



Updated Evidence of LM Stenting Between PCI vs. CABG Since TCTAP 2011

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Updated evidence of LM stenting

- New data on DES vs. CABG for LM
- New data on 2^o generation DES for LM
- New data on stenting technique for LM

PRE-COMBAT trial

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Randomized Trial of Stents versus Bypass
Surgery for Left Main Coronary Artery Disease

MAY 5, 2011

600 Pts
with unprotected LMD

PCI (Cypher)
n=300

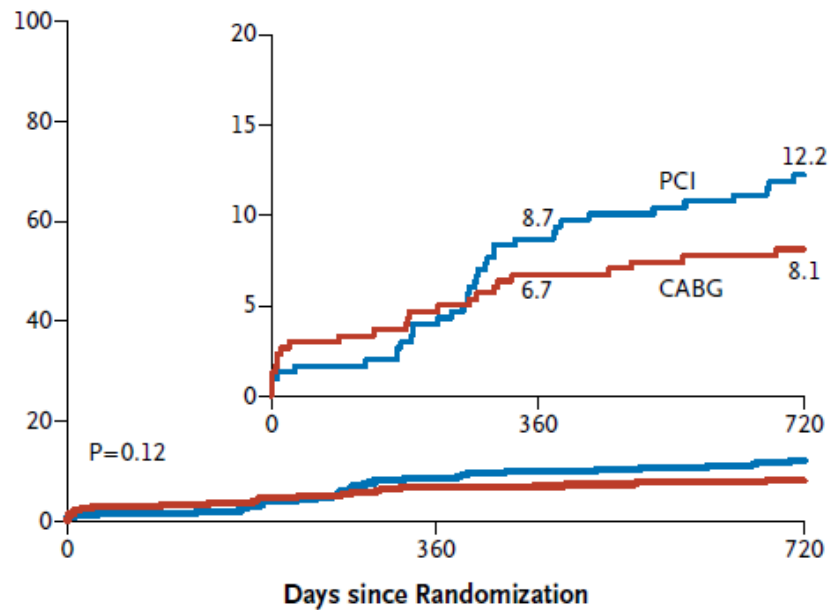
CABG
n=300

Primary endpoint: Death, MI, CVA, Revasc. At 1 year

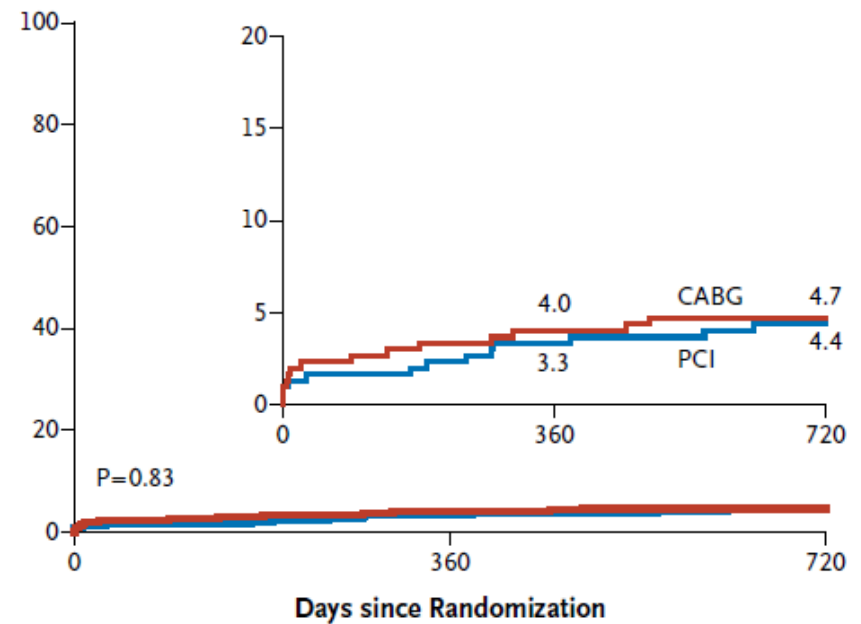
PRE-COMBAT

1° and 2° endpoints

Death, MI, Stroke, Revasc. (%)



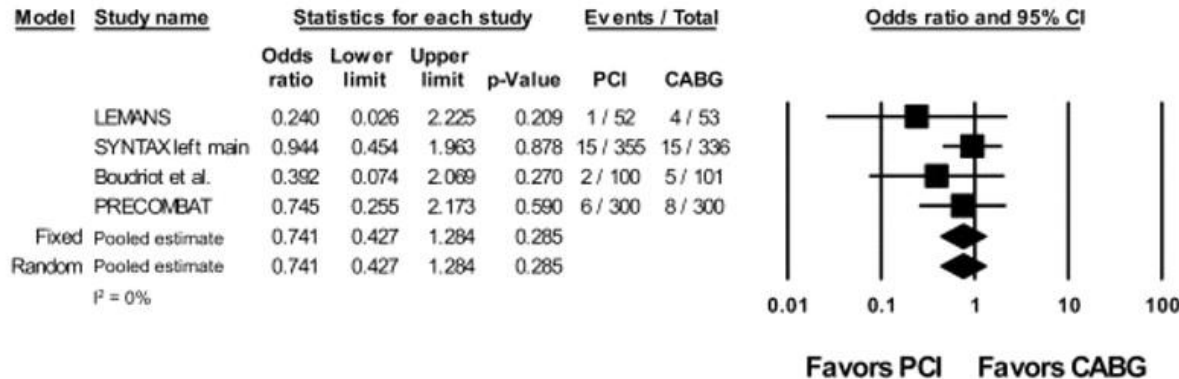
Death, MI, Stroke (%)



