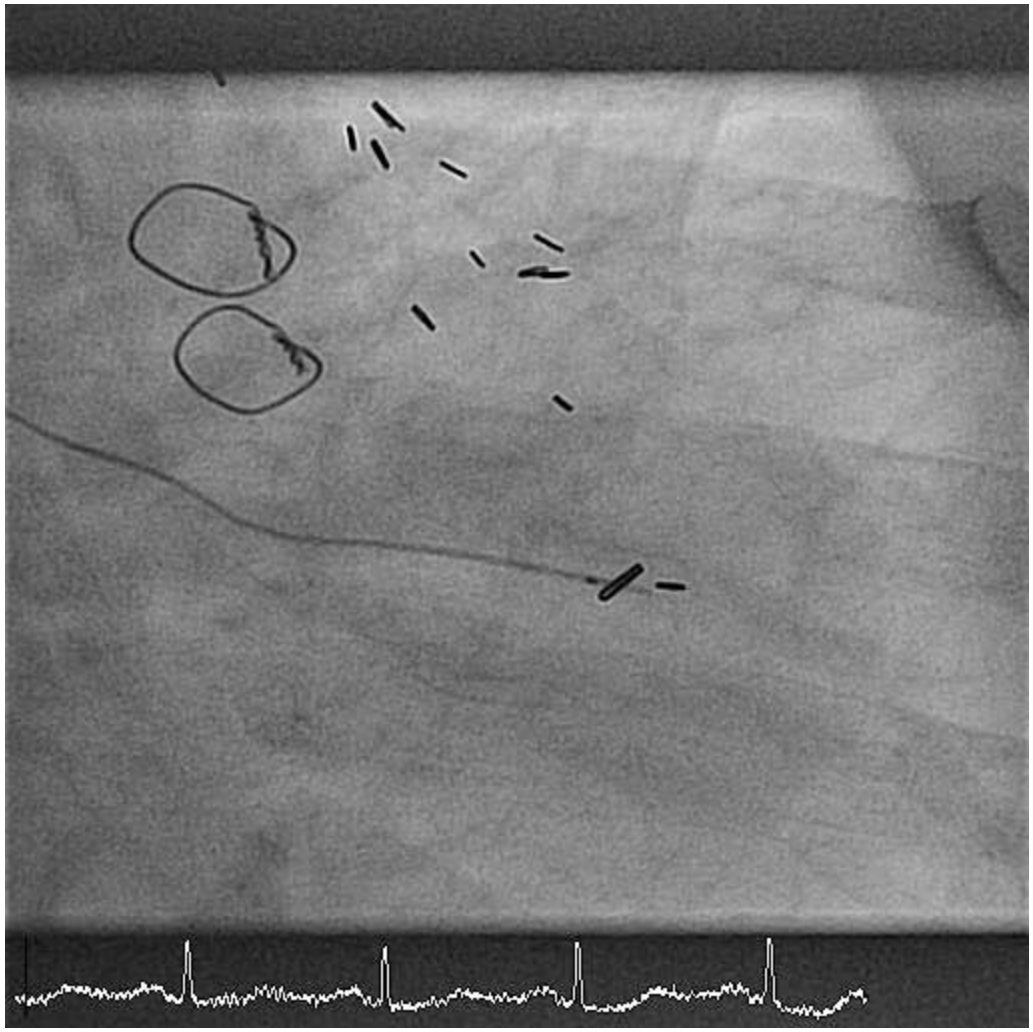


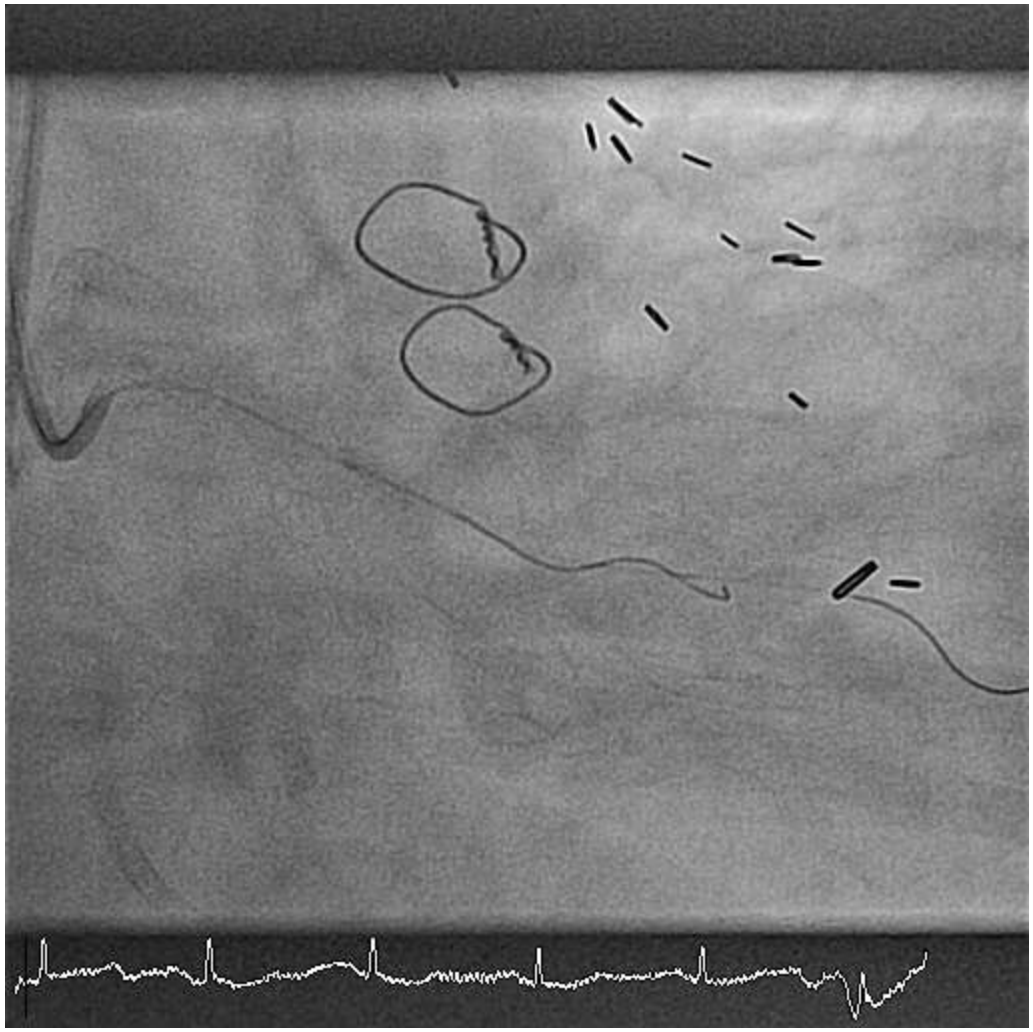

T

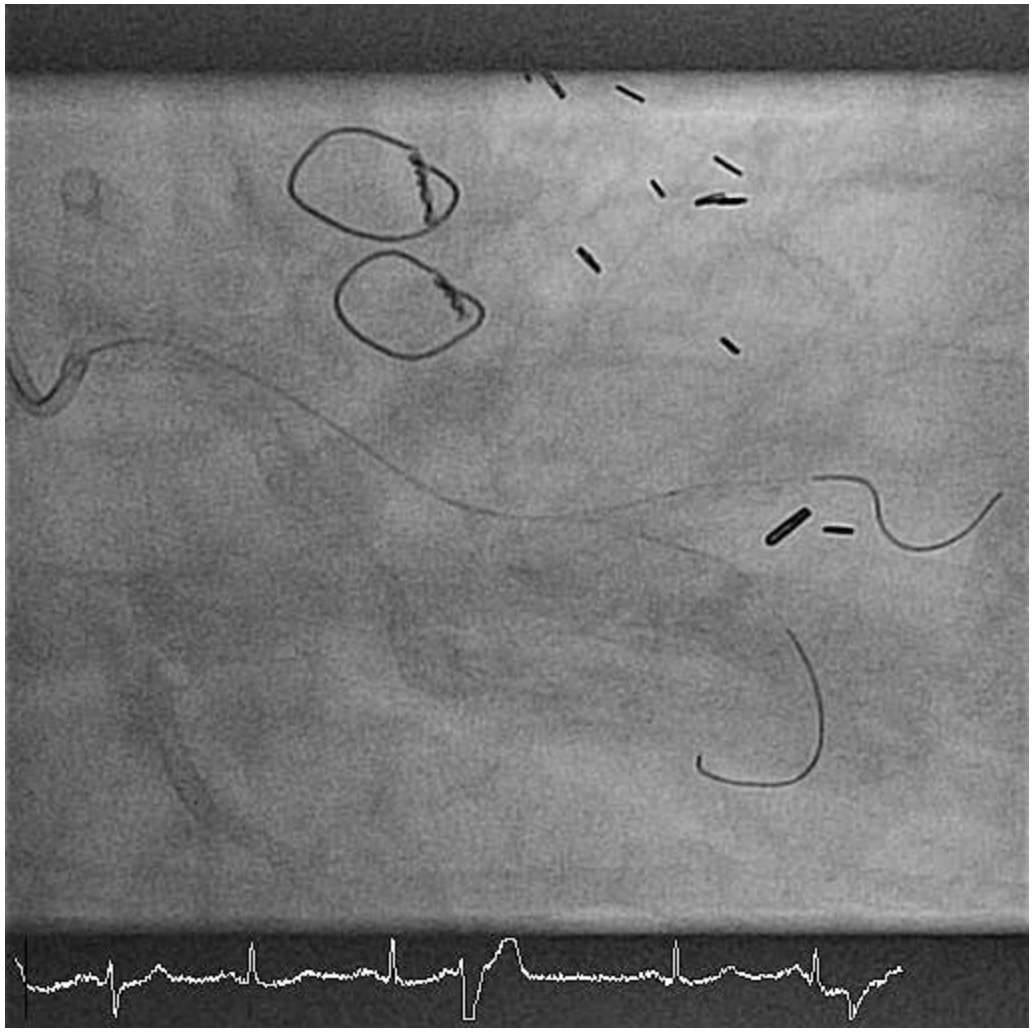


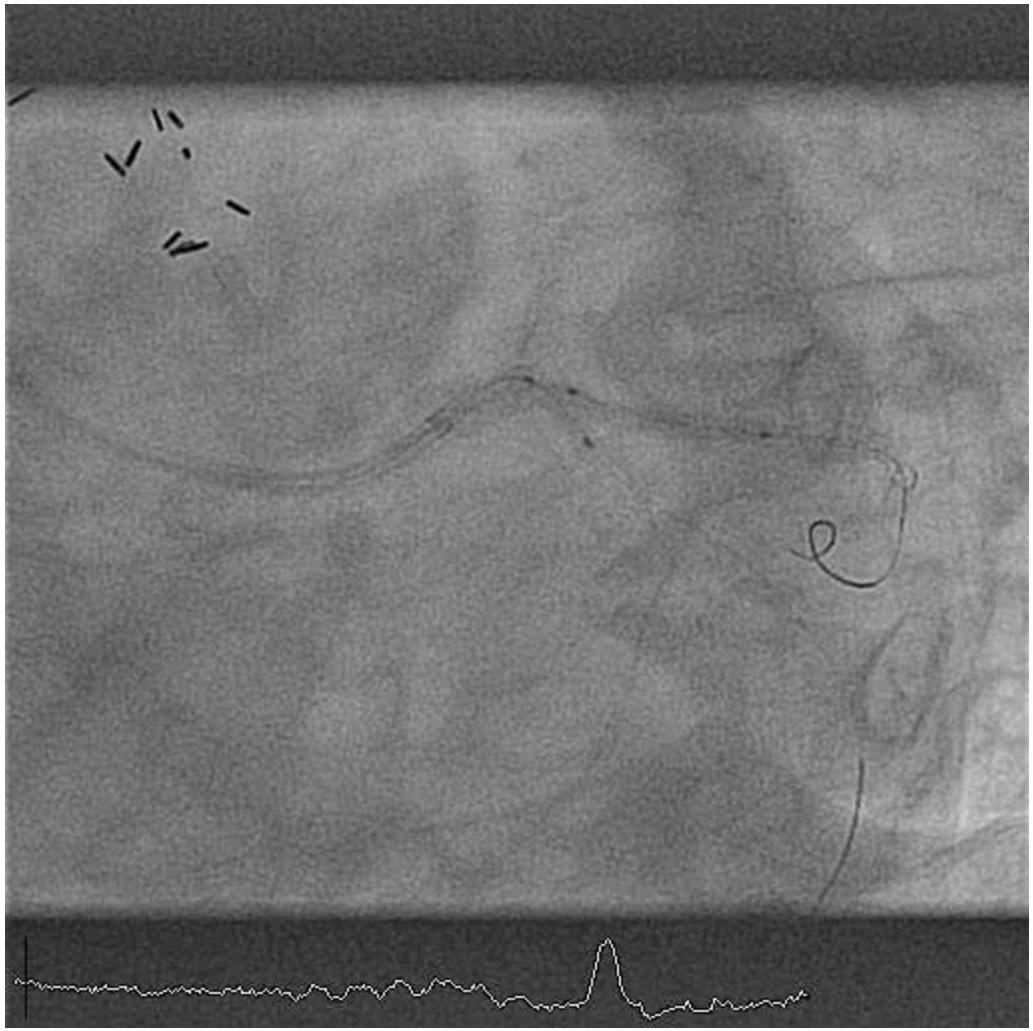
- After succesfull opening of RCA: persistent angina 3/4

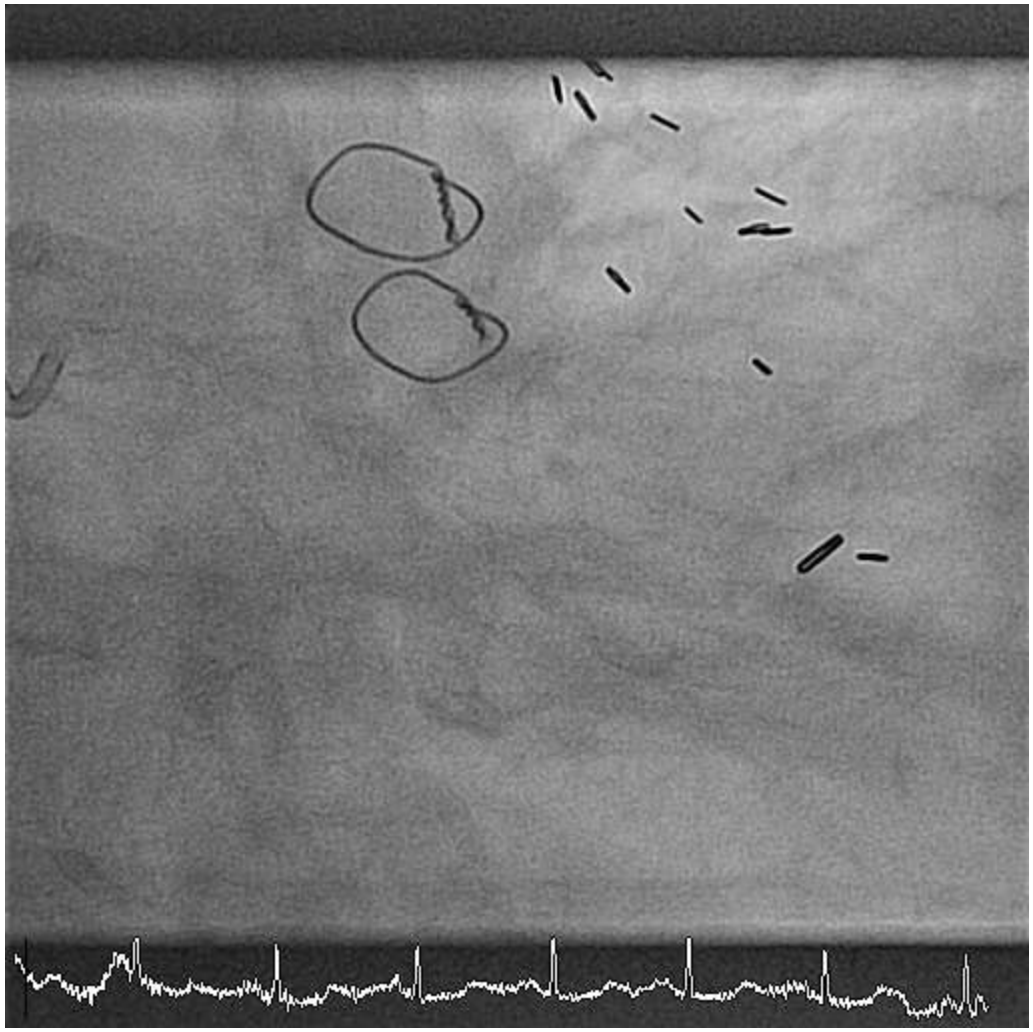












- After PCI Margo Obtusis
  1/4 Angina

Learning Objectives

- Do not over - or underestimate the vessel size with CTO
- The vessel responsible for complaints, is sometimes difficult to identify
- Angina class is very important for the patient!

