

CARDIOVASCULAR SUMMIT
TCTAP 2015

April 28-May1 , 2015 Seoul. Korea

New DES Lower DES Failure ? In-Stent Restenosis and Stent Thrombosis in New DES

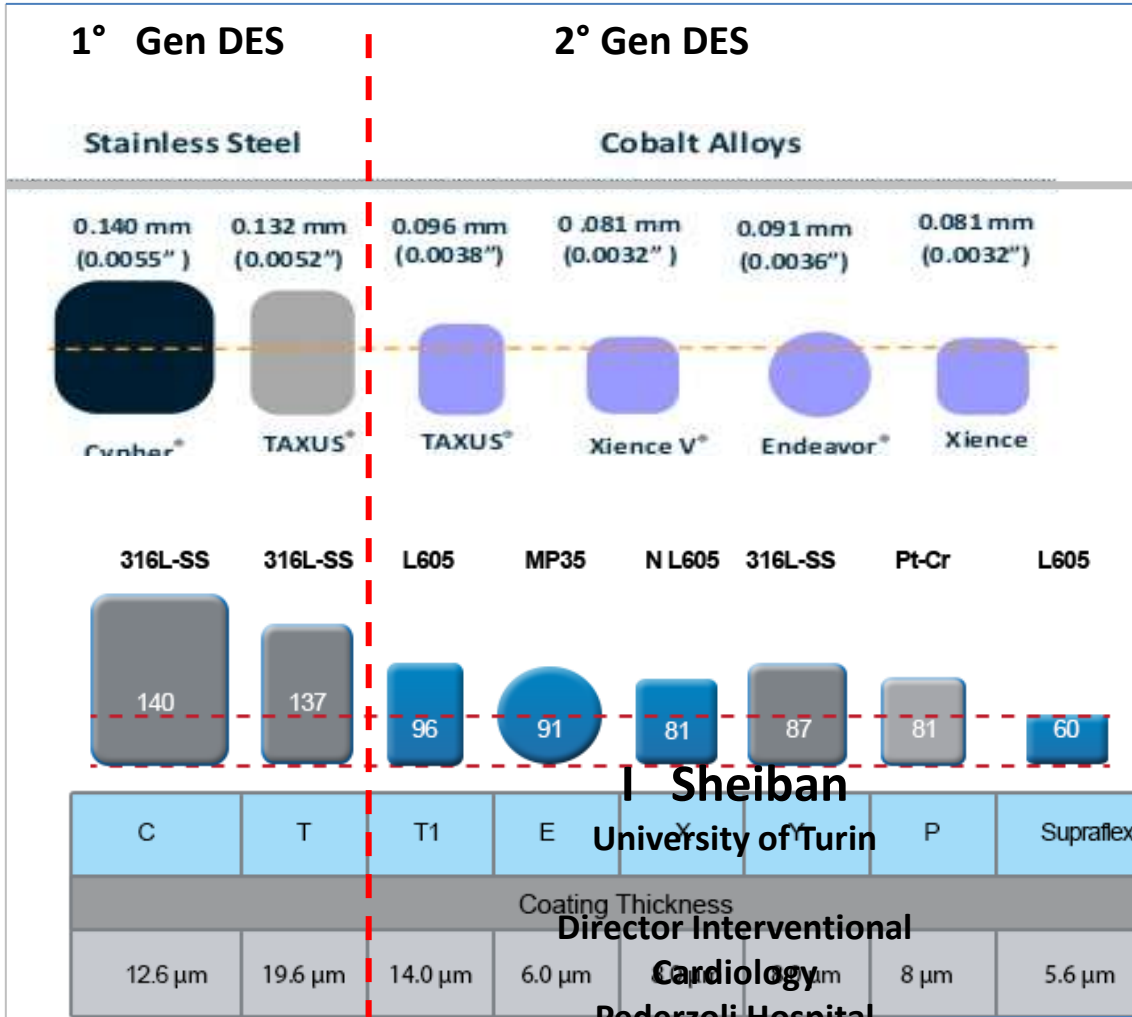
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EVOLUTION WITH METALLIC DRUG-ELUTING STENTS