PCI vs. CABG for LMD

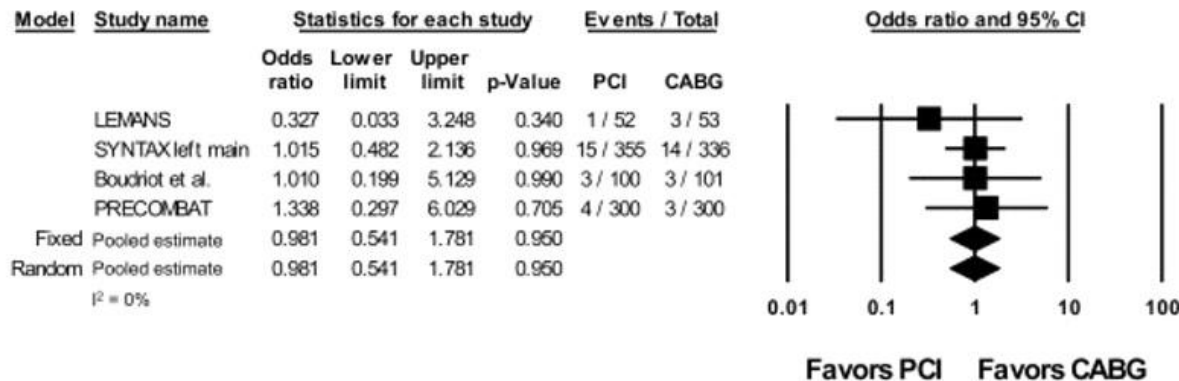
Meta-analysis

Death



1,611 patients
from 4 RCTs with
old generation DES

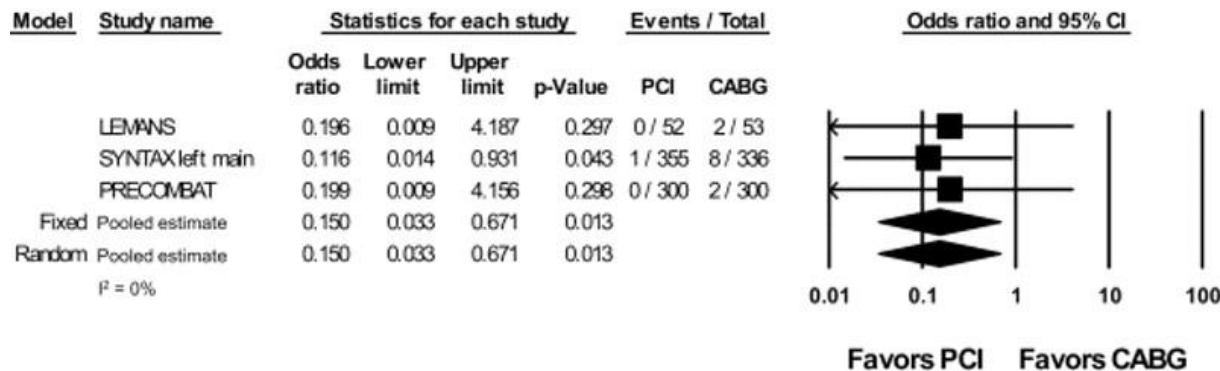
Myocardial Infarction



PCI vs. CABG for LMD

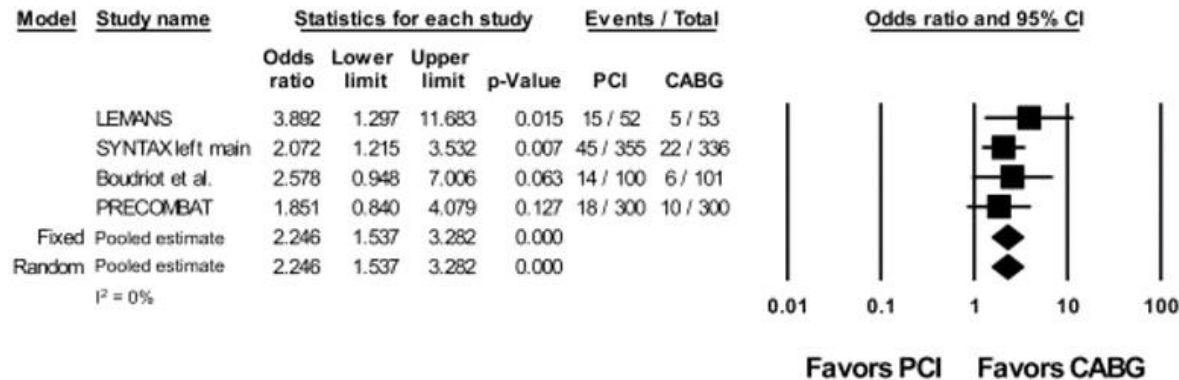
Meta-analysis

Stroke



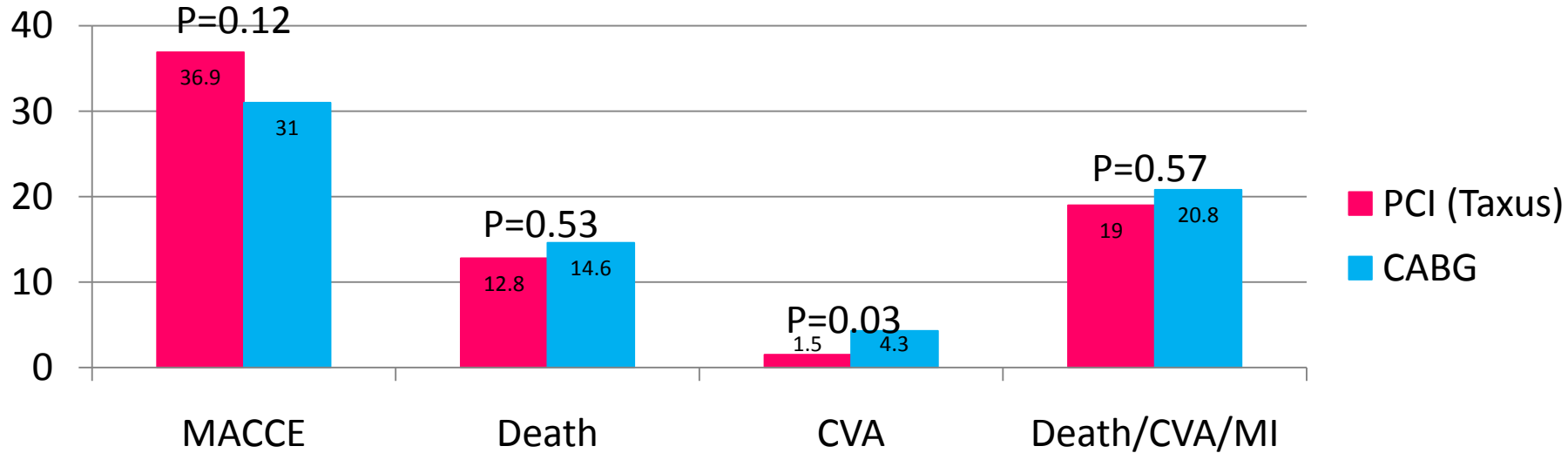
1,611 patients
from 4 RCTs with
old generation DES

Repeat Revascularization



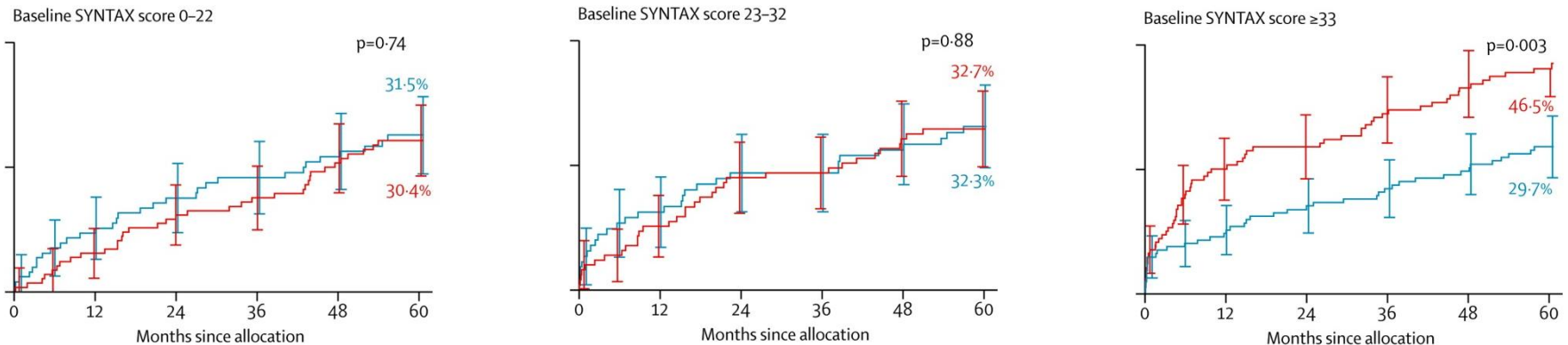
PCI (Taxus) vs. CABG for LM disease

5Y outcomes in the SYNTAX subset of 705 pts



<http://www.theheart.org/article/1466345.do>

MACCE according to SYNTAX score



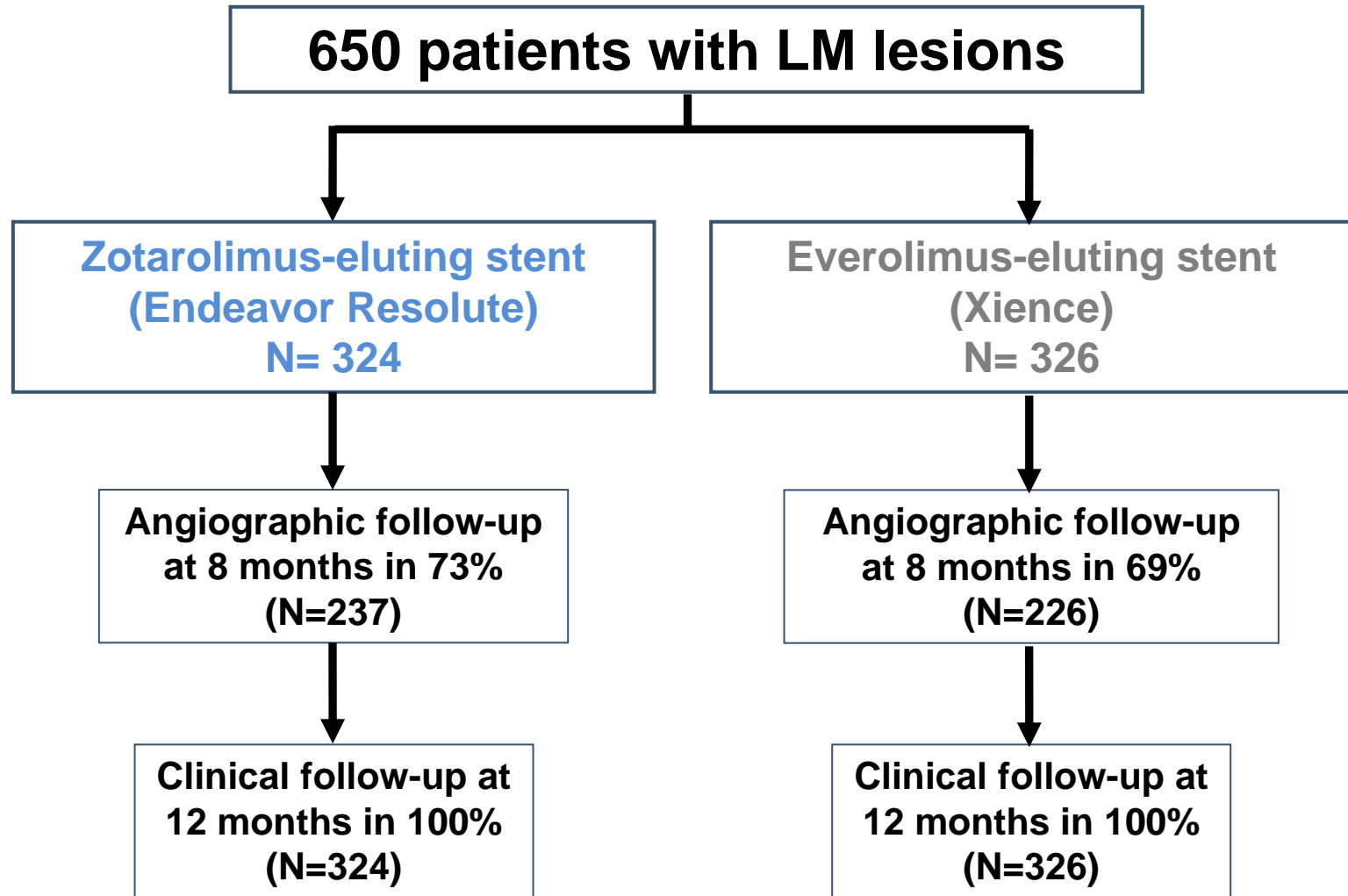
Current evidence on DES vs. CABG for LM

Recent data support the superiority of DES over CABG in the large majority of patients with unprotected LM disease