A Randomized Multicentre Trial to Evaluate the Utilization of Revascularization or Optimal Medical Therapy for the Treatment of Chronic Total Coronary Occlusions

Gerald S. Werner, MD PhD on behalf of the EURO CTO trial investigators

Study design

- Prospective, open-label, multi-centre randomized trial
- Primary efficacy endpoint: the effect of PCI as compared to OMT on the health status at 12 months follow-up as assessed by the Seattle Angina Questionnaire (SAQ)
- Primary safety endpoint: the safety of performing PCI as compared to OMT for a CTO in stable coronary artery disease during 3 years of follow-up

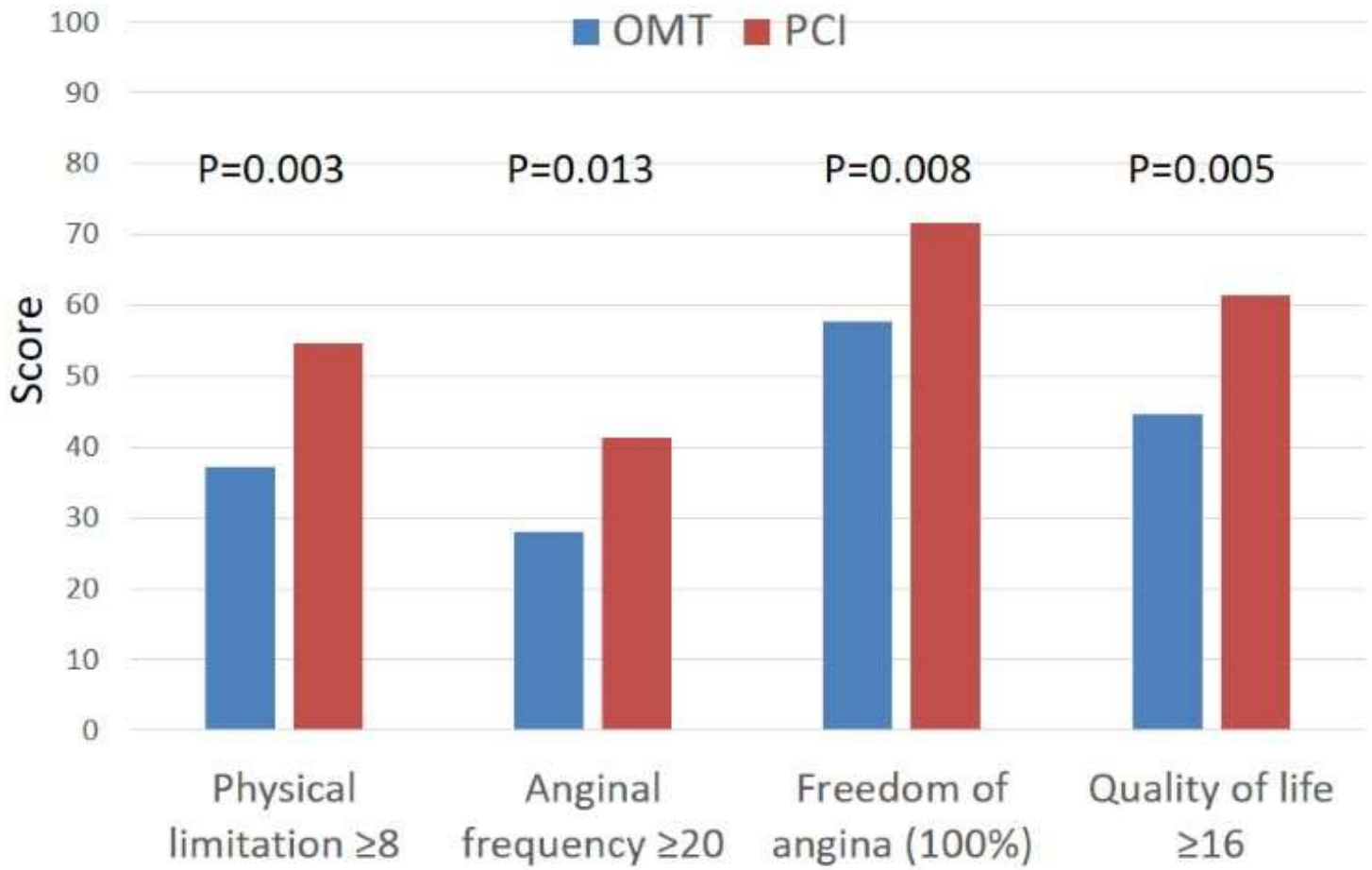
www.clinicaltrials.gov. NCT01760083

MACCE during follow-up

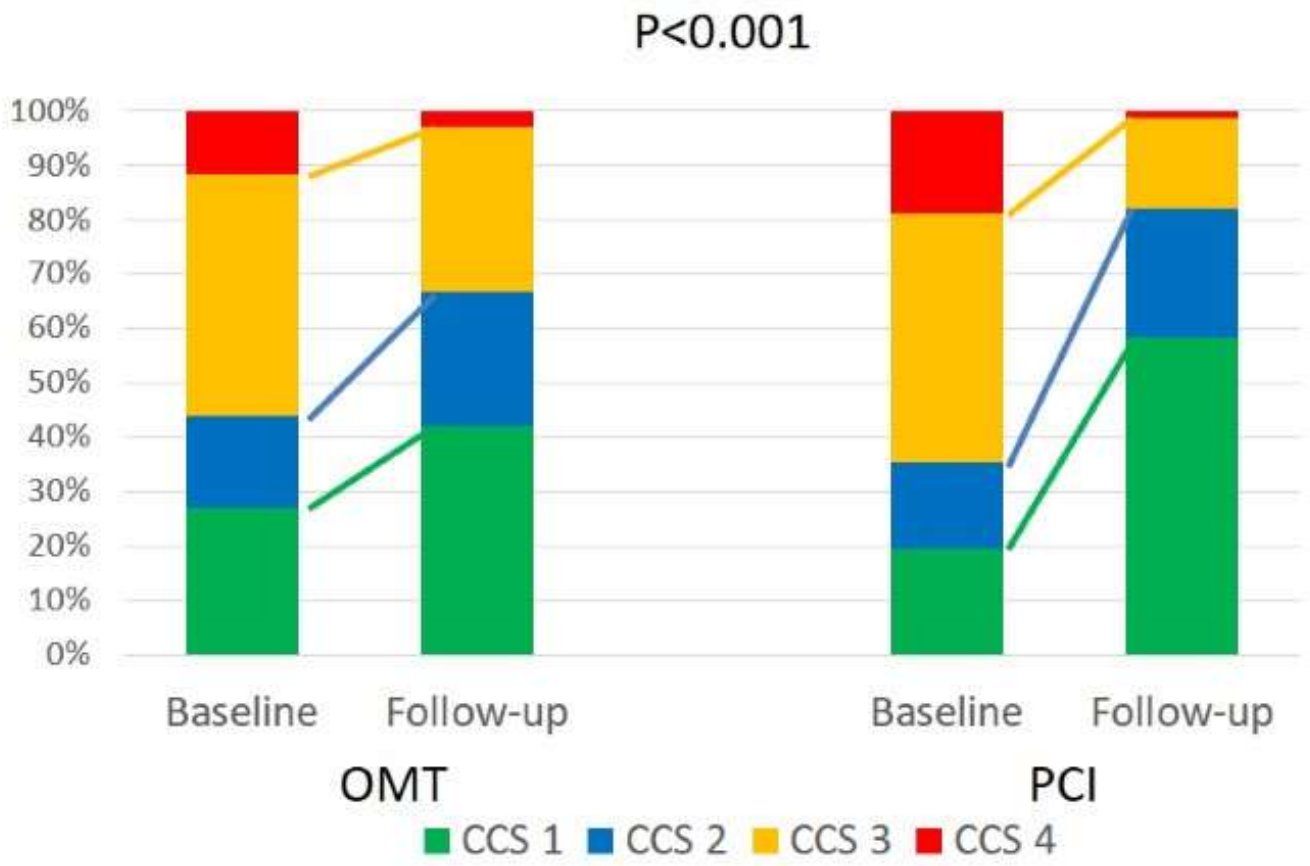
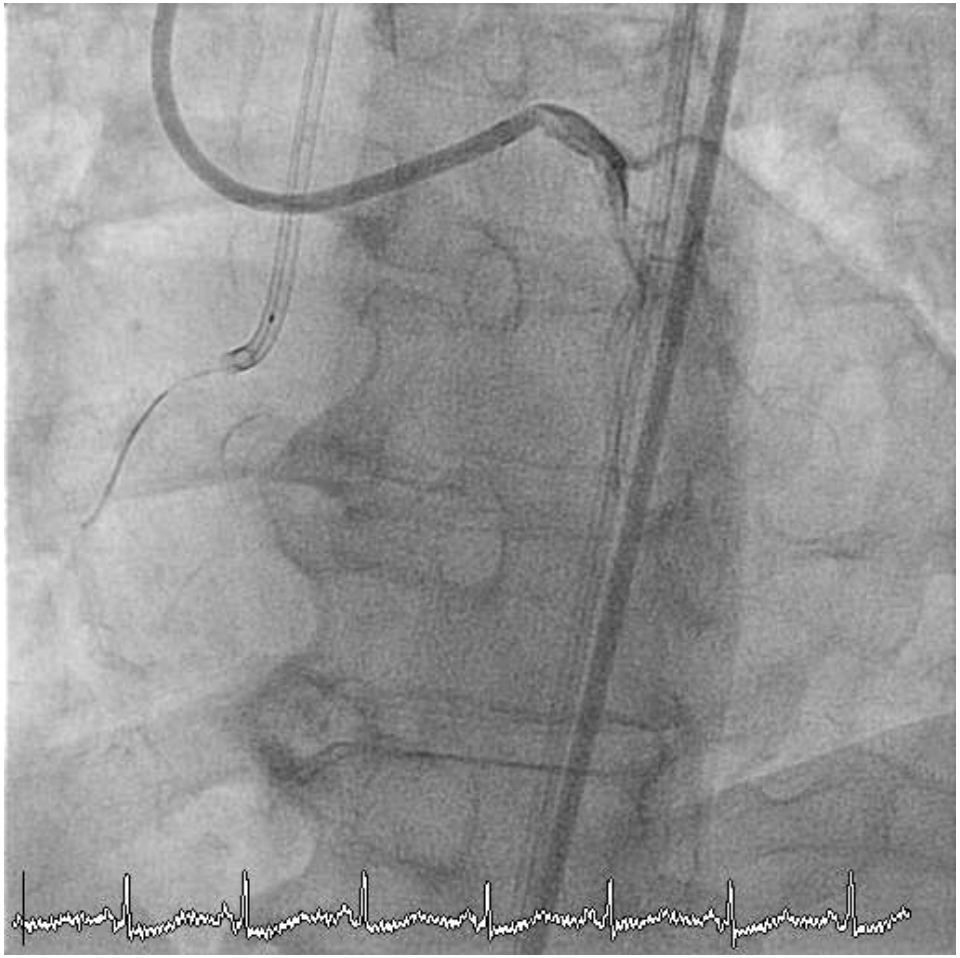
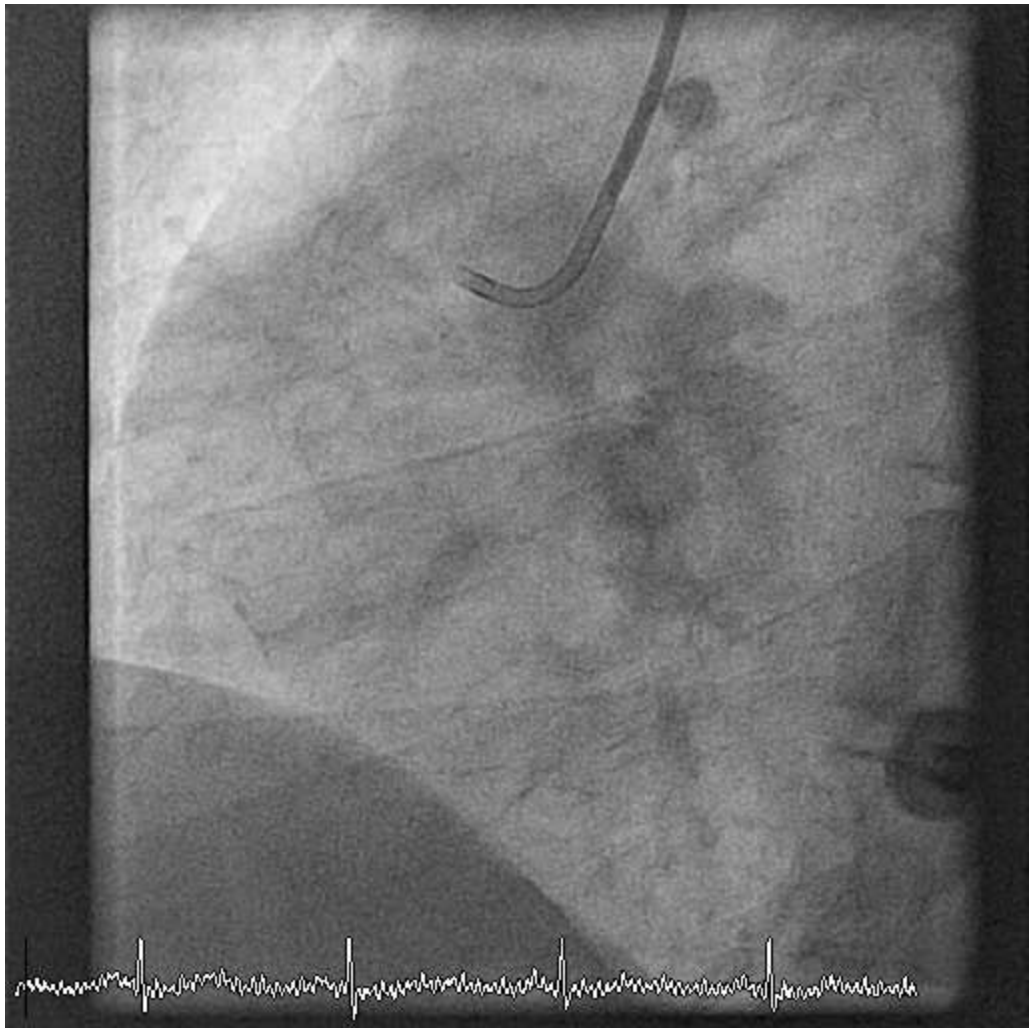
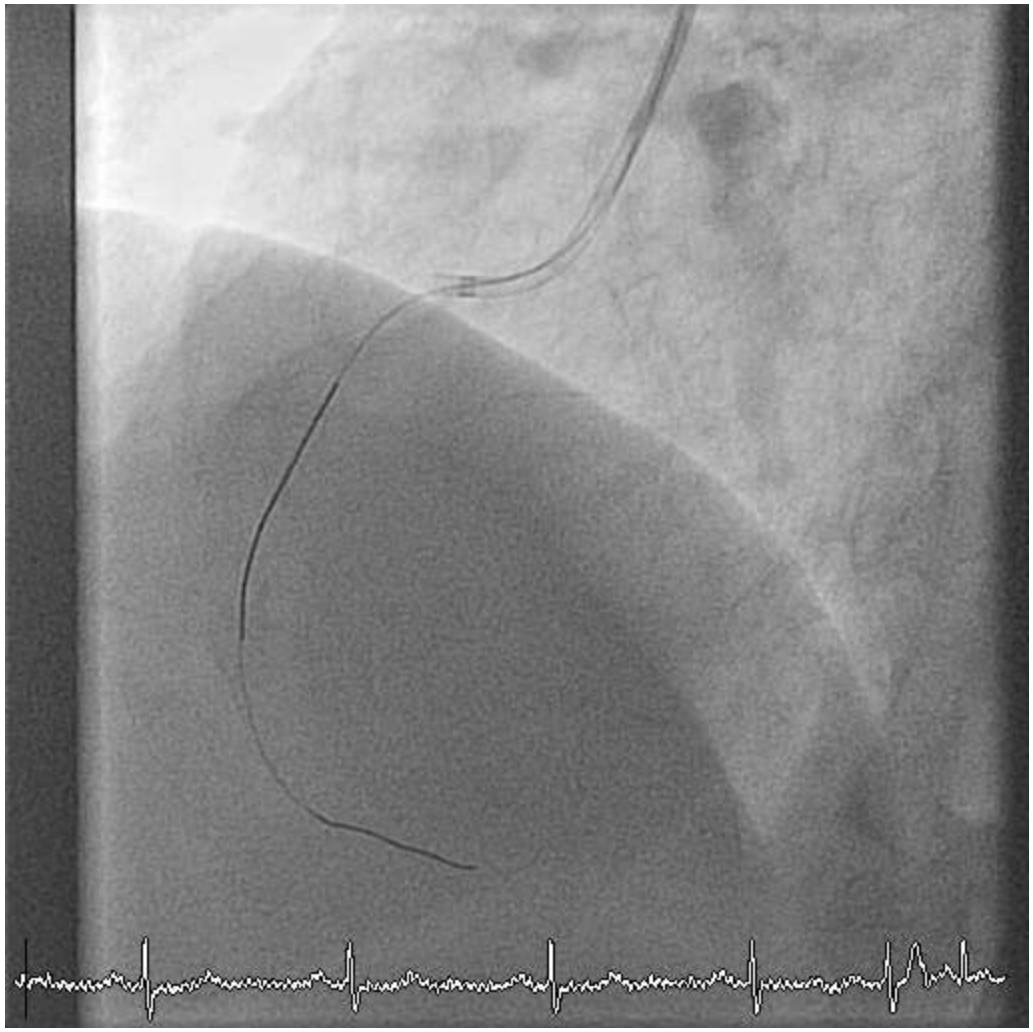