Anti-proliferative Drugs

- Everolimus
- Biolimus
- Zanolimus
- Tacrolimus
-

Polymer Material

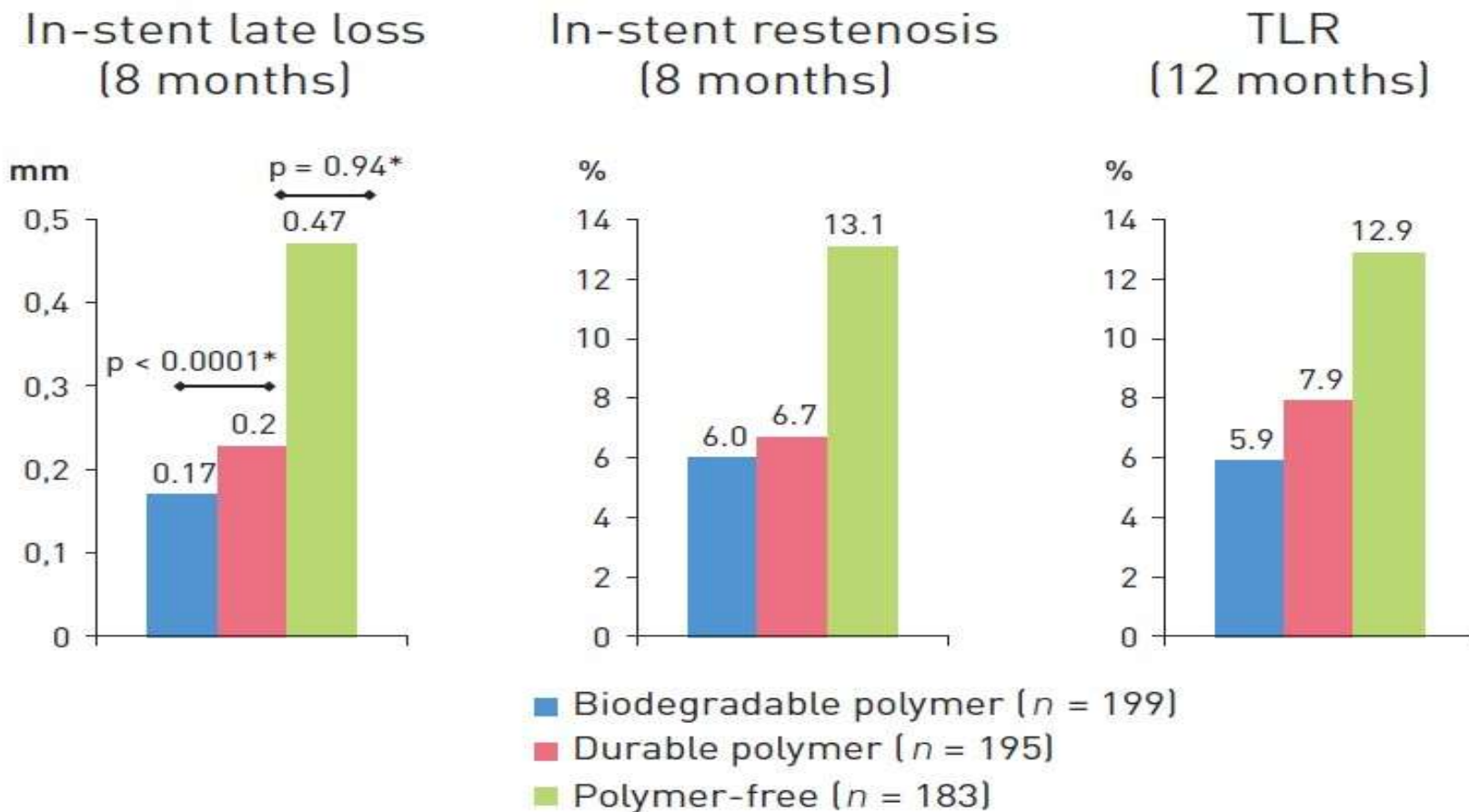
- Durable
- Biodegradable

Platform material & strut thickness

- Co-Cr
- Pt-Cr

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Different types of polymer



The PCR-EAPCI Textbook – Percutaneous interventional cardiovascular medicine

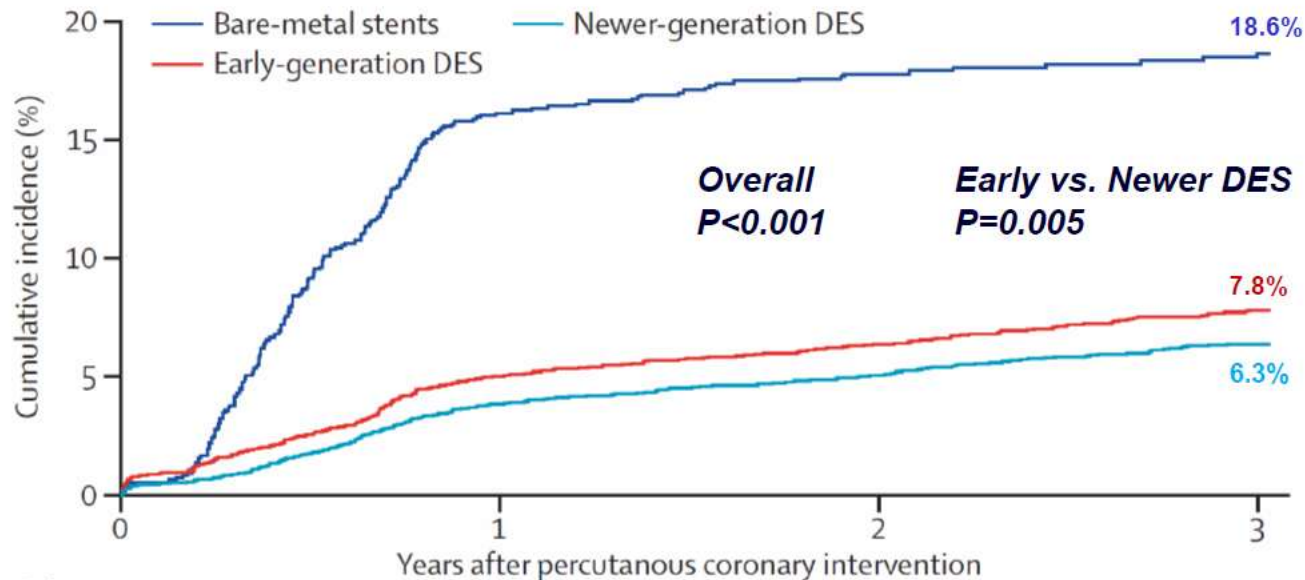
Coronary artery stents

Scot Garg, Ernest Spitzer, Patrick W. Serruys, Stephan Windecker

SAFETY AND EFFICACY OF DES vs BMS IN RANDOMIZED TRIALS

11,557 Women enrolled into 26 Randomized Trials between 2000 and 2013

Target Lesion Revascularization

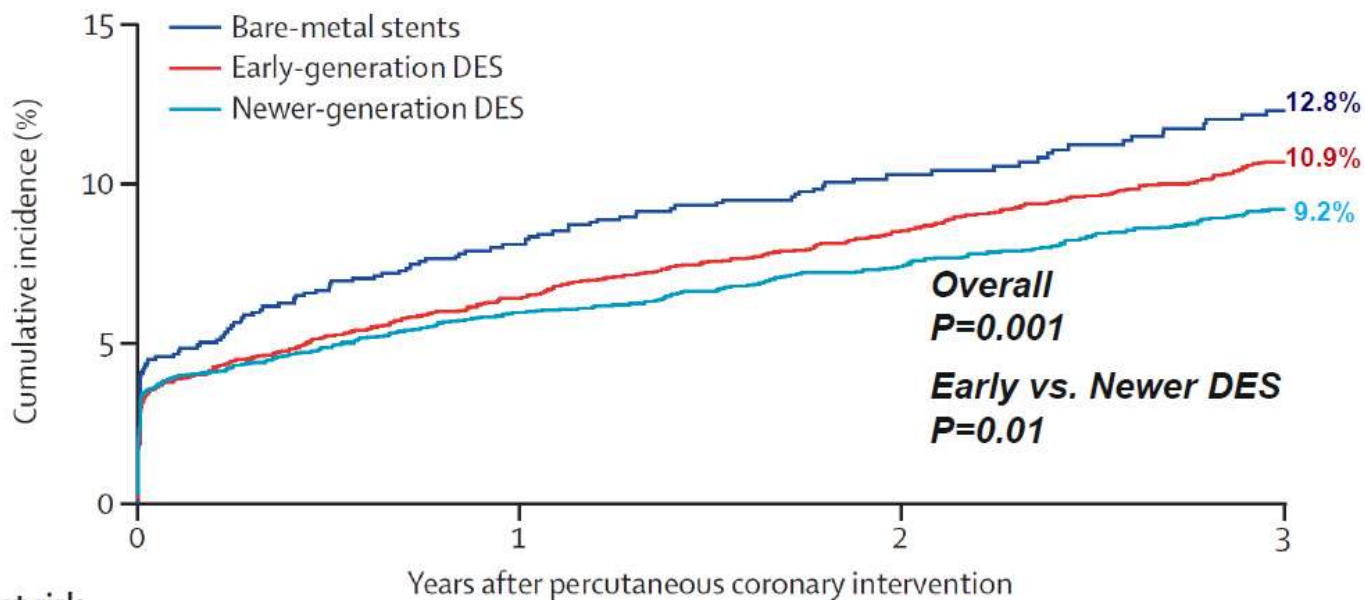


Number at risk				
	0	1	2	3
Bare-metal stents	1108	898	710	457
Early-generation DES	4171	3764	3113	1955
Newer-generation DES	6278	5217	3307	1951

SAFETY AND EFFICACY OF DES vs BMS IN RANDOMIZED TRIALS

11,557 Women enrolled into 26 Randomized Trials between 2000 and 2013

Death or Myocardial Infarction



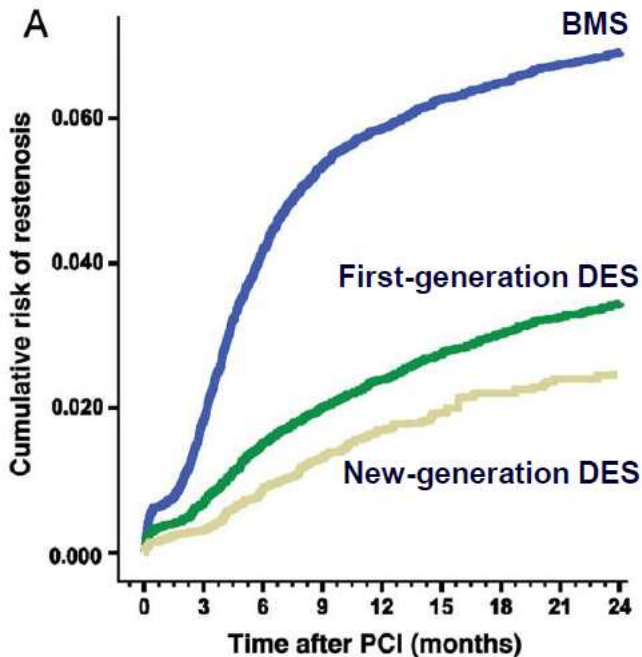
Number at risk		Years after percutaneous coronary intervention			
	0	1	2	3	
Bare-metal stents	1108	998	822	544	
Early-generation DES	4171	3788	3191	2019	
Newer-generation DES	6278	5210	3379	2008	

SAFETY AND EFFICACY OF DES VS BMS THE SCAAR REGISTRY

BMS (n =64,631), early-generation DES (n =19,202), new-generation DES (n =10,551)

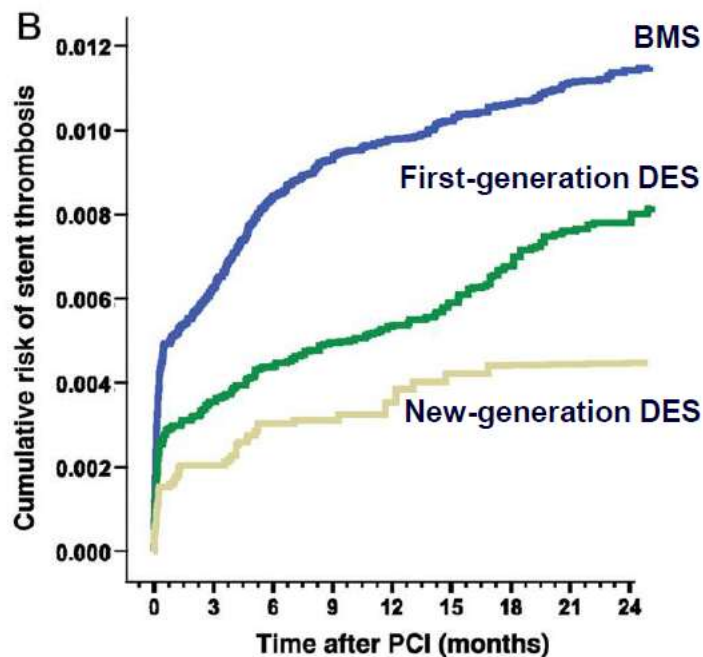
Clinically driven restenosis

New- vs. early-generation DES: HR[95% CI] =0.62 [0.53-0.72]
 New-generation DES vs. BMS: HR[95% CI] =0.29 [0.25-0.33]

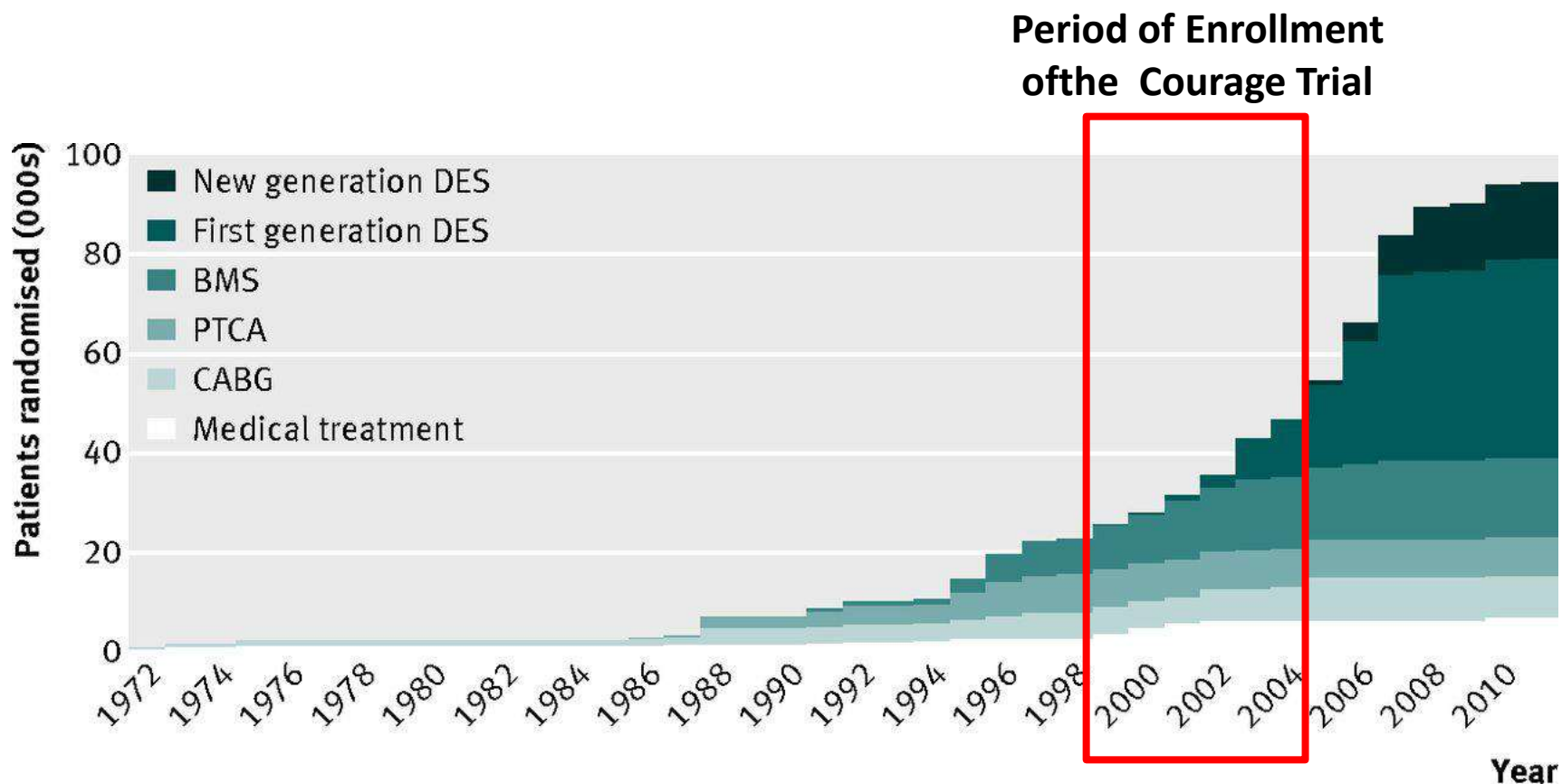


Definite stent thrombosis

New- vs. early-generation DES: HR[95% CI] =0.57 [0.41-0.79]
 New-generation DES vs. BMS: HR[95% CI] =0.38 [0.28-0.52]