Updated evidence of LM stenting

- New data on DES vs. CABG for LM
- New data on 2^o generation DES for LM
- New data on stenting technique for LM

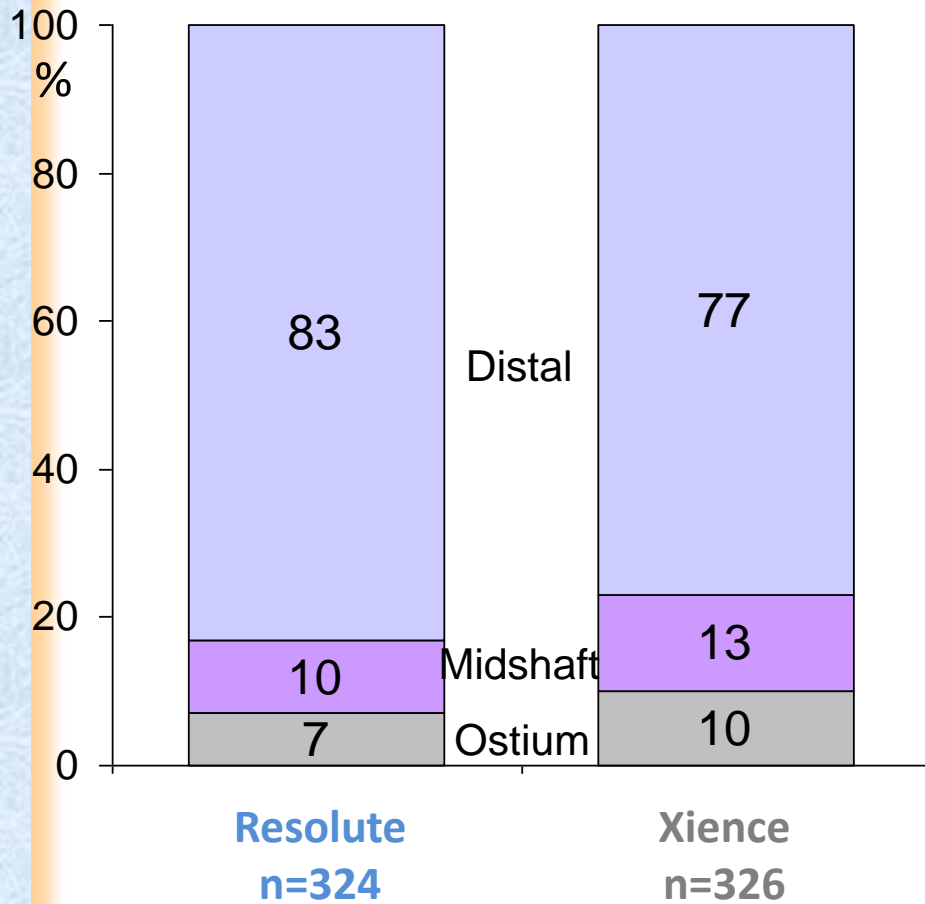
ISAR-LEFT MAIN 2 Trial



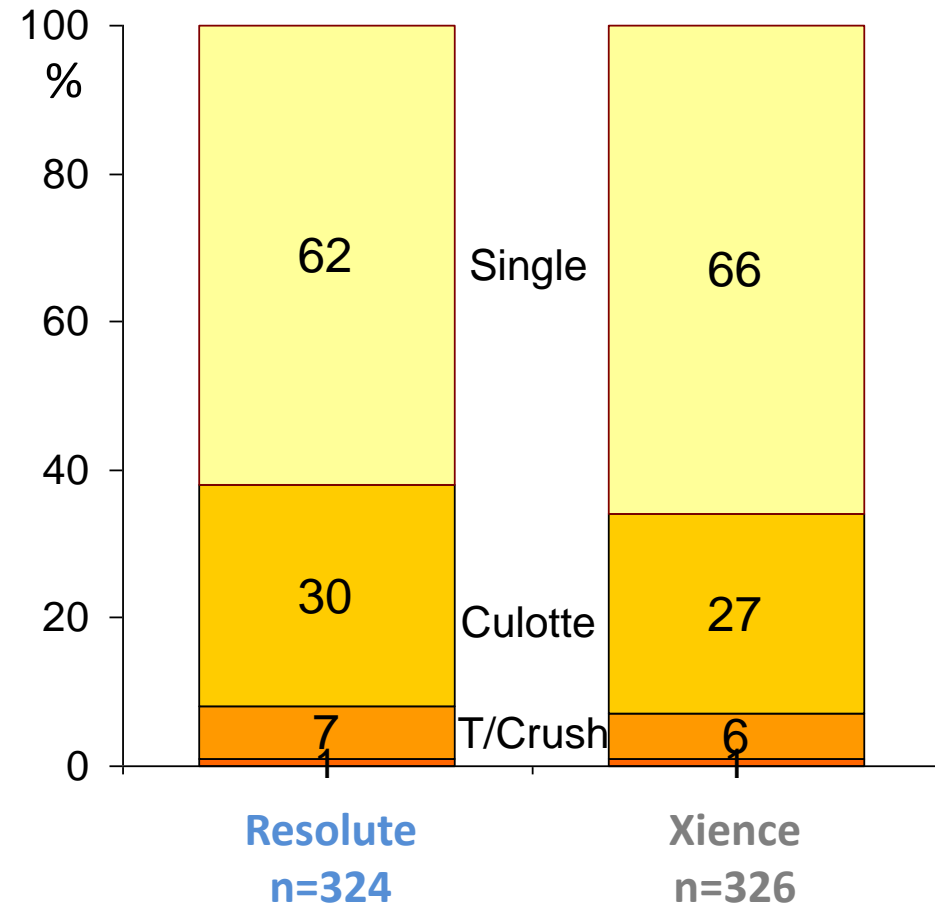
Main baseline characteristics

	Resolute n=324	Xience n=326
Age, years	69.4±10.4	70.2±9.4
Diabetes, %	28	29
ACS, %	38	33
History of MI, %	32	29
Parsonnet Score	13.3±10.3	13.7±11.0
EuroSCORE	5.1±3.7	5.0±3.7