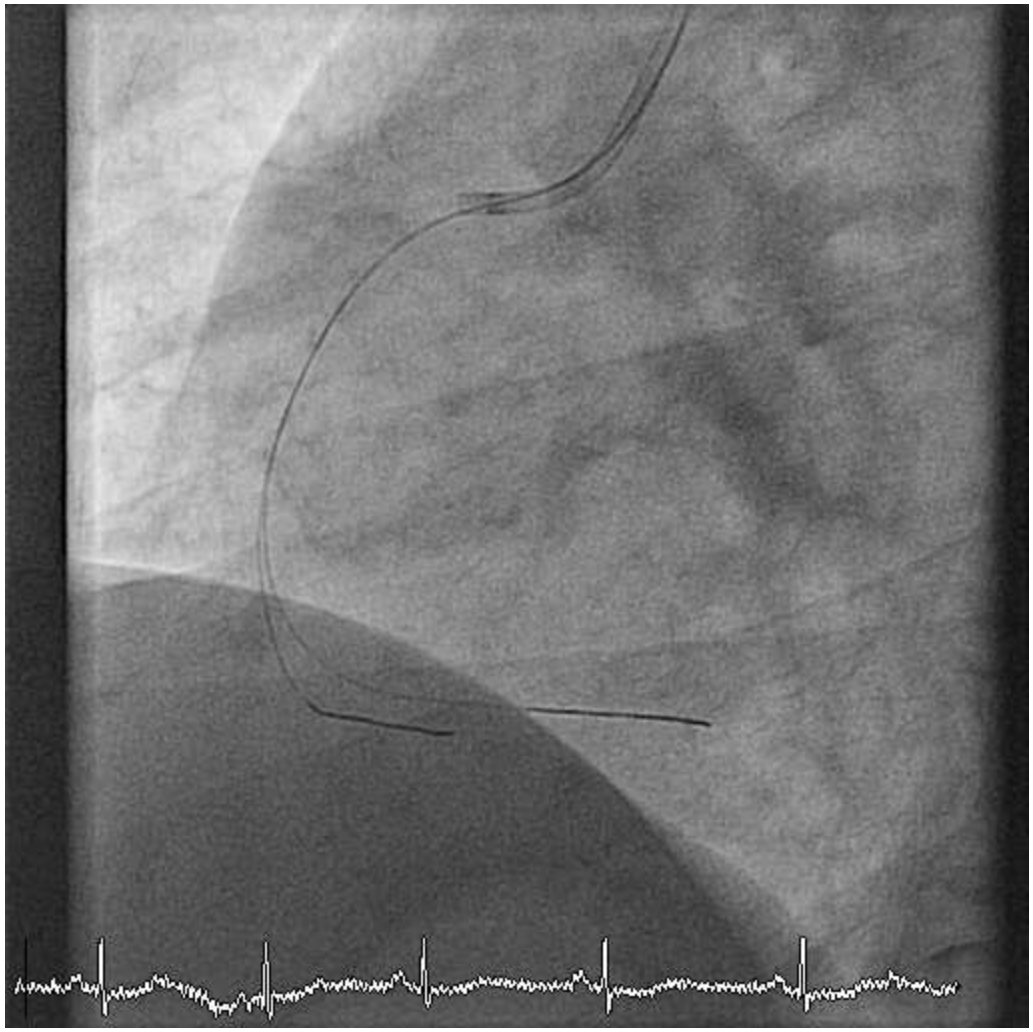
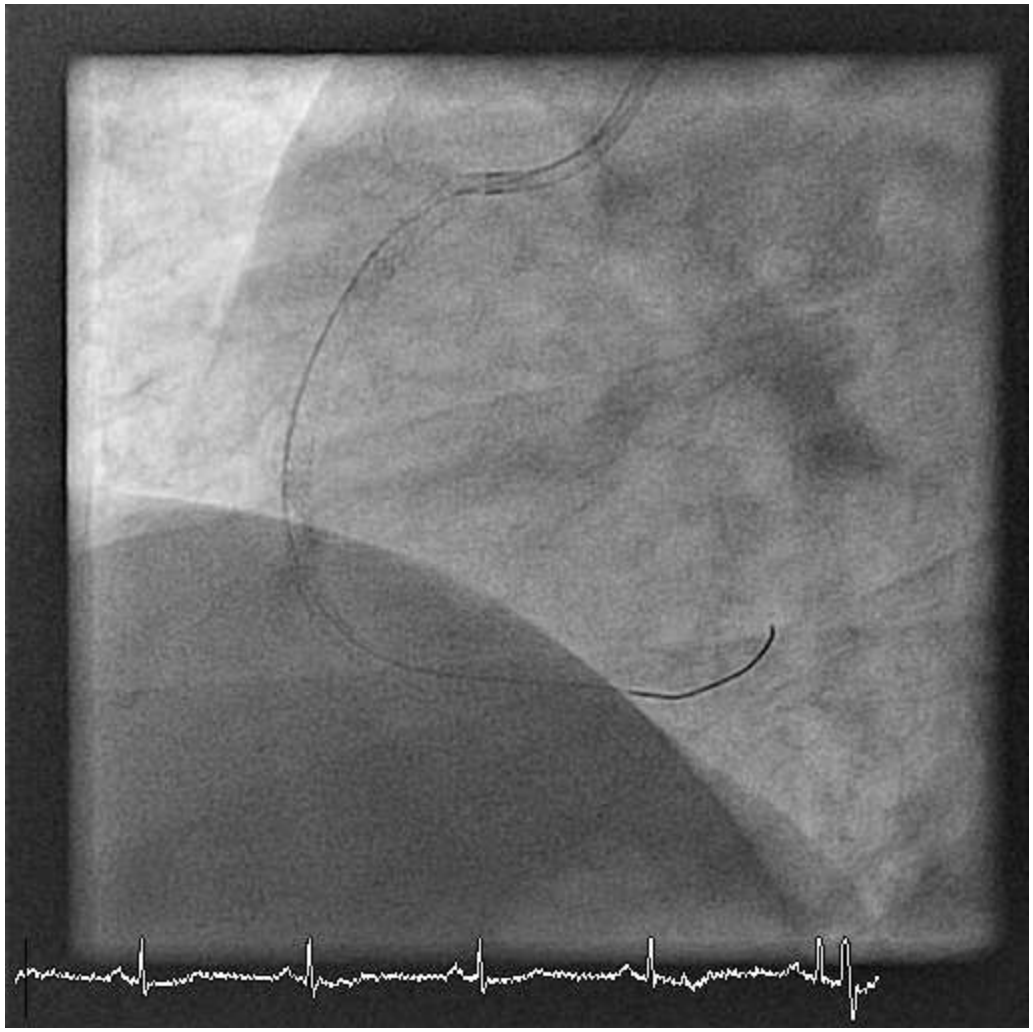
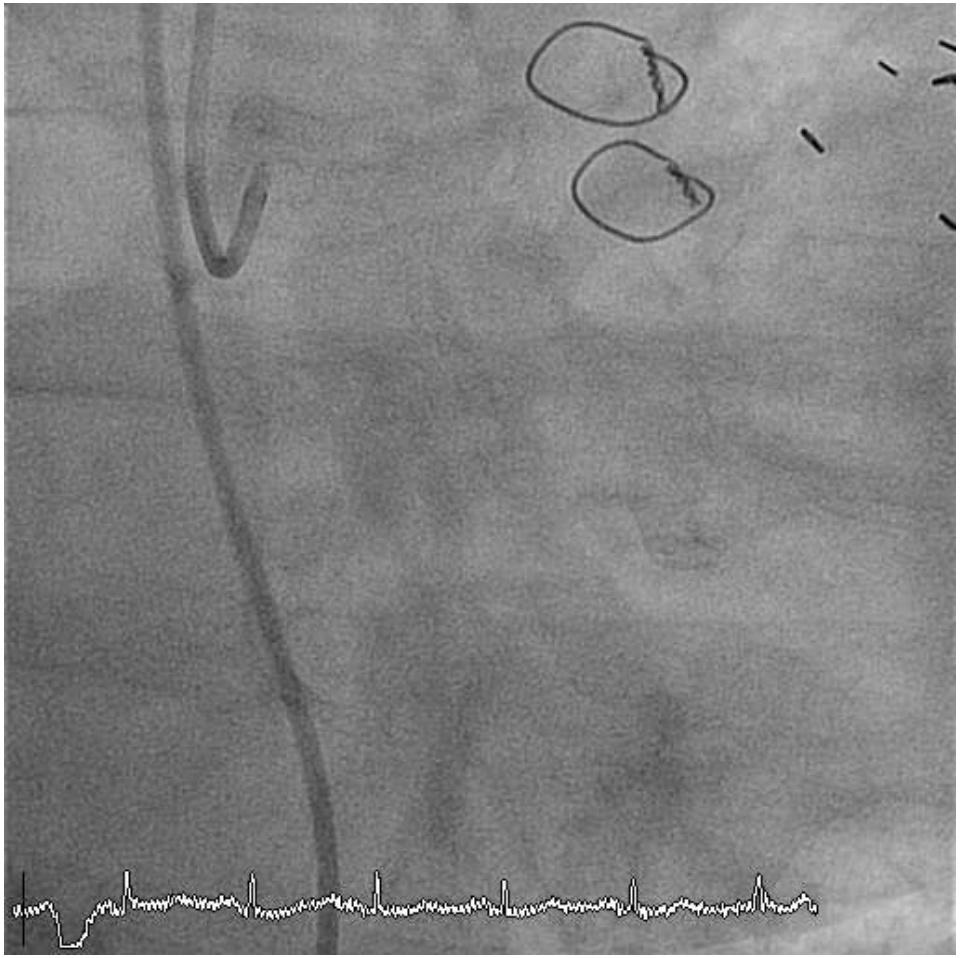
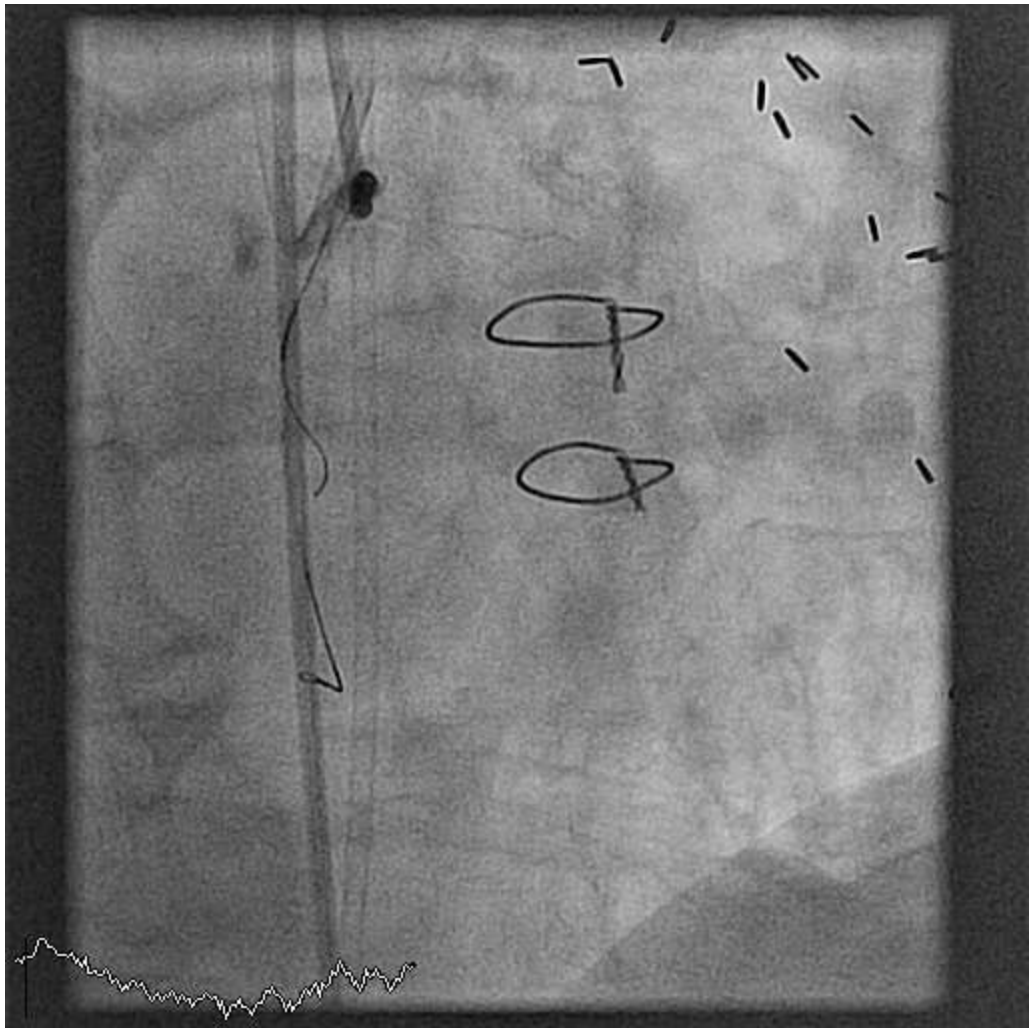
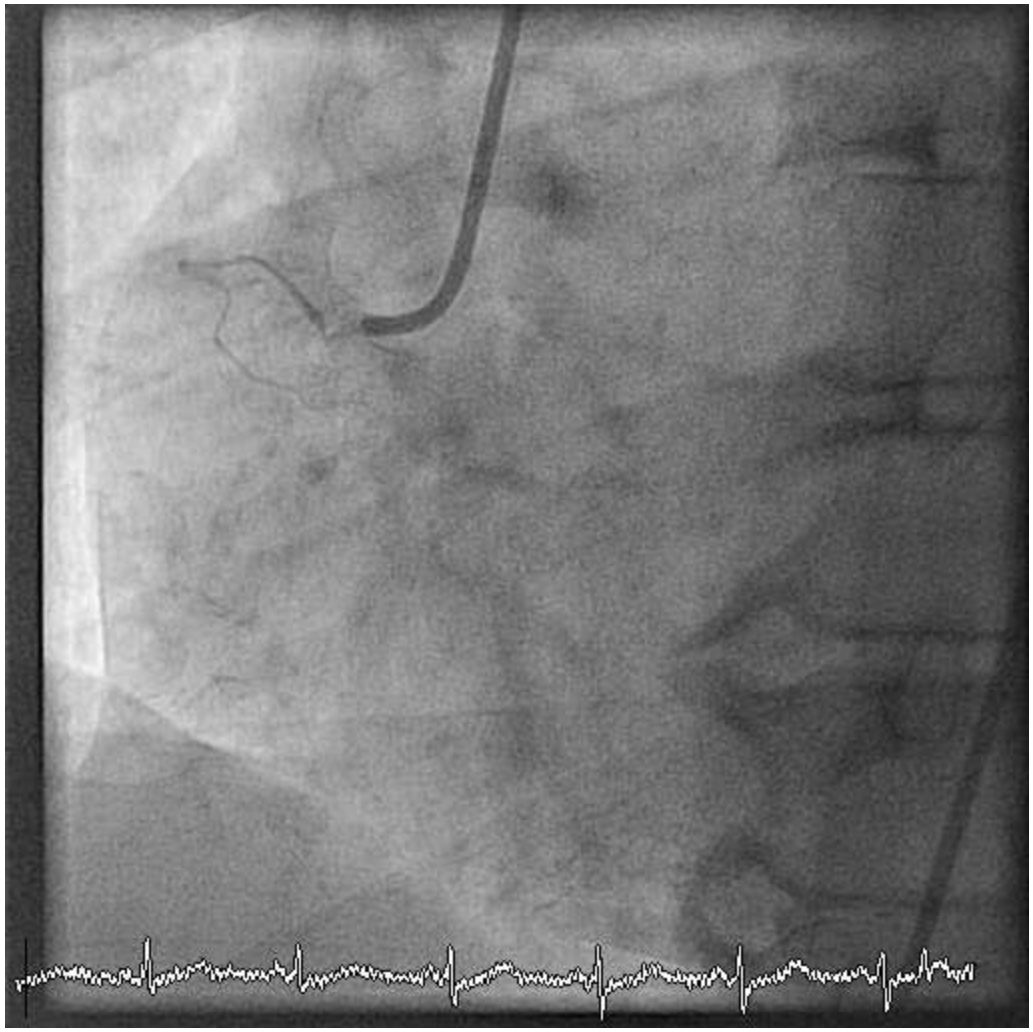
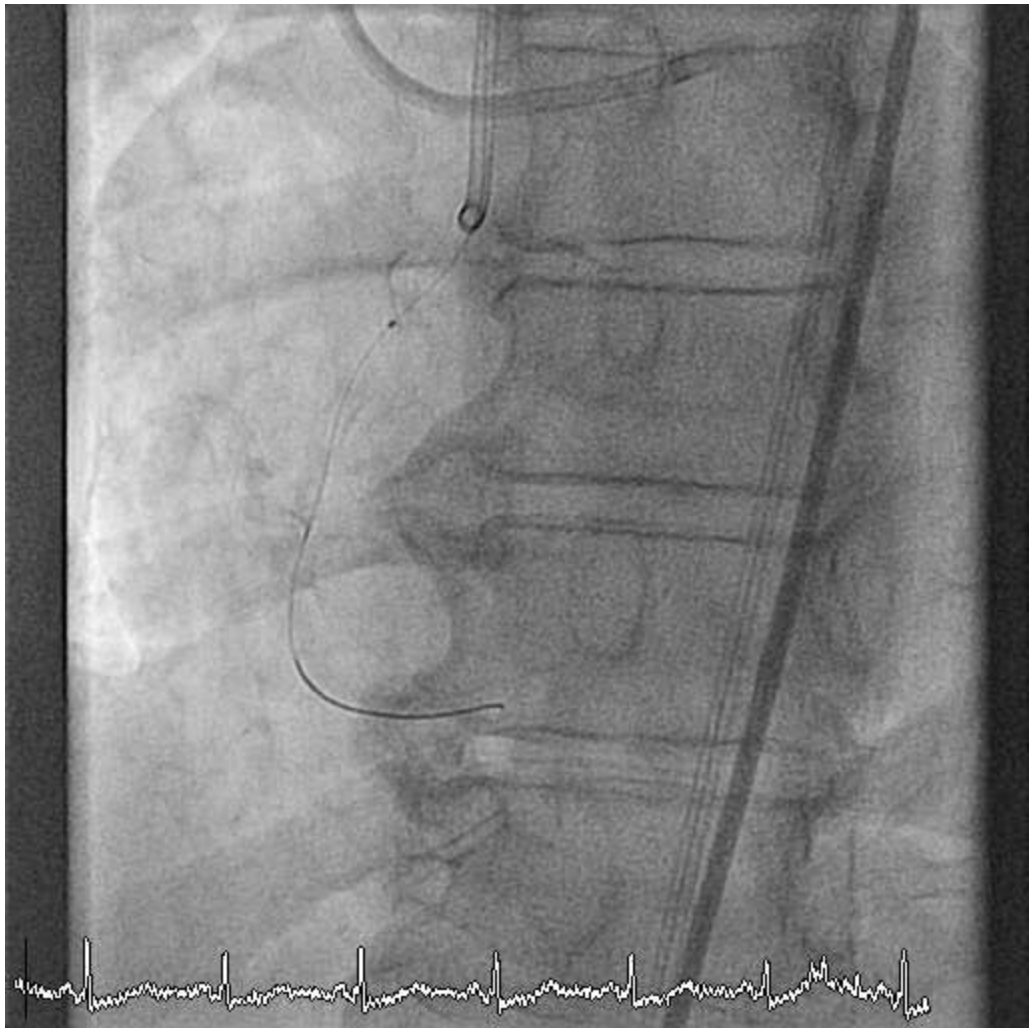
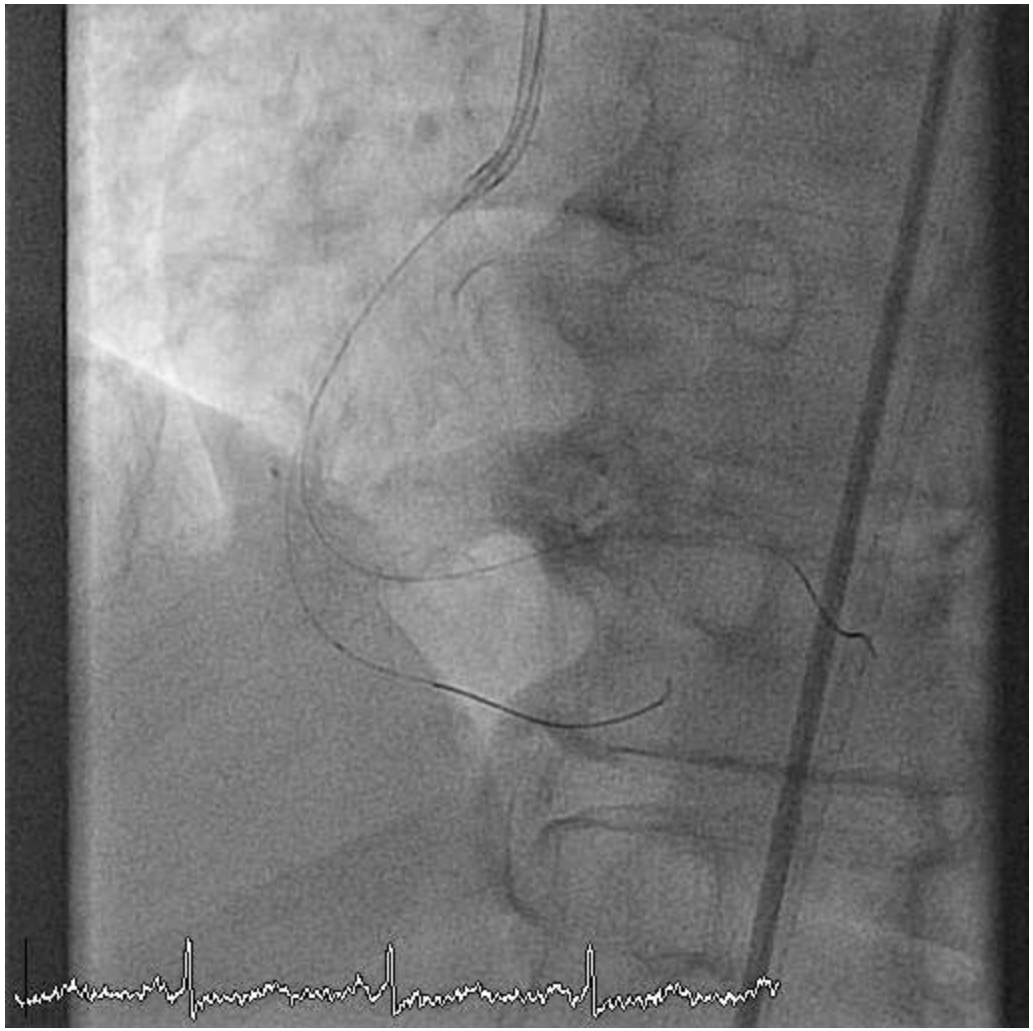
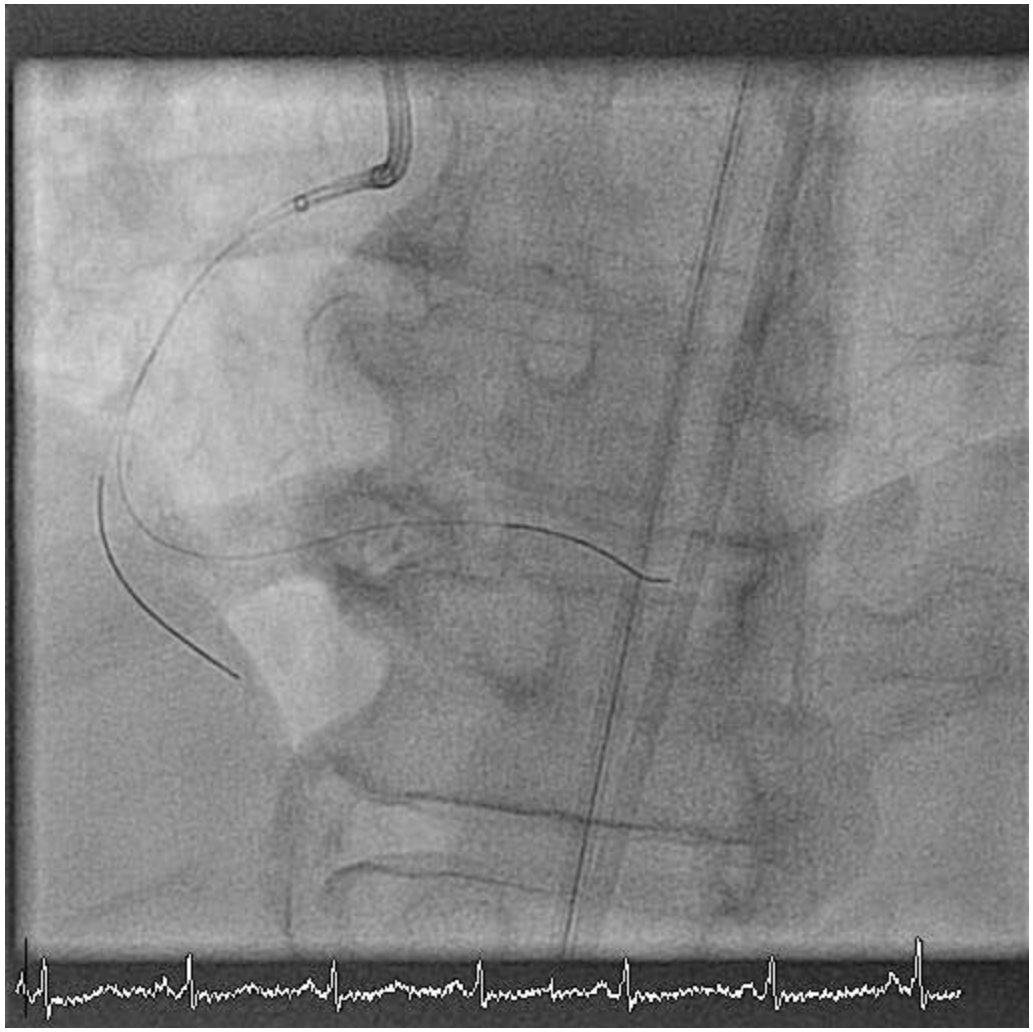