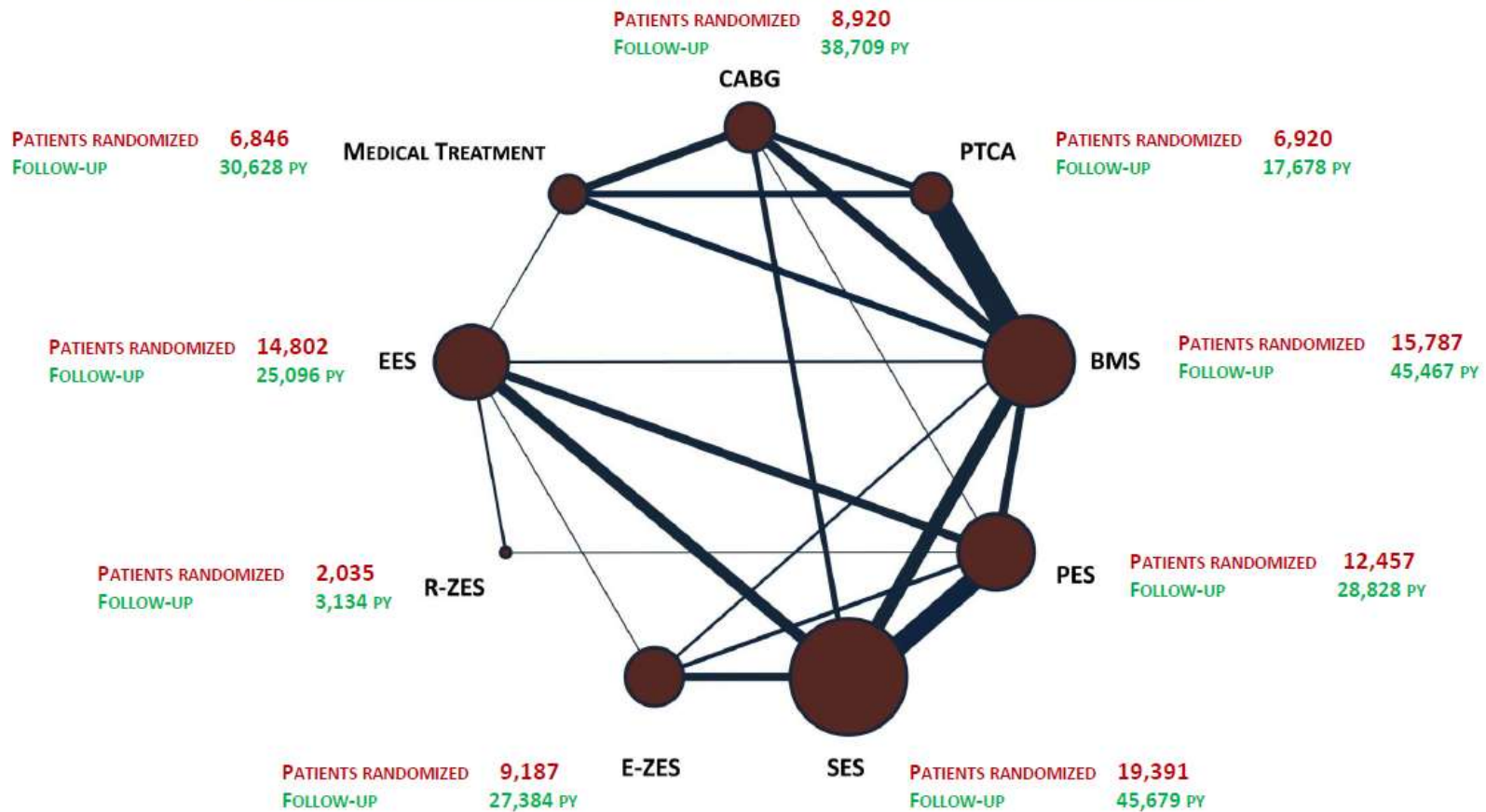


ACCUMULATION OF DATA FROM RANDOMIZED TRIALS USING DIFFERENT PCI TECHNOLOGIES OVER TIME



REVASCULARIZATION VERSUS MEDICAL THERAPY IN STABLE CAD: A NETWORK META-ANALYSIS

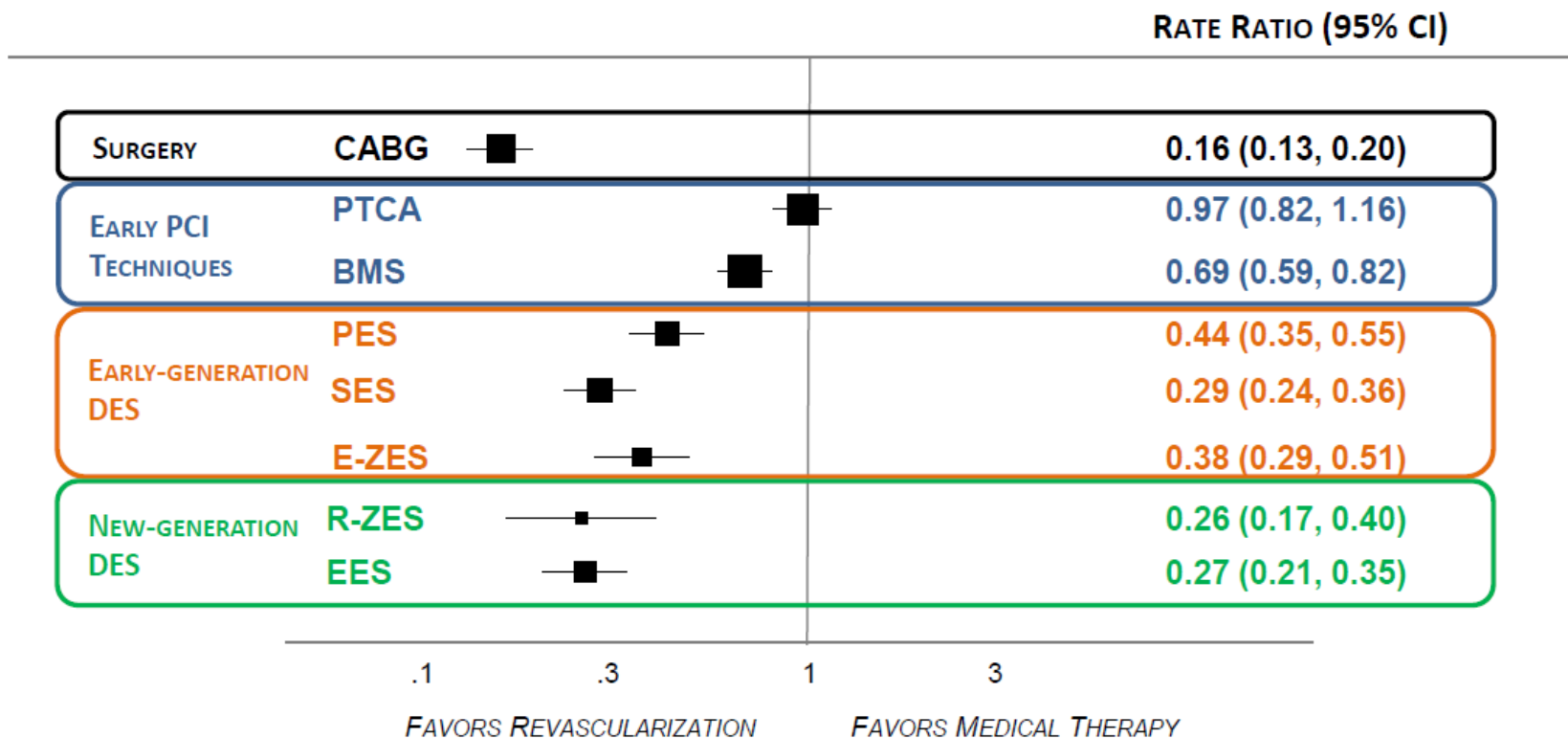
**100 RCTs - 93'553 PATIENTS RANDOMIZED
 FOLLOW-UP OF 262'090 PATIENT-YEARS**



REVASCULARIZATION vs MEDICAL THERAPY IN STABLE CAD: A NETWORK META-ANALYSIS

PRIMARY ENDPOINT : ALL-CAUSE MORTALITY

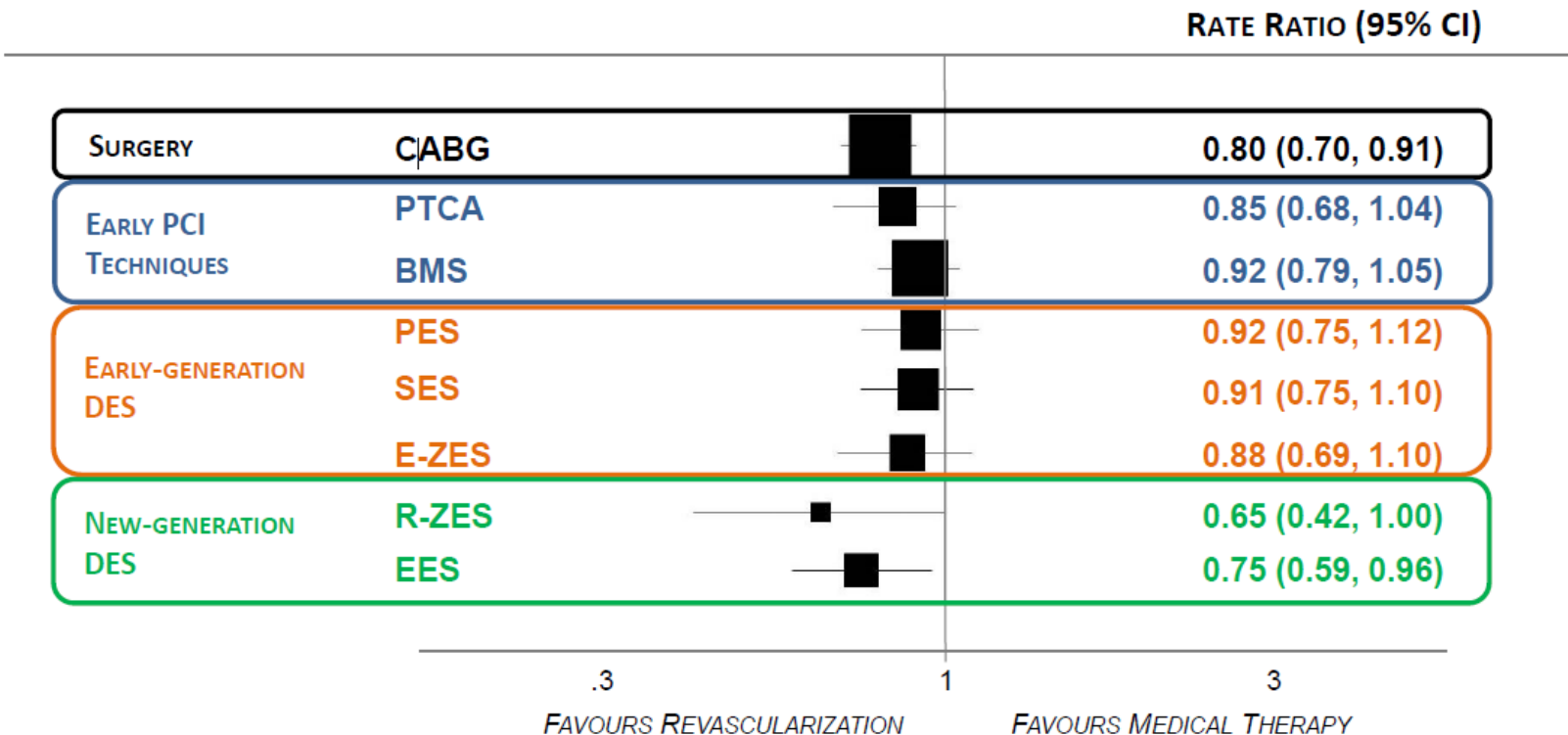
90'282 RANDOMIZED PATIENTS, 234'693 PATIENT-YEARS OF FOLLOW-UP 11'619 EVENTS FOR THE ANALYSIS