Lesion Location

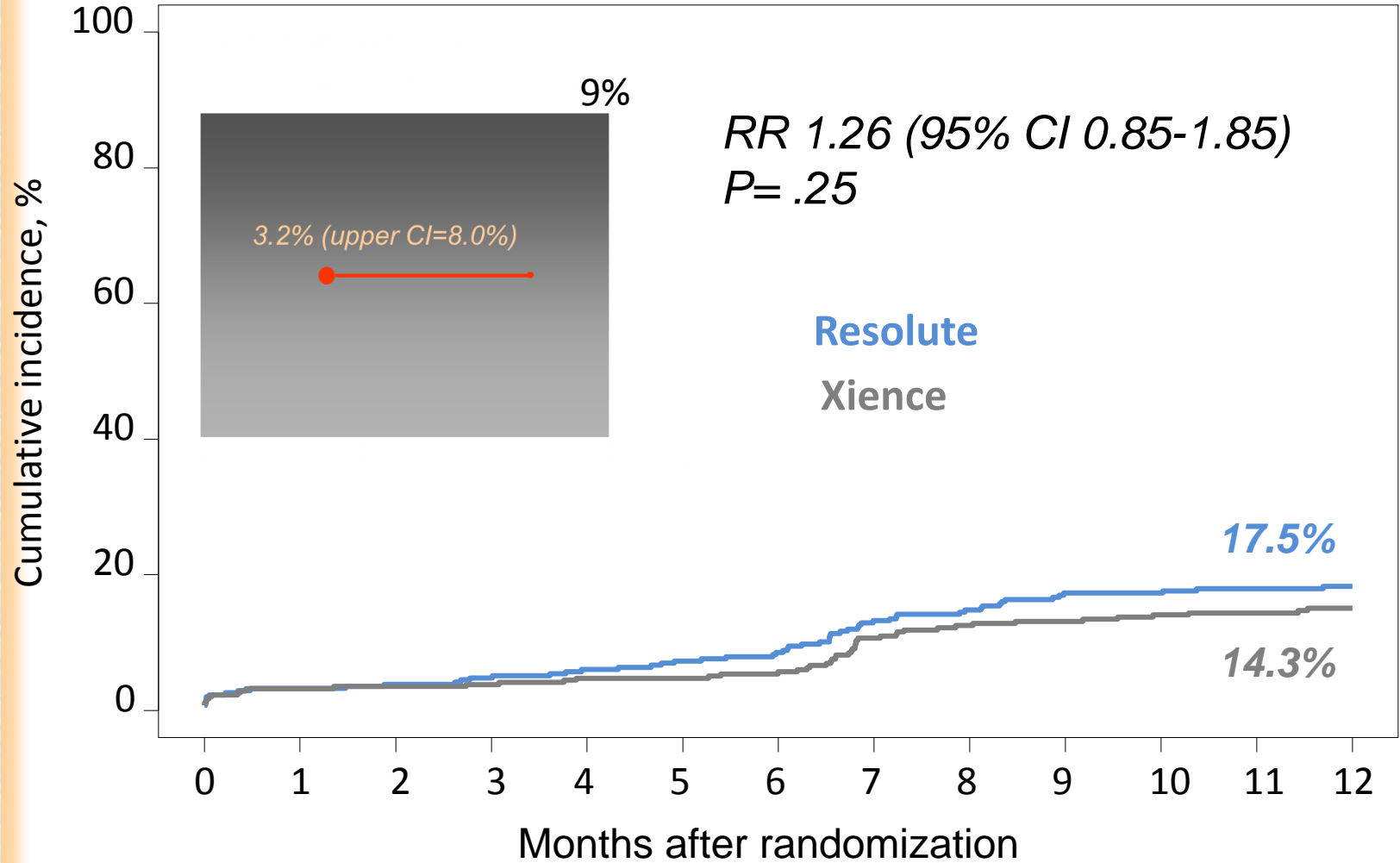


Stenting Technique



Major Adverse Cardiac Events

- primary endpoint -



Current evidence on 2° generation DES for LM

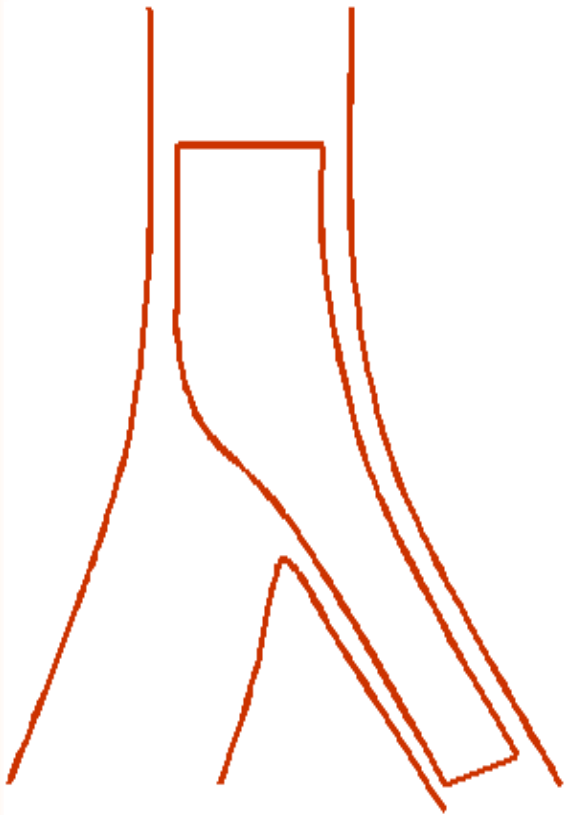
Two commonly used 2° generation DES
- Endeavor Resolute and Xience –
provide very favorable and comparable 1-year
outcomes in patients with unprotected LM disease

Updated evidence of LM stenting

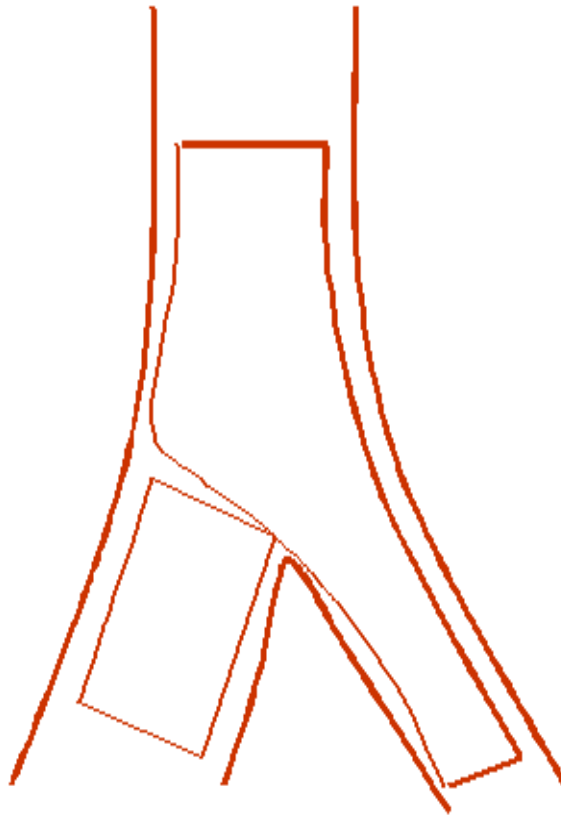
- New data on DES vs. CABG for LM
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Stenting techniques