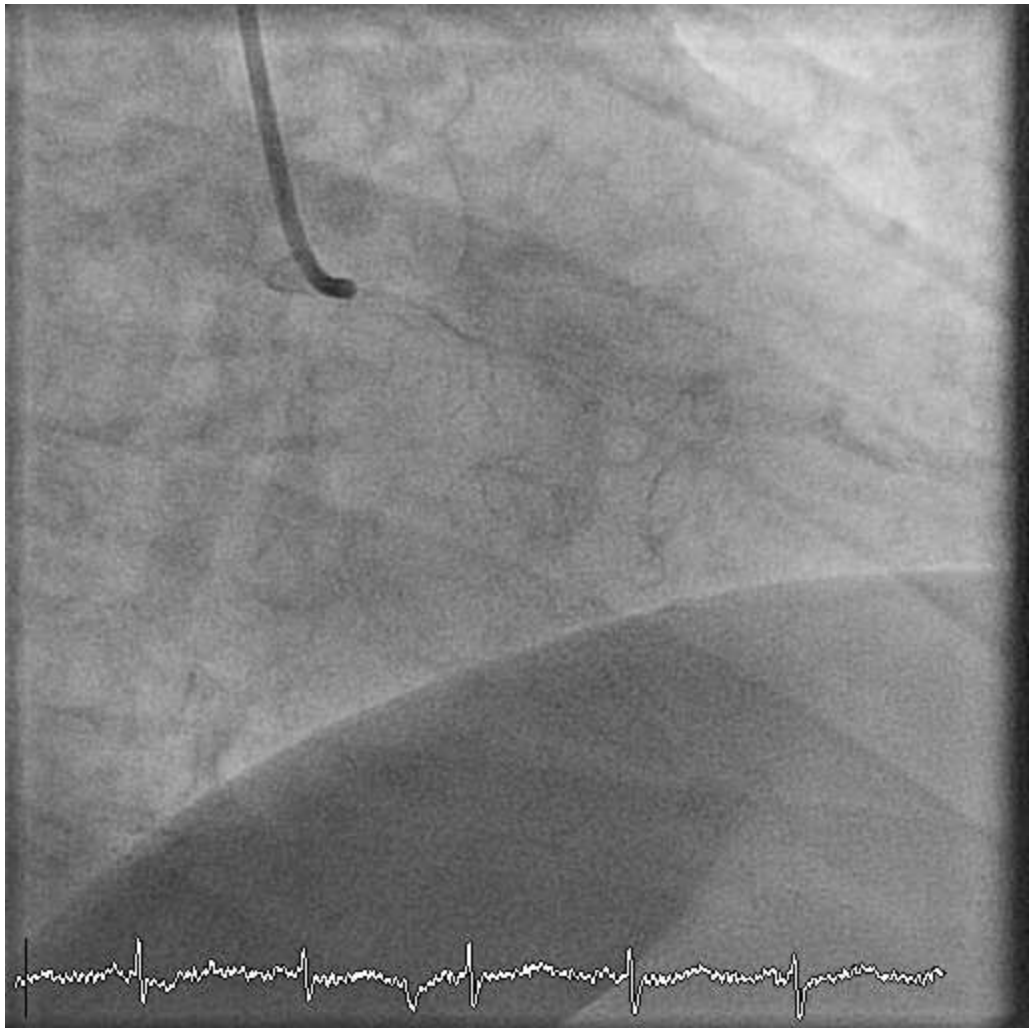
	OMT (N=137)	PCI (N=259)	P-value
Patients with any adverse event	9 (6.7)	13 (5.2)	0.52
All cause Death	0	2 (0.8)	0.55
Cardiac death	0	2 (0.8)	
Myocardial infarction	0	5 (1.9)	0.17
Non-Q-wave	0	4 (1.6)	
Q-wave	0	1 (0.4)	
Ischemia-driven revascularization	9 (6.7)	7 (2.9)	0.10
Cerebrovascular event	1 (0.7)	2 (0.8)	0.99
Stent thrombosis	0	1 (0.4)	0.99

Number of patients (%)

Significant change in SAQ subscale scores *)



Higher score, better health status

*) Spertus et al. JACC 1995;25:333-41

Changes in CCS class during follow-up