REVASCULARIZATION vs MEDICAL THERAPY IN STABLE CAD: A NETWORK META-ANALYSIS

SSECONDARY ENDPOINT : REPEAT REVASCULARIZATION

100 RCTs, 93'553 RANDOMIZED PATIENTS, 262'090 PATIENT-YEARS OF FOLLOW-UP, 5'346 EVENTS FOR THE ANALYSIS



Impact of technological developments in drug-eluting stents on patient-focused outcomes: a pooled direct and indirect comparison of randomised trials comparing first- and second-generation drug-eluting stents

H. Colmenarez et al ; EuroIntervention 2013

Total of trials included n=16

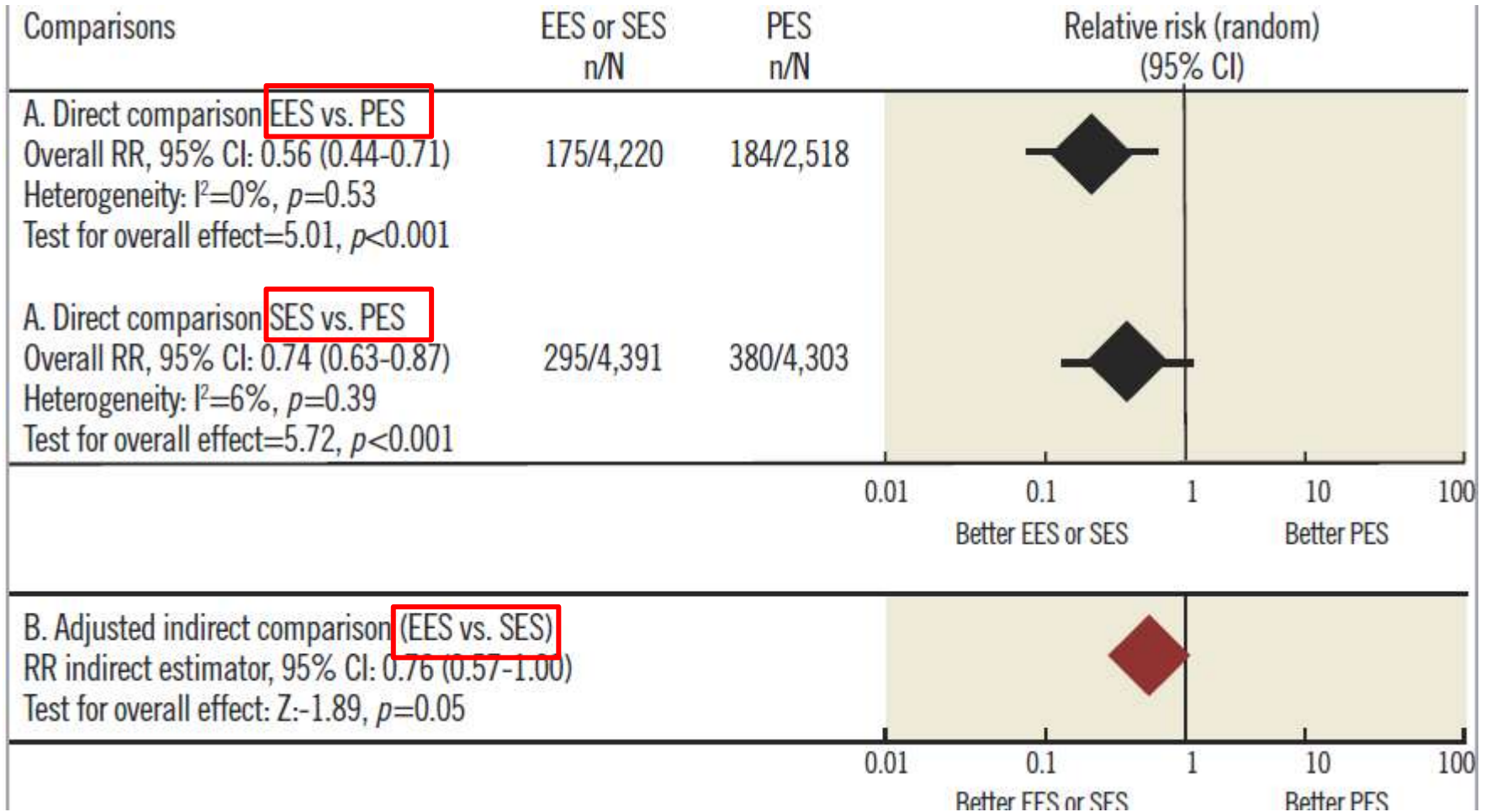
Pts Included n = 25,427

RCTs comparing PES vs. EES, ZES or BES

RCTs comparing PES or SES vs. ZES

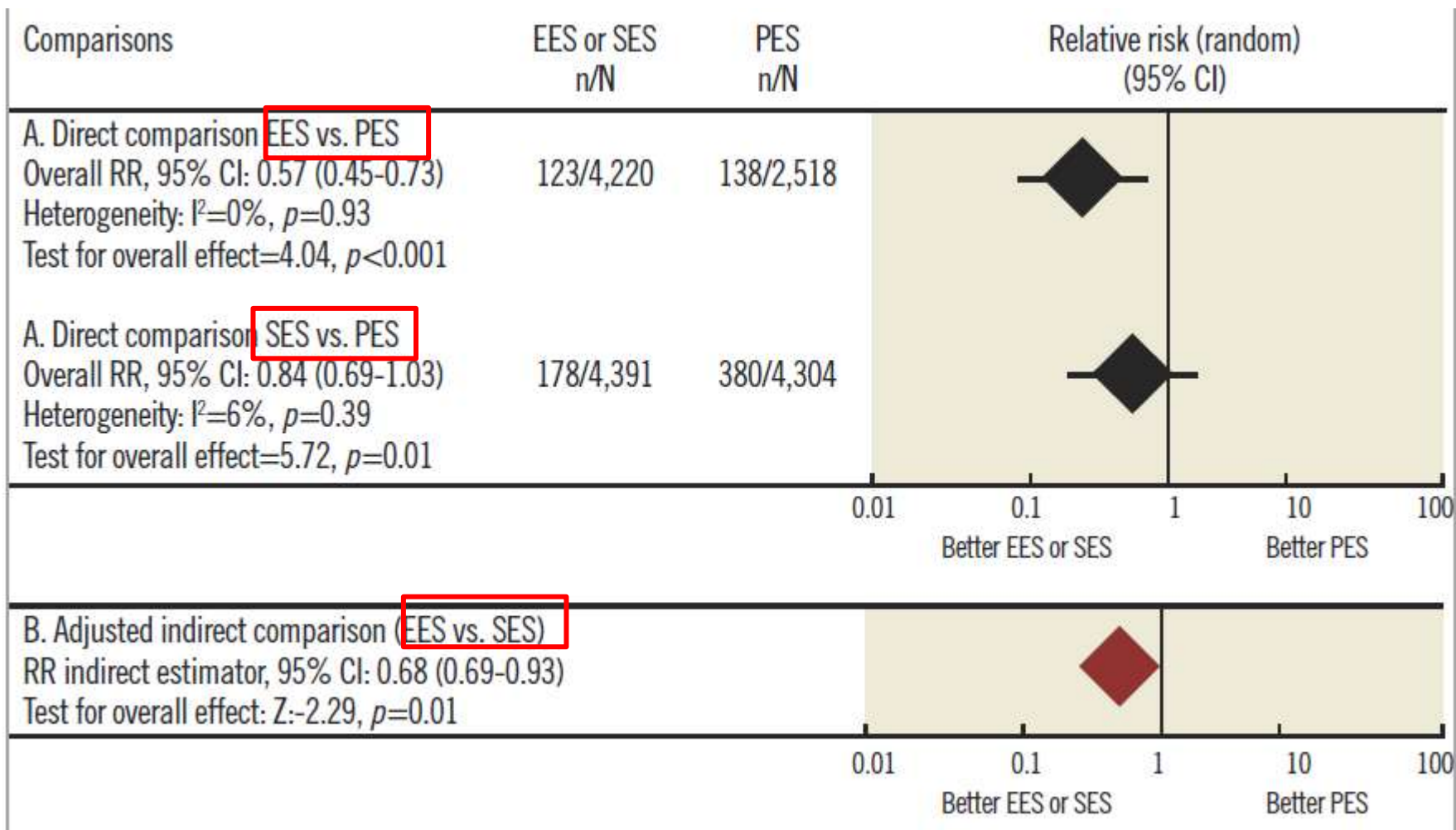
RCTs comparing SES vs. ZES, EES or BES

Target Lesion Revascularization



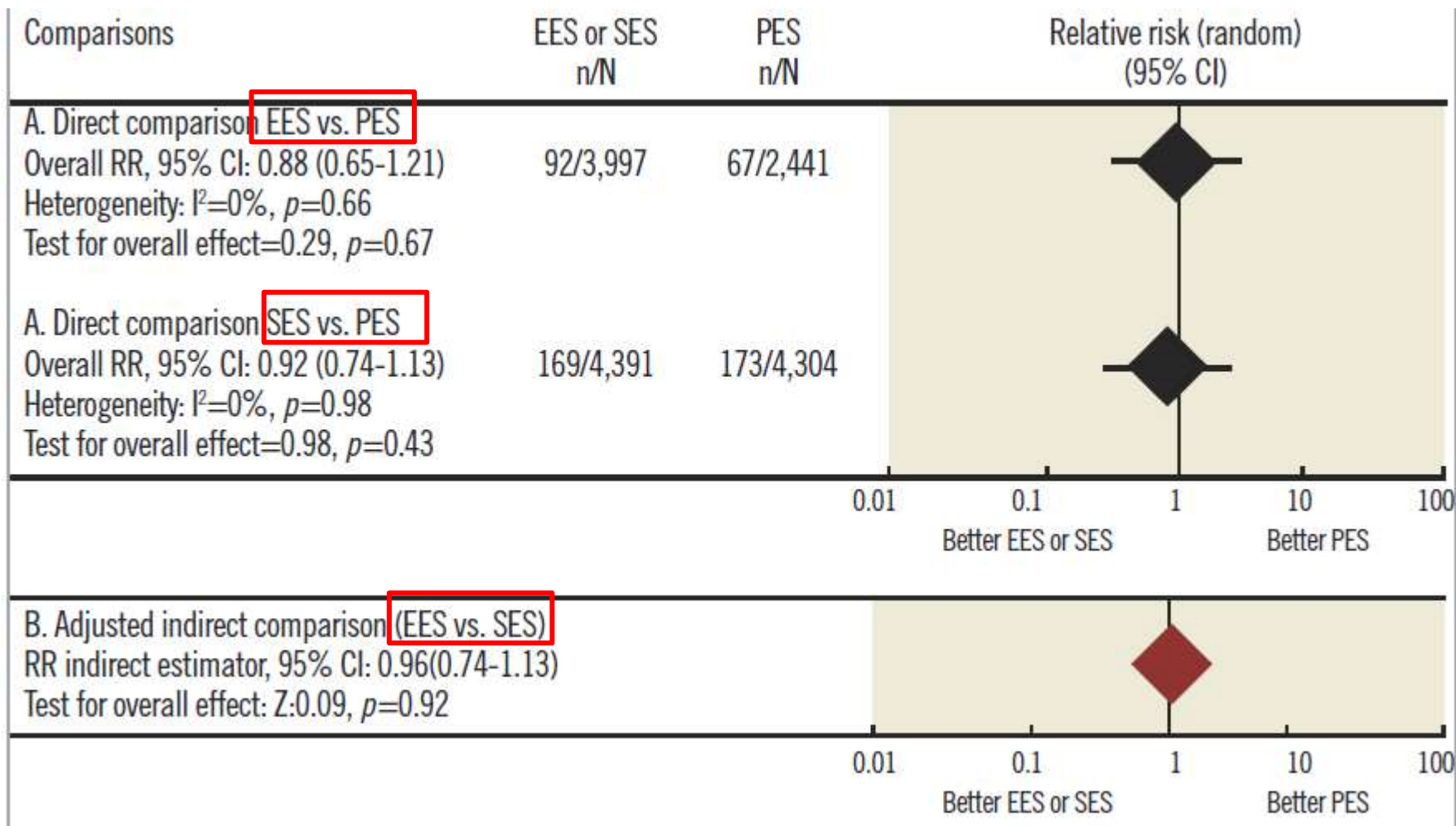
H. Colmenarez et al ; EuroIntervention 2013

Myocardial Infarction



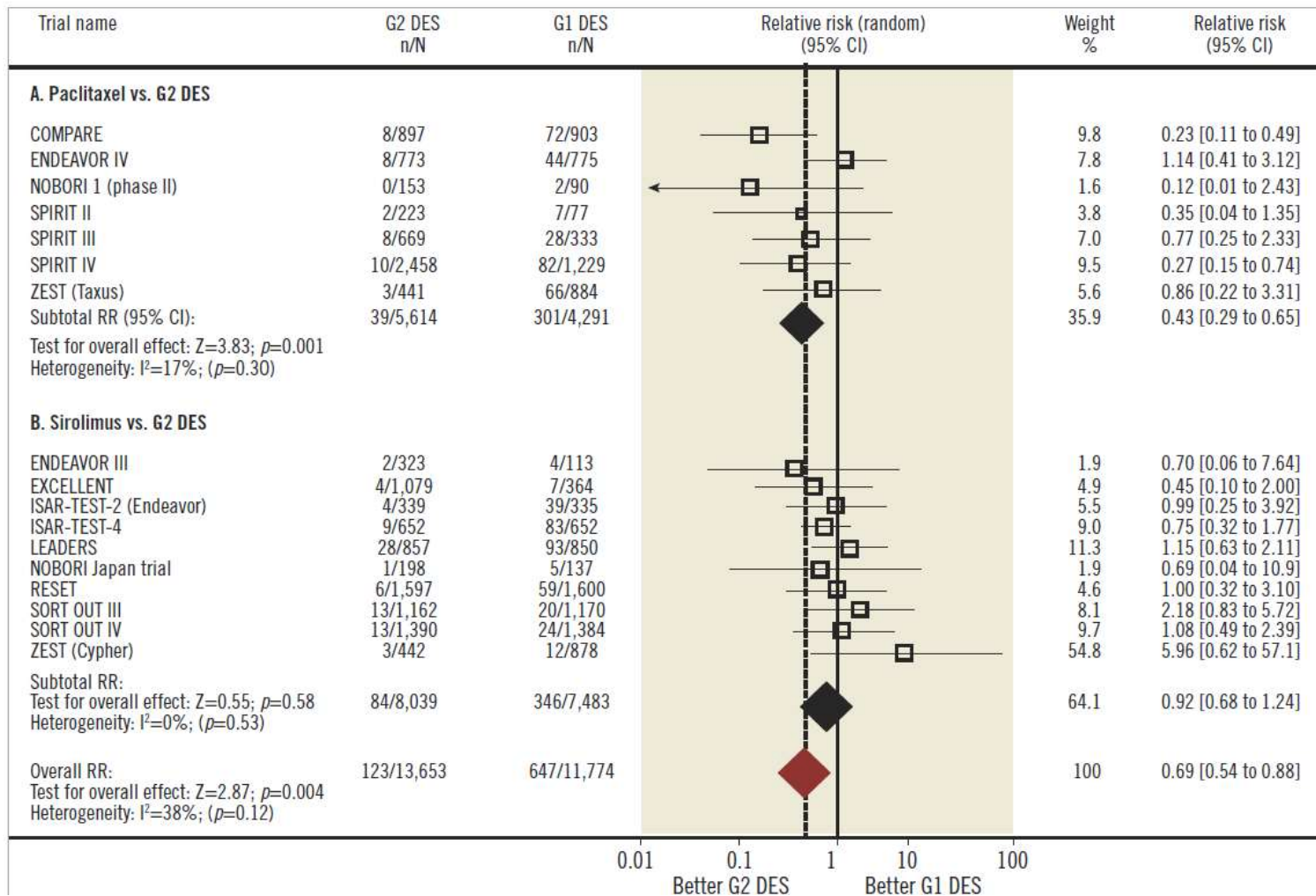
H. Colmenarez et al ; EuroIntervention 2013

Death



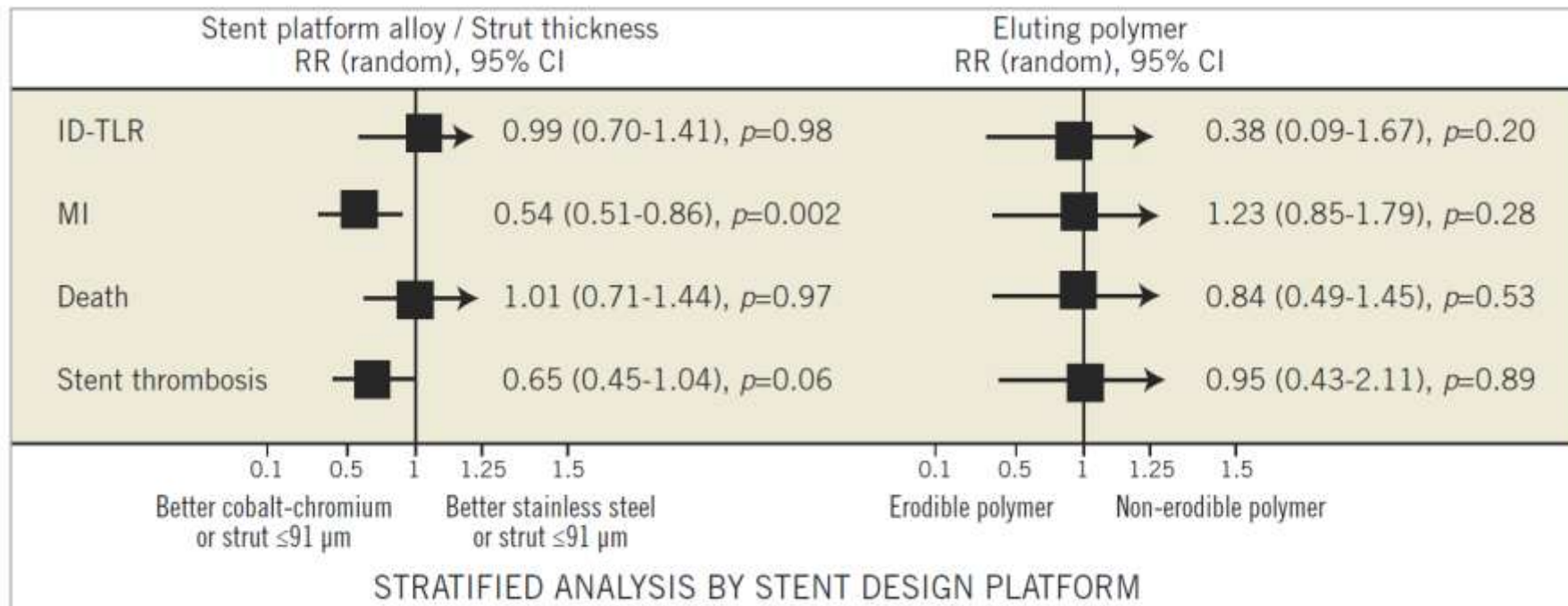
H. Colmenarez et al ; EuroIntervention 2013