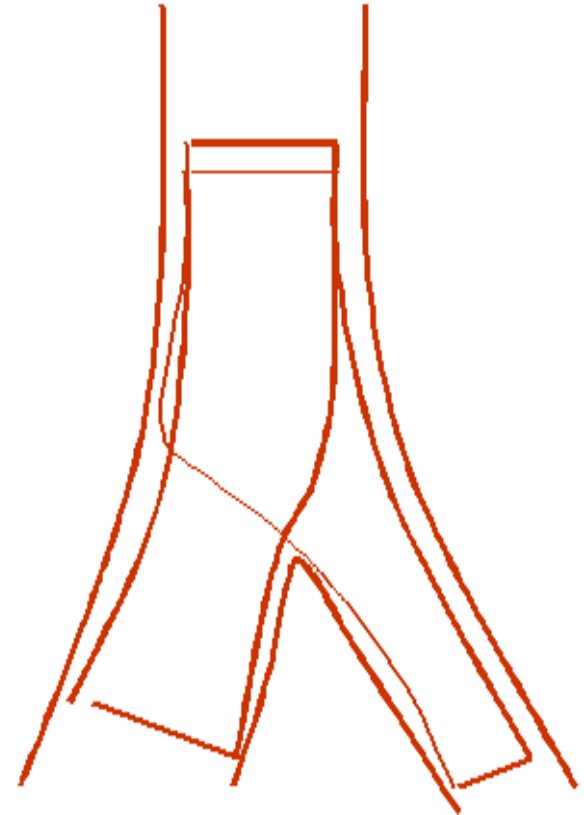
1 Stent



2 Stents



T Stenting



Culotte

1-Stent technique

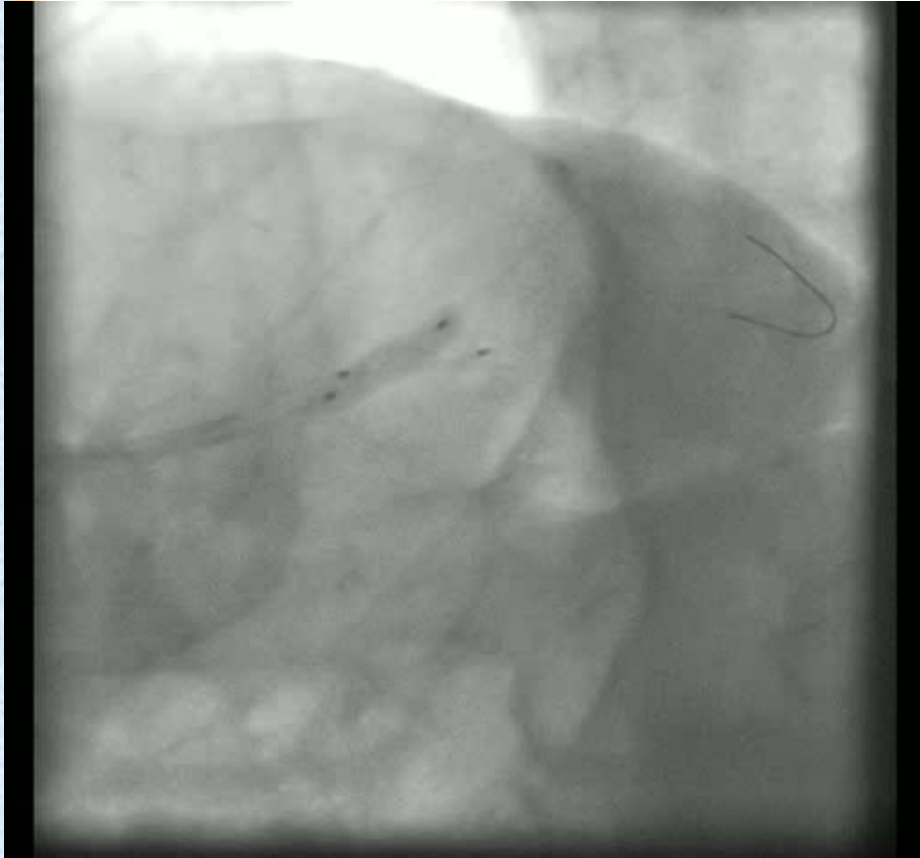


Prior to PCI



Stent

1-Stent technique

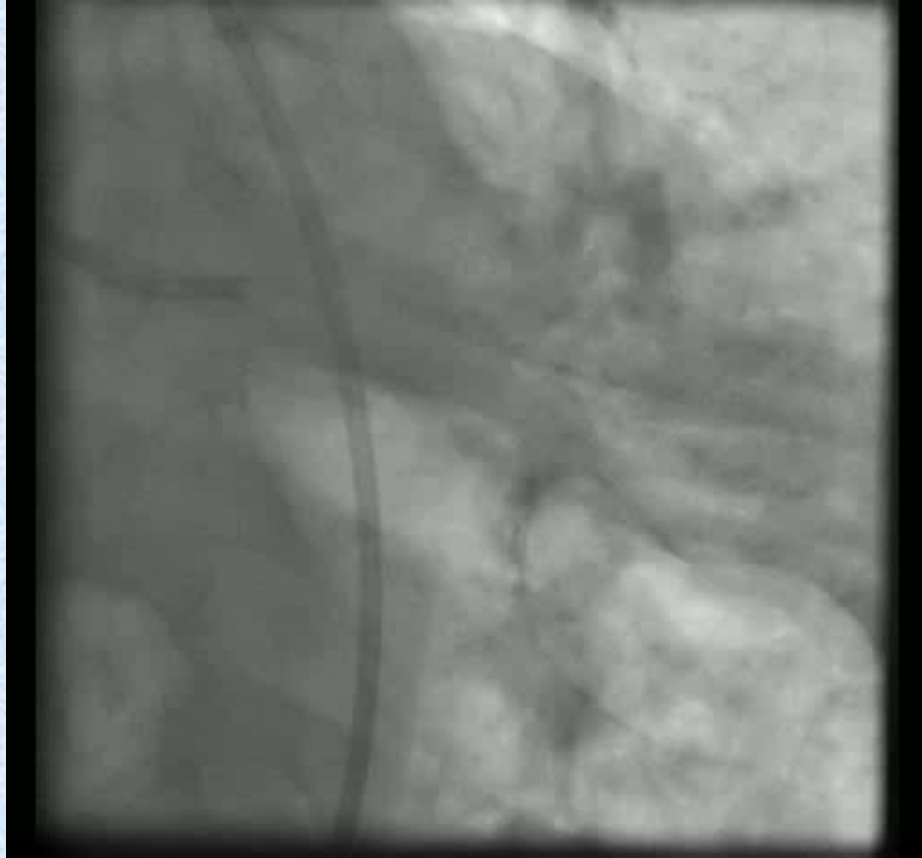


„Kissing“ balloons

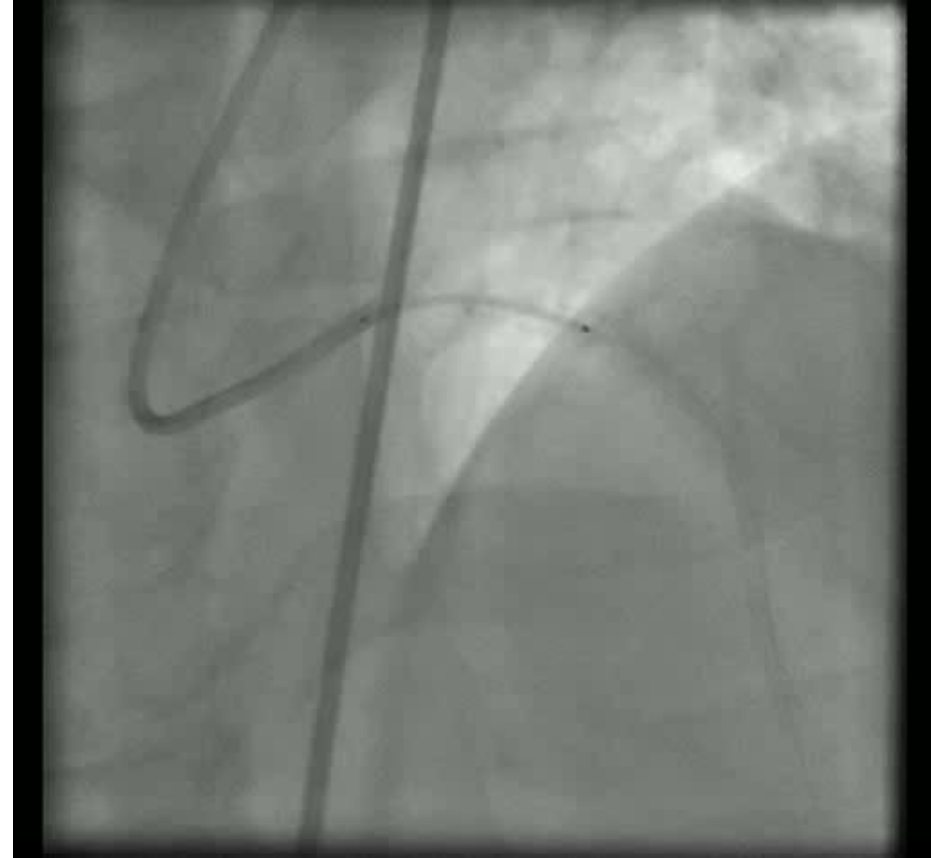


Final

2-Stent technique T-stenting



Prior to PCI

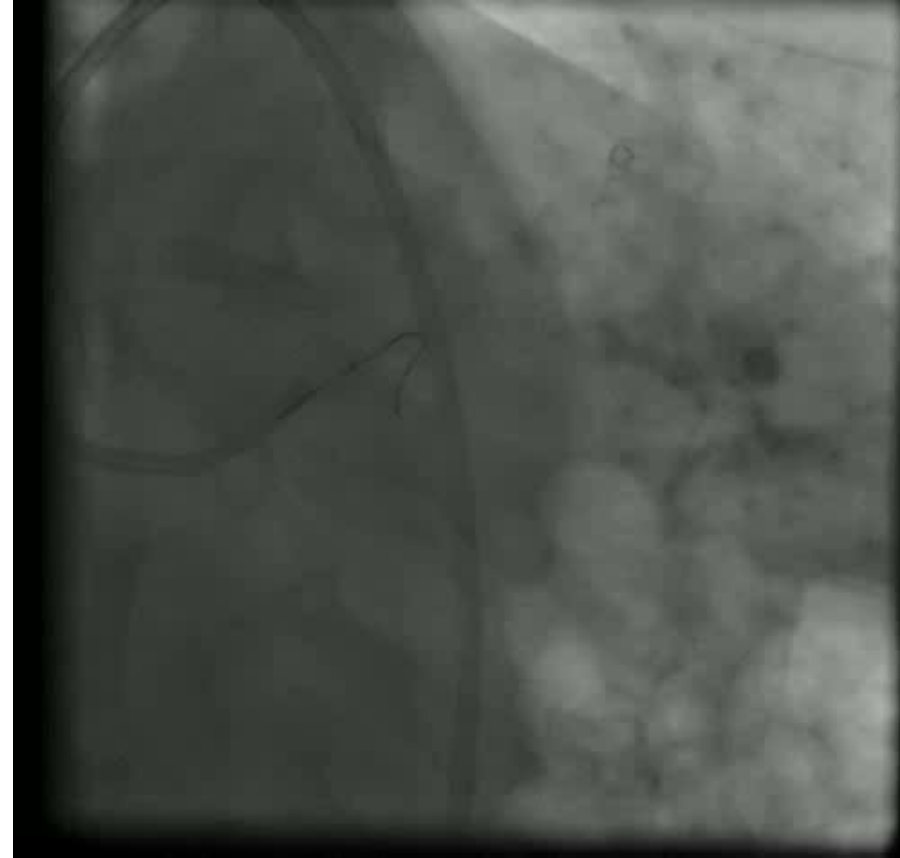


Stent

2-Stent technique T-stenting

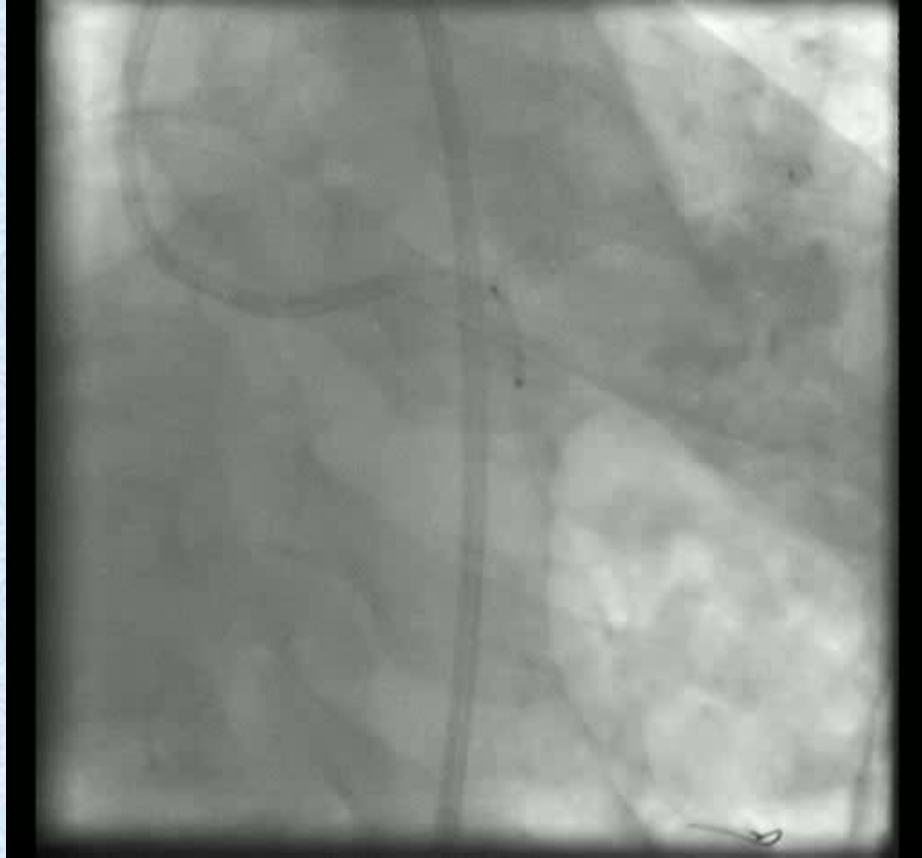


LCx Post LM Stent

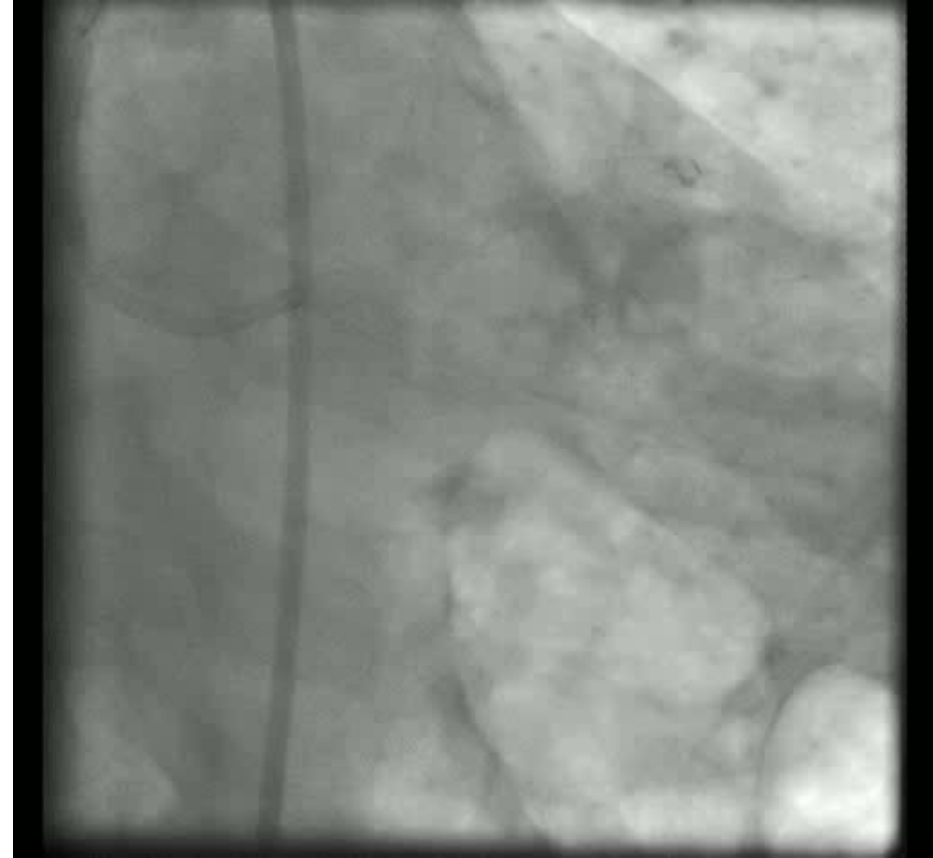


LCx Wiring

2-Stent technique T-stenting

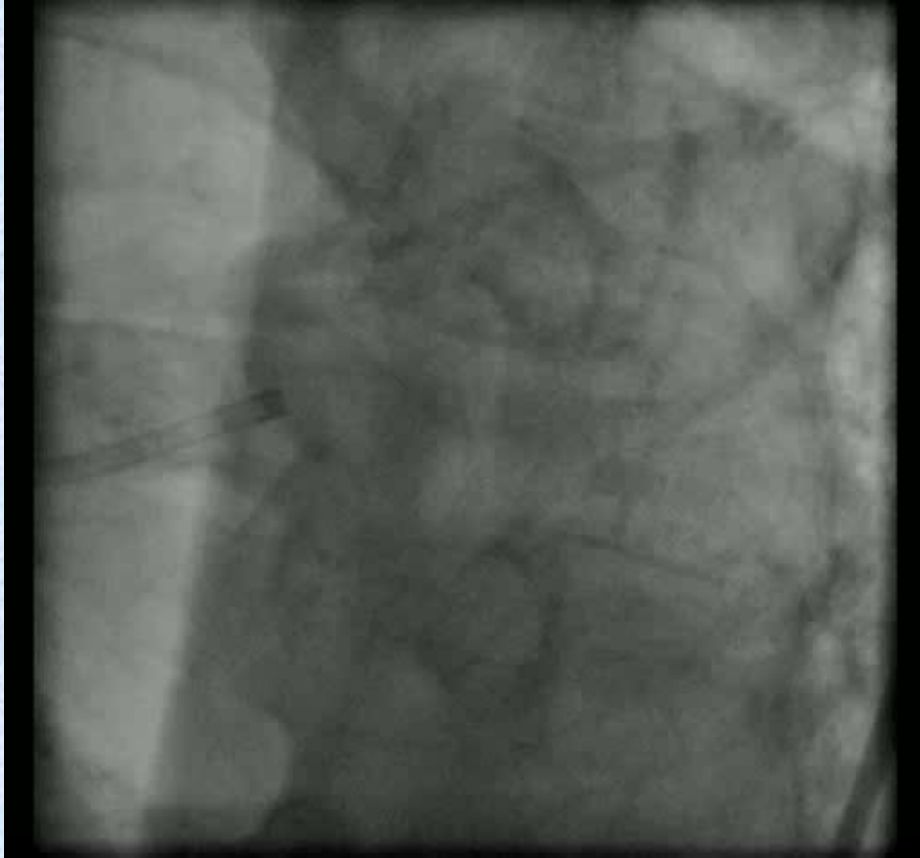


LCx Stent

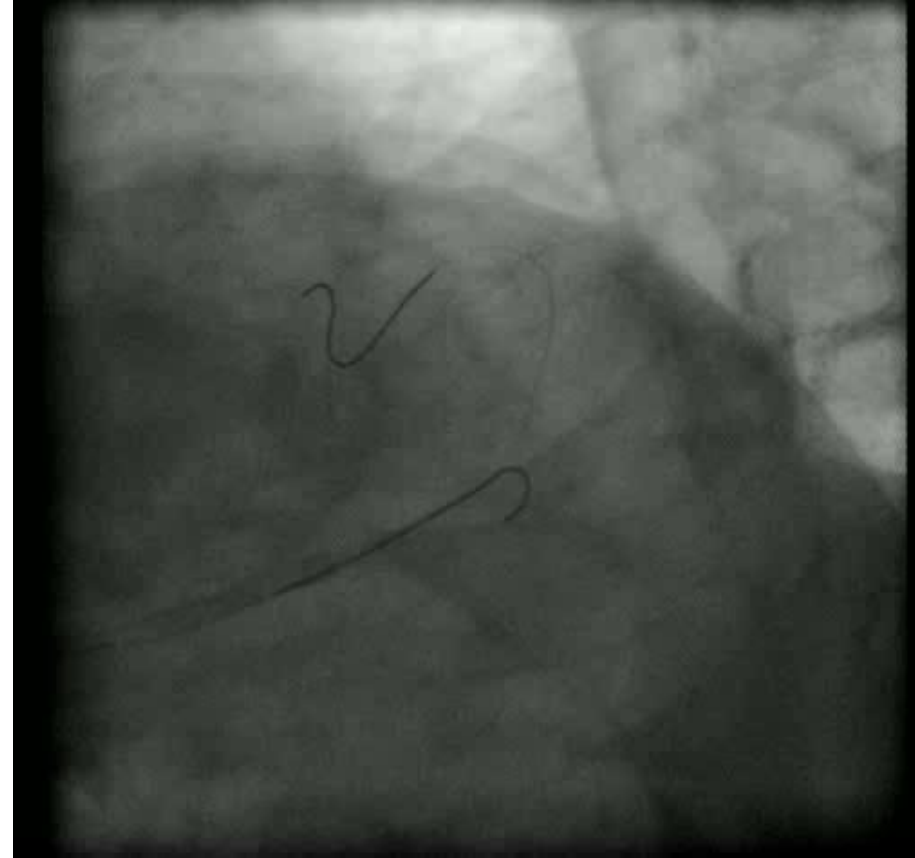


Final

2-Stent technique „Culotte“



Prior to PCI

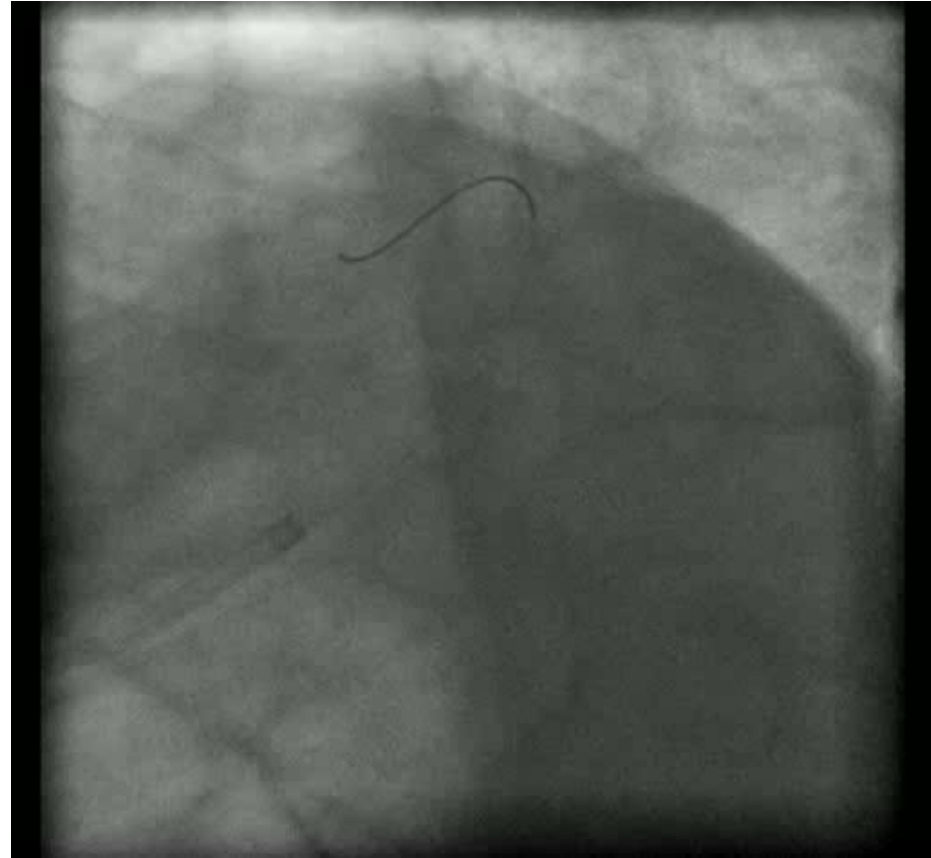


Wiring

2-Stent technique „Culotte“