Stent Thrombosis

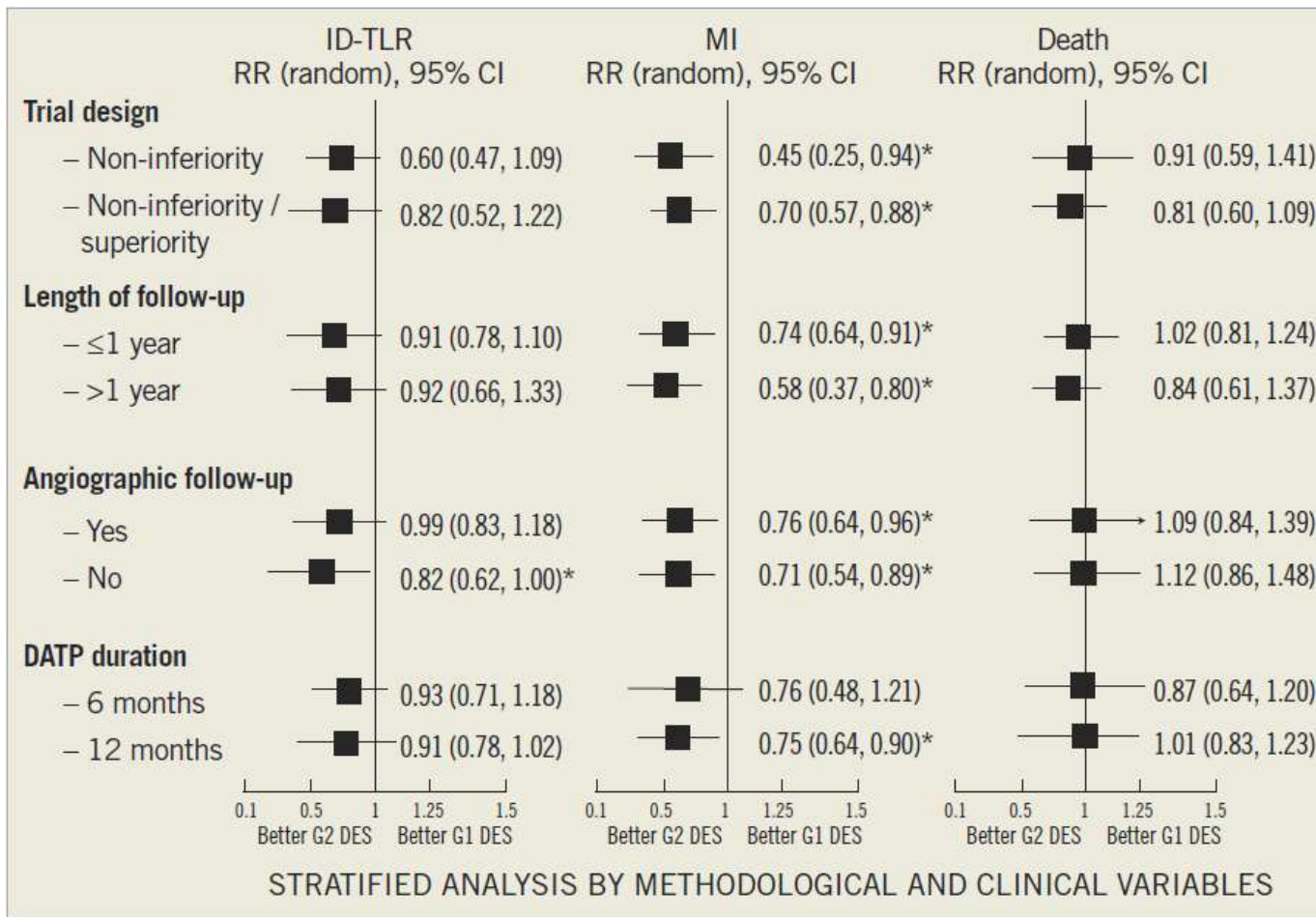


H. Colmenarez et al ; EuroInternation 2013

Stent Design / Strut thickness and Outcome



Methodological and Clinical Variable vs Outcome



Research

 Open access

Safety and efficacy outcomes of first and second generation durable polymer drug eluting stents and biodegradable polymer biolimus eluting stents in clinical practice: comprehensive network meta-analysis

BMJ 2013 ; 347 doi: <http://dx.doi.org/10.1136/bmj.f6530> (Published 06 November 2013)

Cite this as: *BMJ* 2013;347:f6530

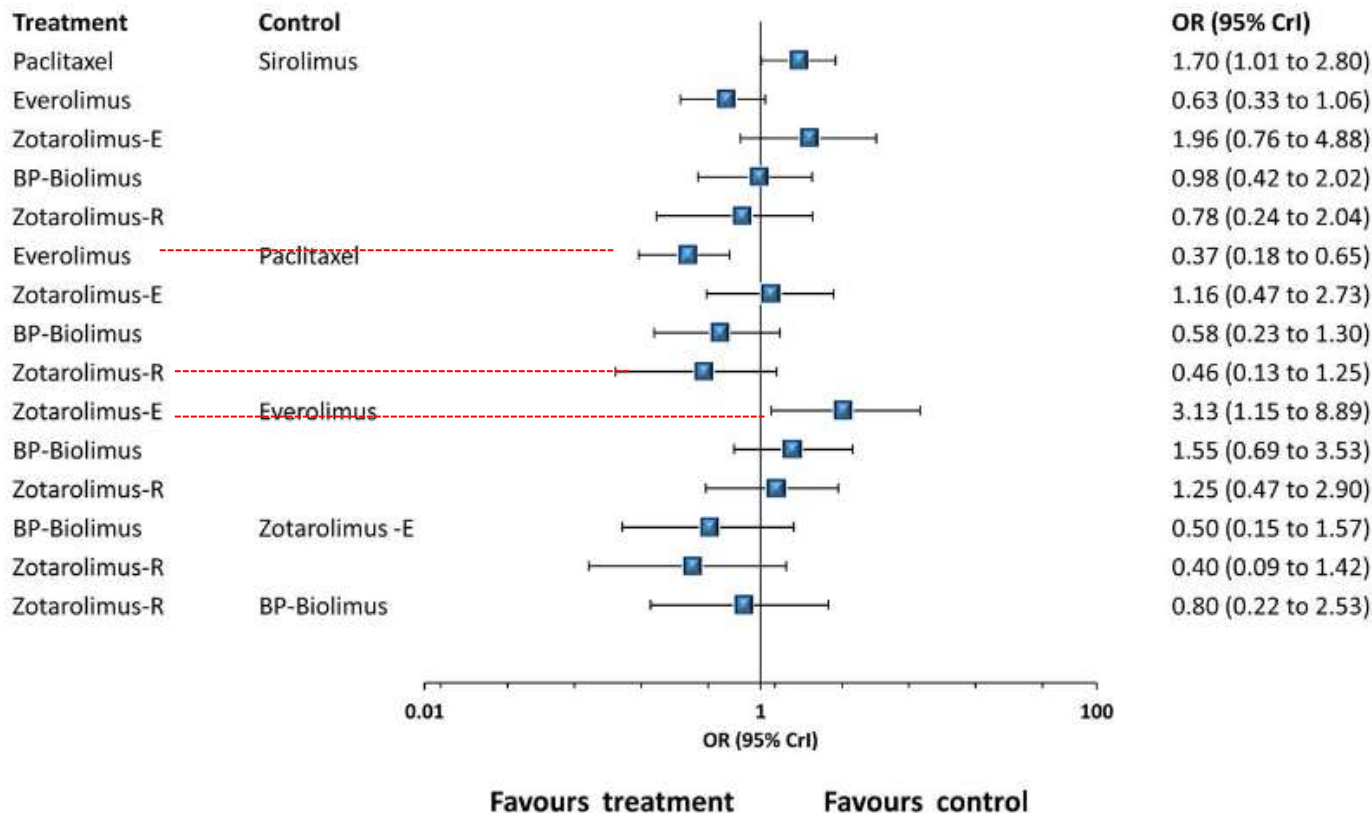
EP Navarese et al , *BMJ* 2013 ;347:1-17

60 RCT

Including 63 242 patients

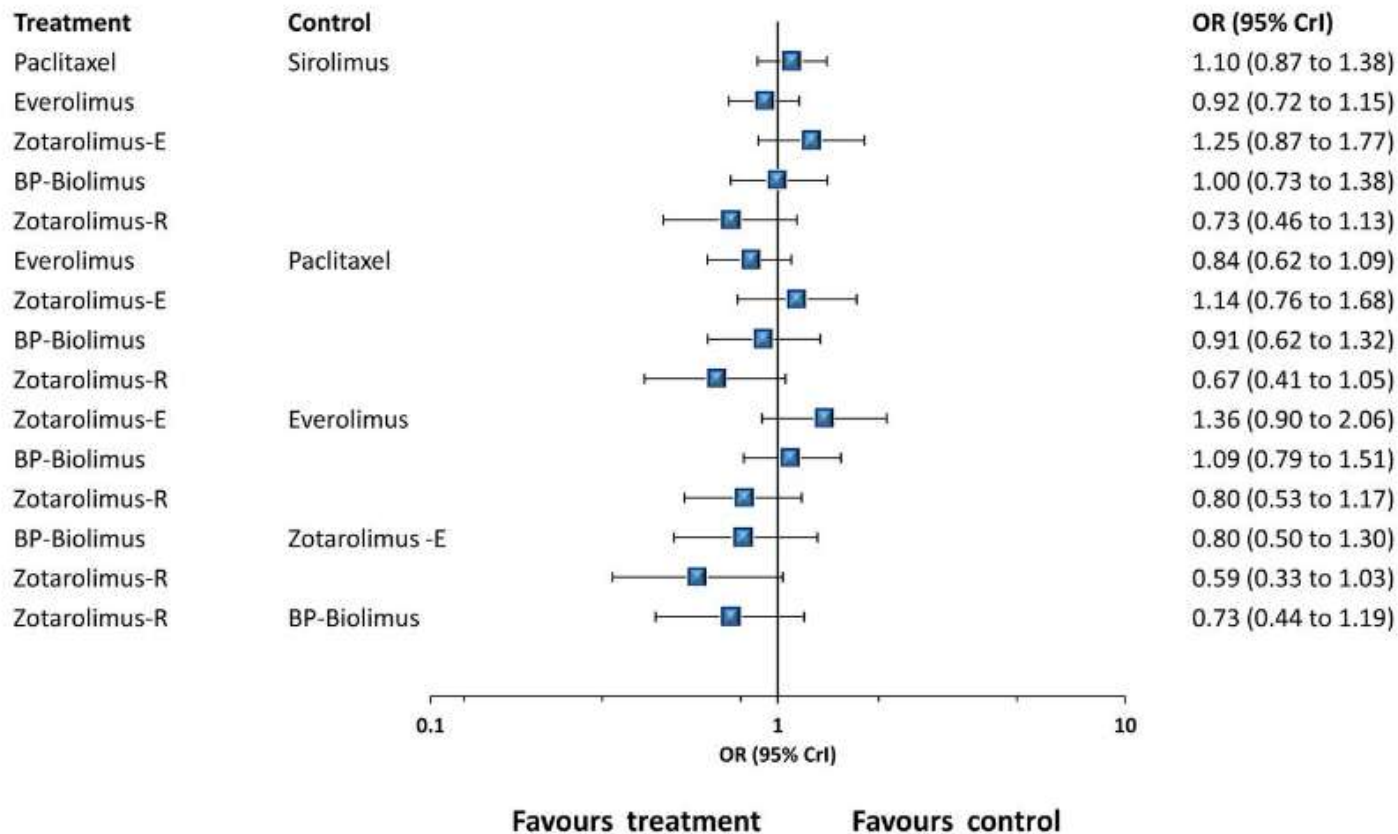
Safety and efficacy outcomes of first and second generation durable polymer drug eluting stents and biodegradable polymer biolimus eluting stent in clinical practice : comprehensive network meta-analysis