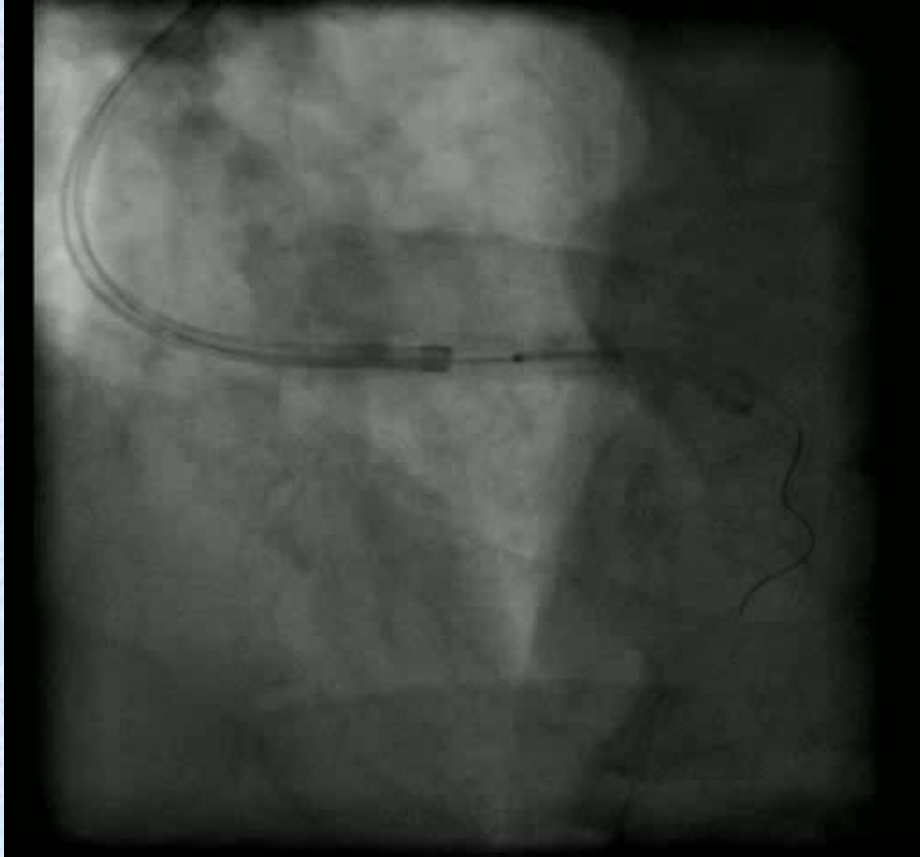


LM Stent

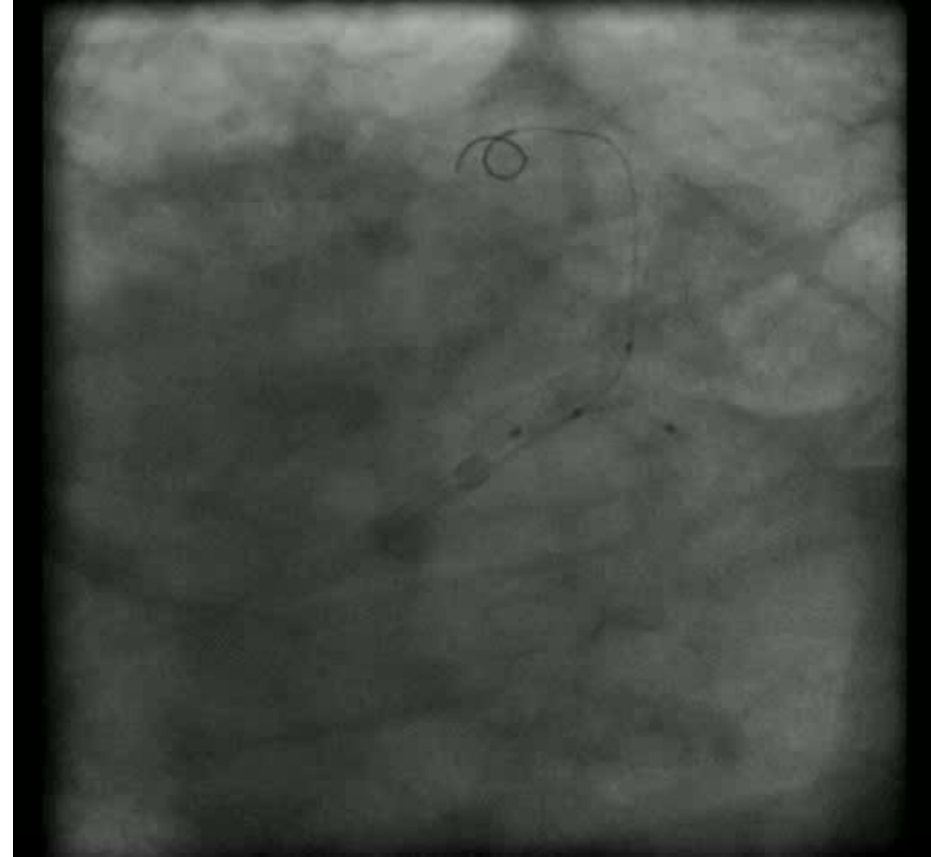


LCx post LM Stent

2-Stent technique „Culotte“

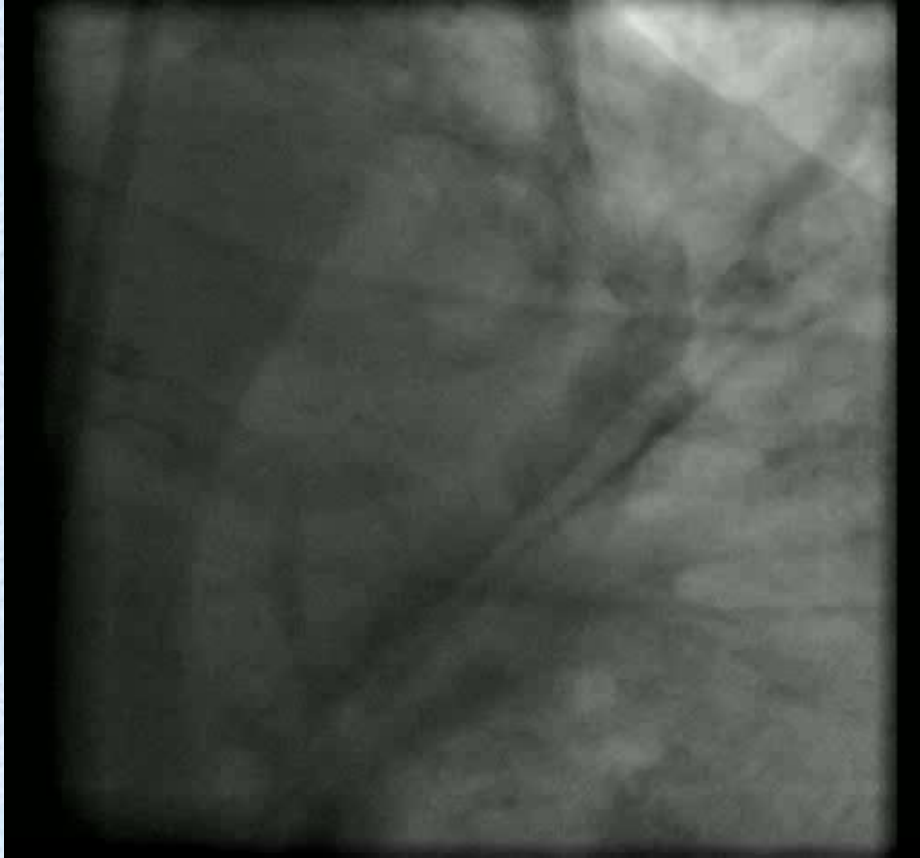


LCx Stent



Kissing balloons

2-Stent technique „Culotte“



Final LM Bifurcation

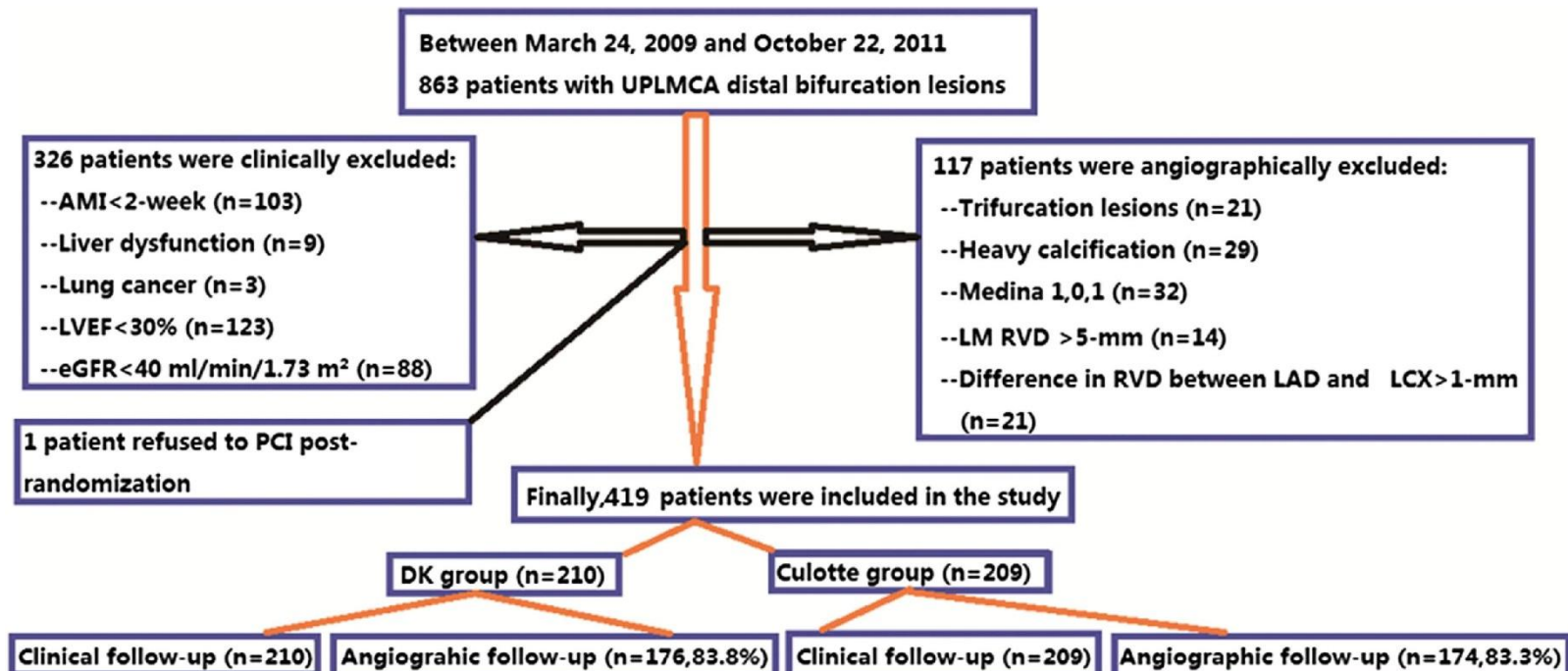


Final LM Ostium

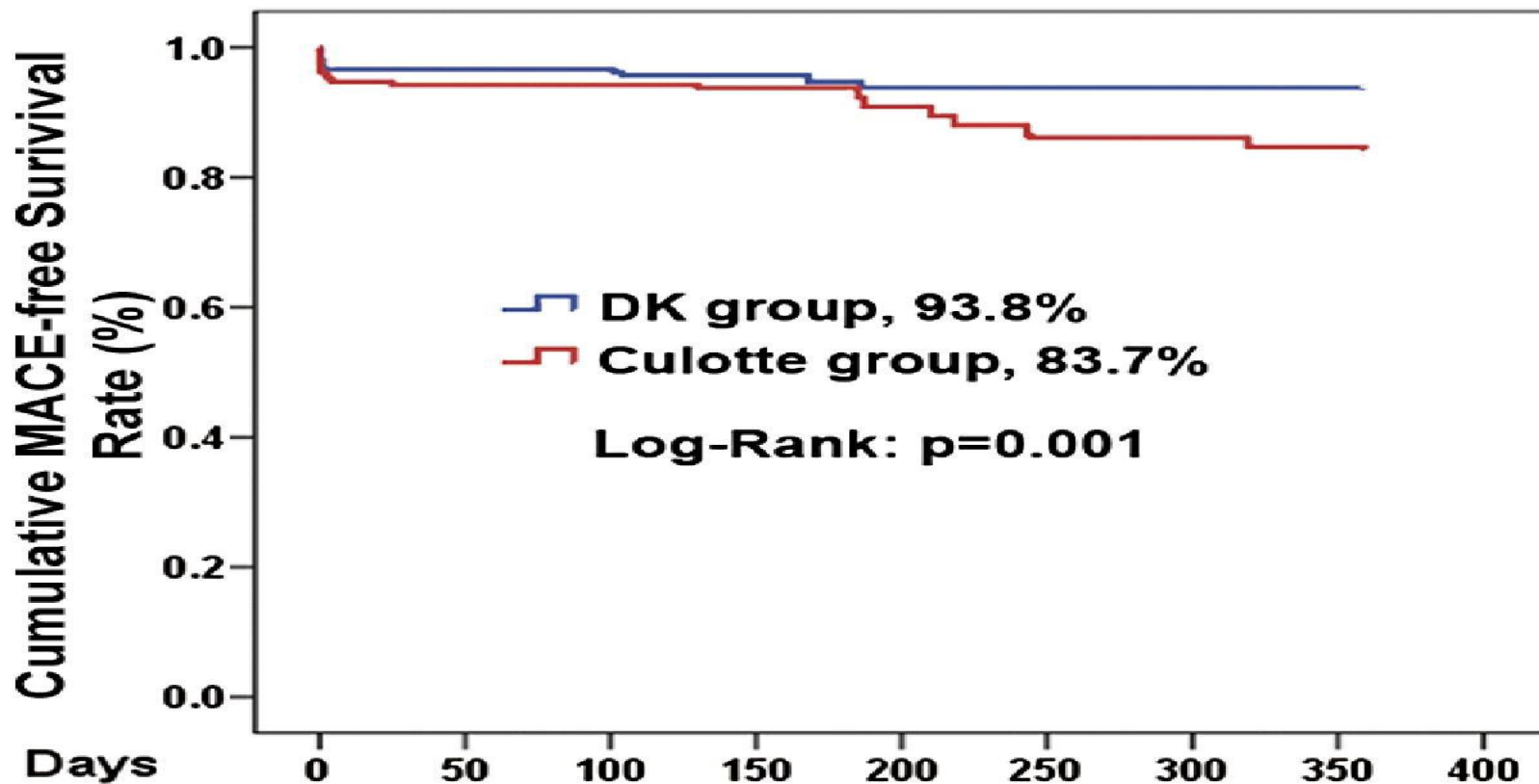
Comparison of Double Kissing Crush Versus Culotte Stenting for Unprotected Distal Left Main Bifurcation Lesions

Results From a Multicenter, Randomized, Prospective DKCRUSH-III Study

(J Am Coll Cardiol 2013;61:1482-8)



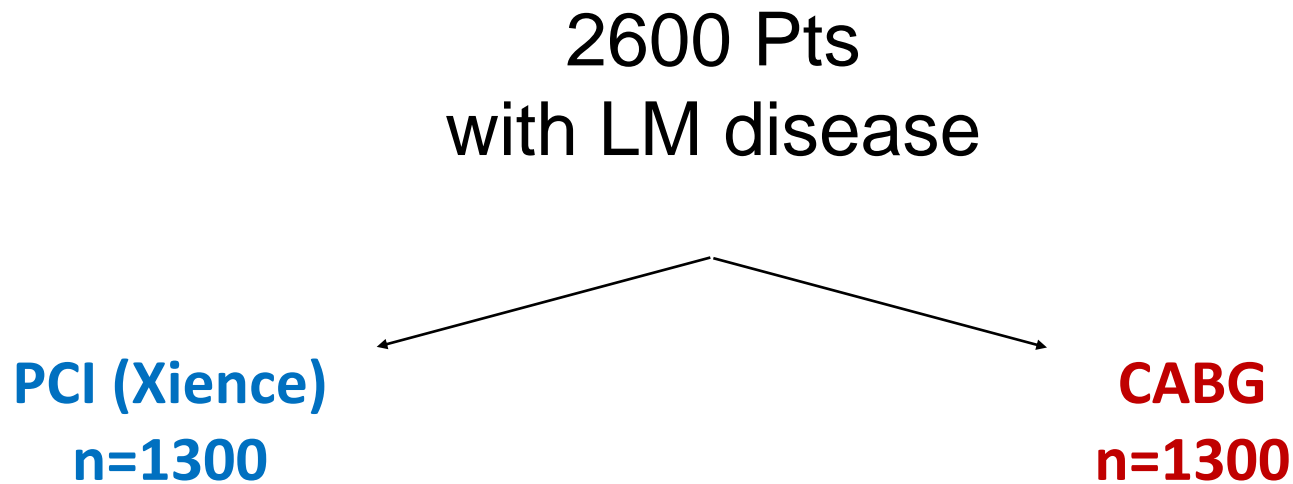
DKCRUSH III



	DK group	Culotte group
TLR (%)	2.4	6.7
Binary Restenosis (%)	6.8	12.6

Stay tuned...

EXCEL Randomized Trial



1° EP: 3-year Death/MI/CVA