Stent Thrombosis



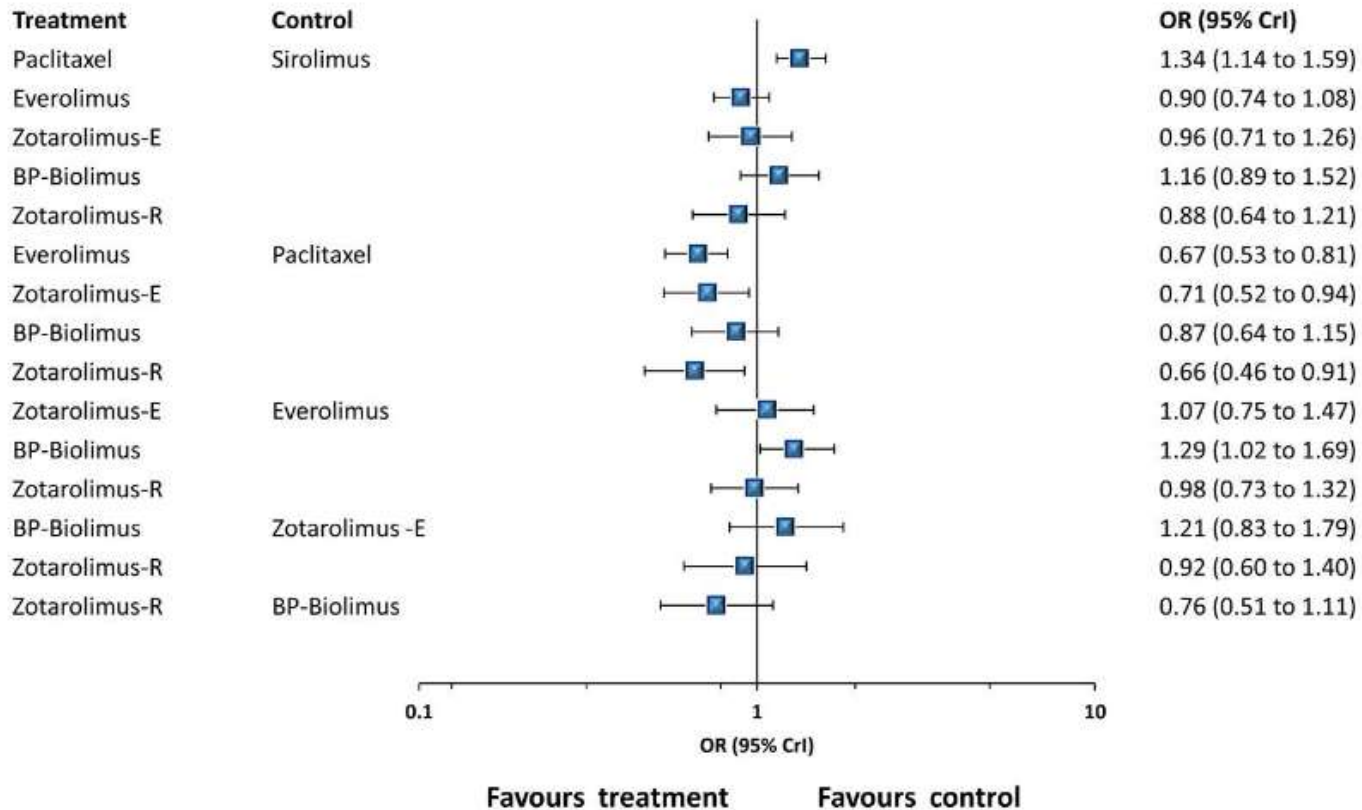
Safety and efficacy outcomes of first and second generation durable polymer drug eluting stents and biodegradable polymer biolimus eluting stent in clinical practice : comprehensive network meta-analysis

Mortality



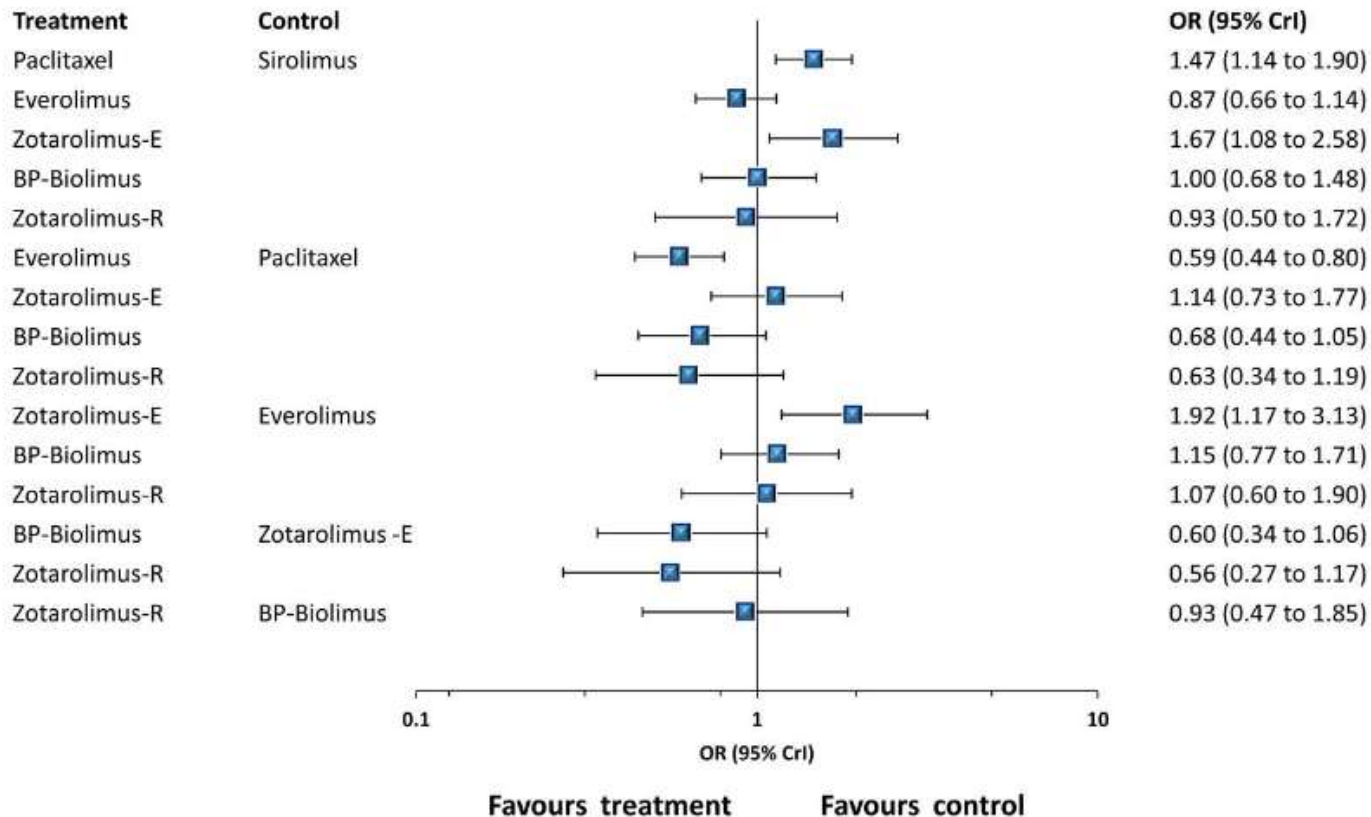
Safety and efficacy outcomes of first and second generation durable polymer drug eluting stents and biodegradable polymer biolimus eluting stent in clinical practice : comprehensive network meta-analysis

Myocardial Infarction



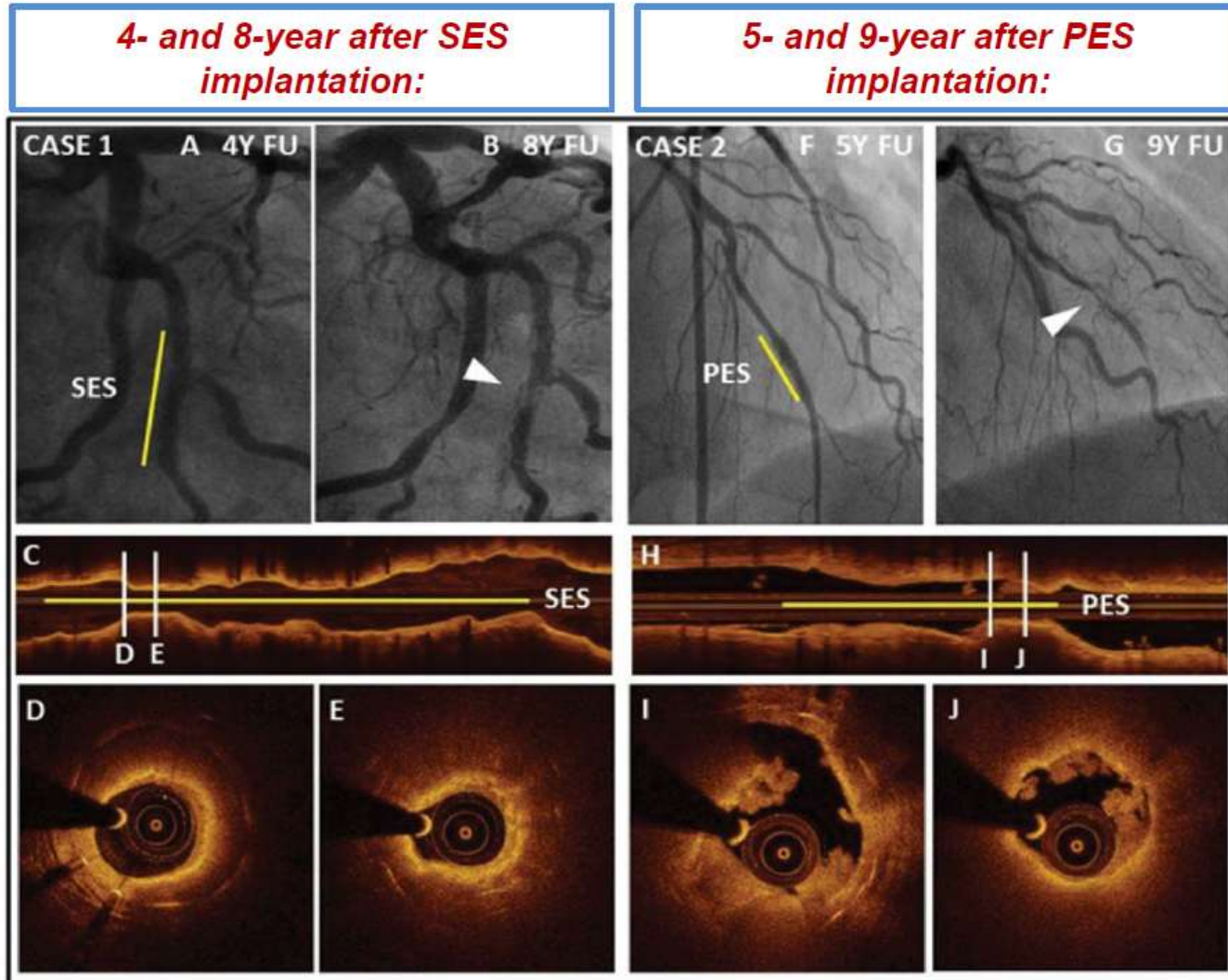
Safety and efficacy outcomes of first and second generation durable polymer drug eluting stents and biodegradable polymer biolimus eluting stent in clinical practice : comprehensive network meta-analysis

TLR



Still some challenge :

VERY LATE STENT FAILURE

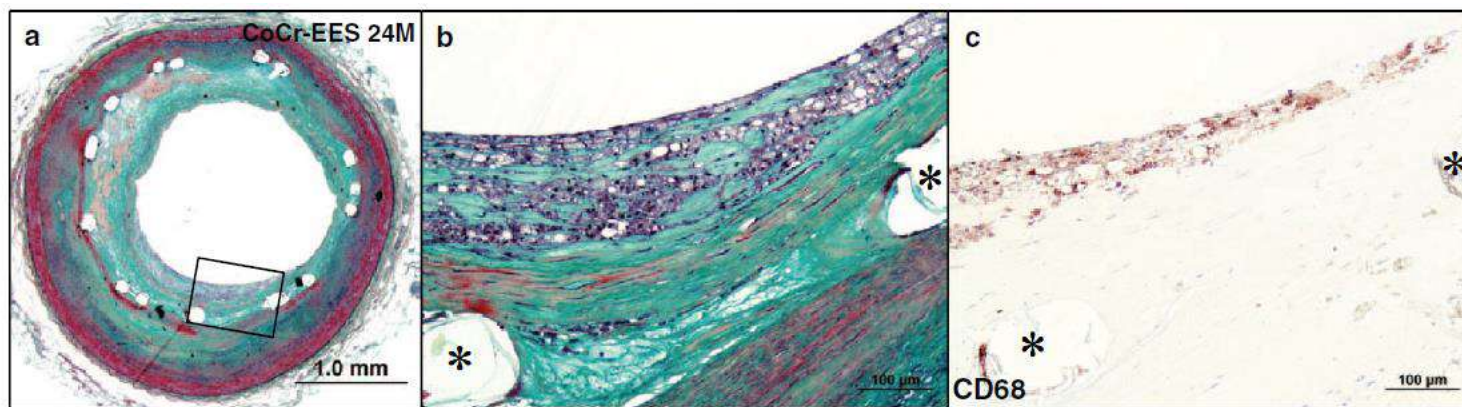


PATHOLOGY OF EES vs SES vs PES

Otsuka F. et al. *Circulation* 2014

EES showed

- Fewer uncovered struts
- Lower inflammation score and less fibrin deposition
- Similar frequency of neoatherosclerosis

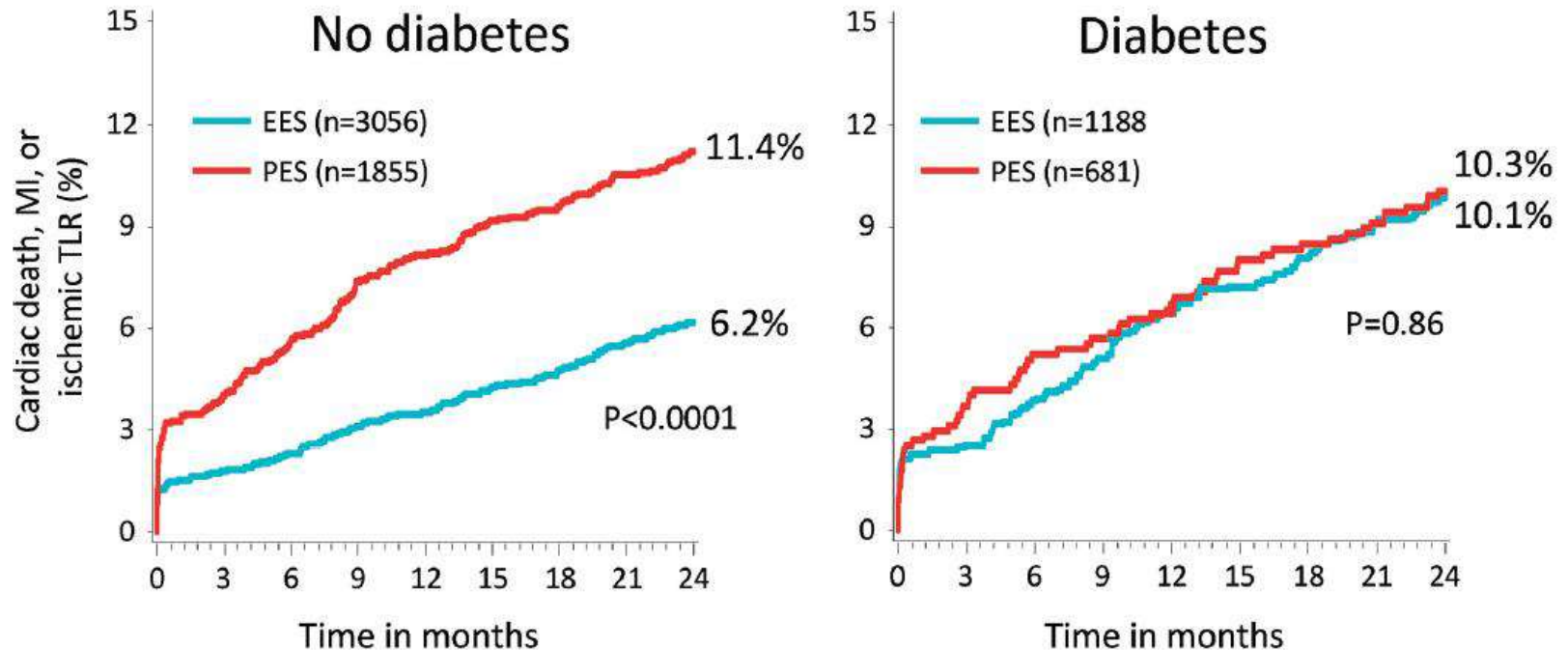


Everolimus-Versus Paclitaxel-Eluting Stents Among Diabetic and Non diabetic Patients

IPD of SPIRIT II, III, IV, and COMPARE Trials (N=6,789)

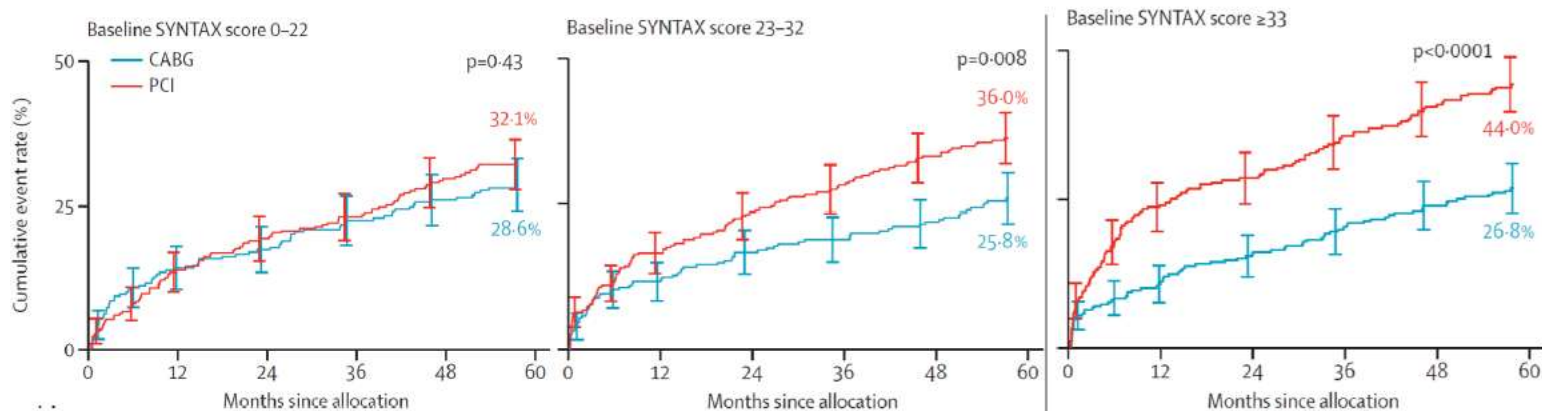
MACE at 2 years

P-inter= 0.0009



Stone G et al. *Circulation* 2011; 124:893-900

MACCE TO 5 YEARS BY SYNTAX SCORE



	Death	MI		Death	MI		Death	MI
PCI	8.9	7.8		13.8	11.2		19.2	10.1
CABG	10.1	4.2		12.7	3.6		11.4	3.9
	P=0.64	P=0.11		P=0.68	P=0.0009		P=0.005	P=0.004

Mohr FW et al. *Lancet* 2013;381:629-38



Recommendations for DES Use *Stable CAD* 2014 Guidelines on Myocardial Revascularization

Stable Angina

DES is recommended in SCAD patients undegoing stenting if there is no contraindication to prologed DAPT

I

A

ACS

New Generation DES are indicated for percutaneous treatment of significant coronary lesions in ACS patients

I

A

Myocardial Infarction PCI

New Generation DES are recommended over BMS in Primary PCI

I

A

Final Remarks

- **New Generation DES have appreciably improved safety and efficacy profiles in ACS and stable CAD compared to first generation DES**
- **Further progress in DES technology (utilizing small amounts of a bioabsorbable polymer, polymer-free systems , thinner struts ,new drugs ...) future generations of mettalic DES can likely further reduce stent thrombosis and improve late outcomes**
- **New generation DES reduced tha gap with CABG , however, their efficacy still require improvement in some patients subset (Diabetics, diffuse multivessel disease)**