Management of Left Main Restenosis ICPS database

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Incidence and Management of Restenosis After Treatment of Unprotected Left Main Disease With Drug-Eluting Stents

70 Restenotic Cases From a Cohort of 718 Patients: FAILS (Failure in Left Main Study)

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CLINICAL RESEARCH Interventional Cardiology

Incidence, Predictors, Treatment, and Long-Term Prognosis of Patients With Restenosis After Drug-Eluting Stent Implantation for Unprotected Left Main Coronary Artery Disease

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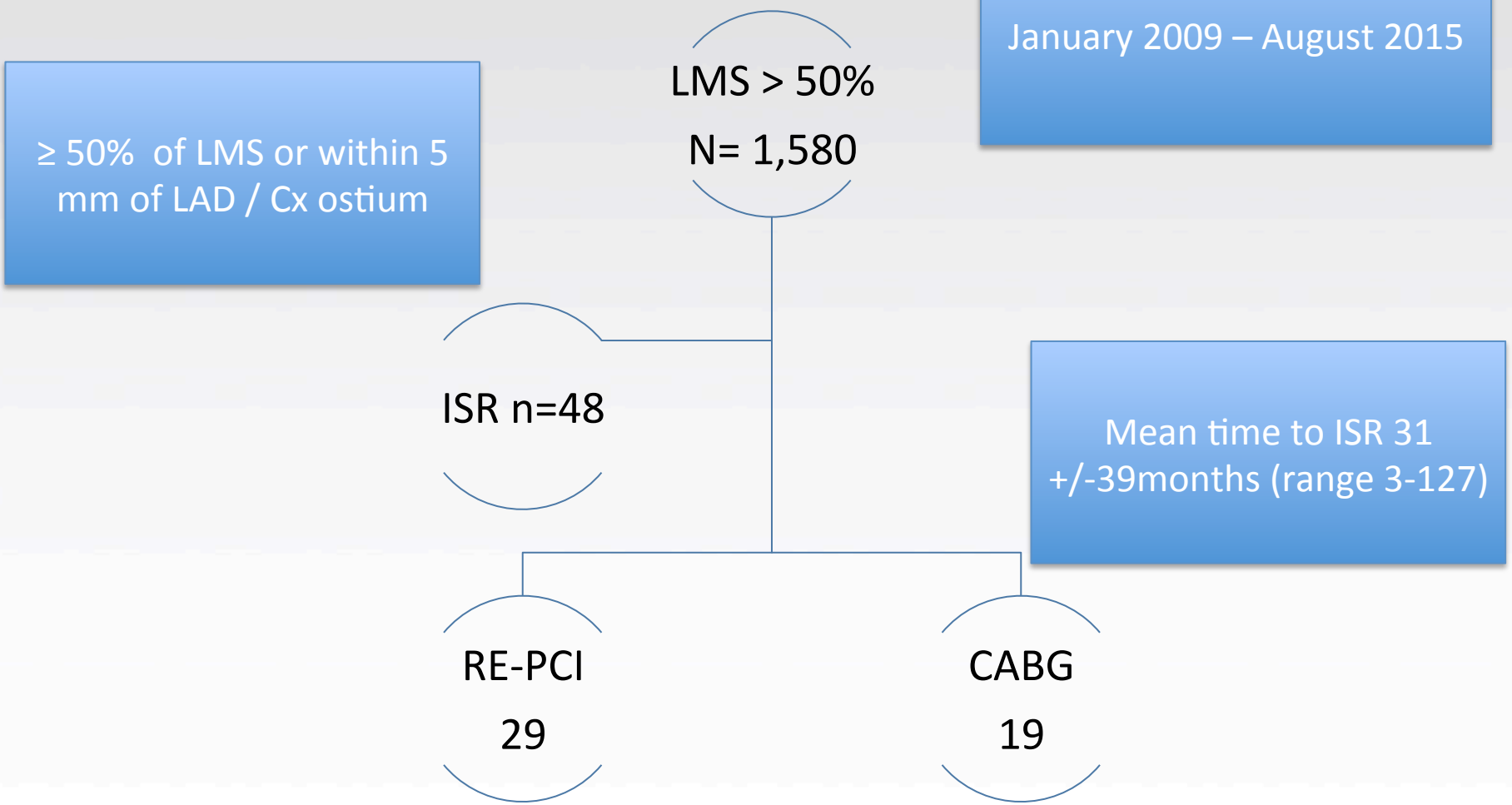
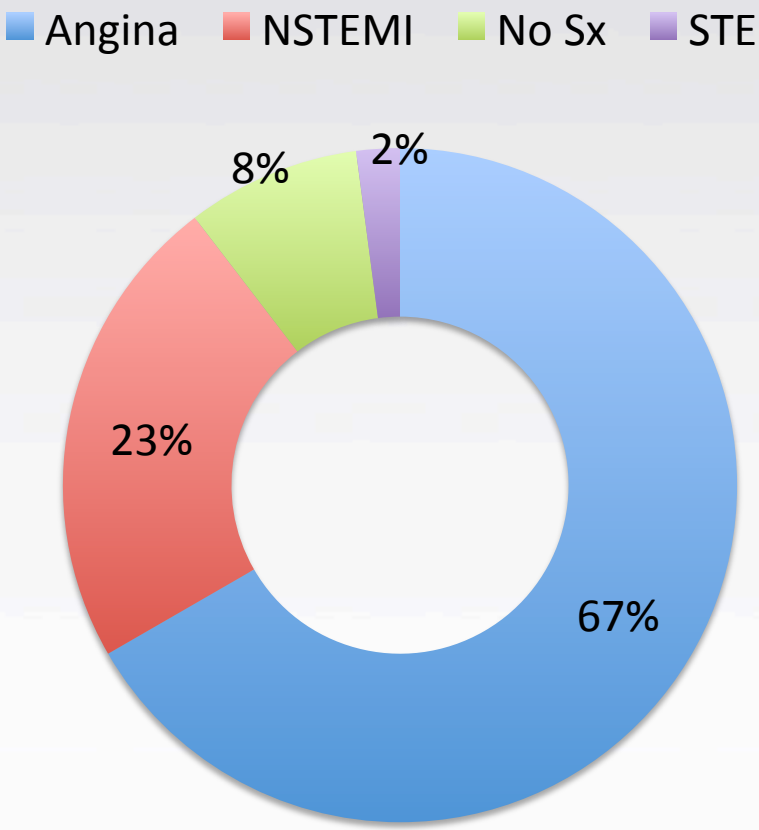
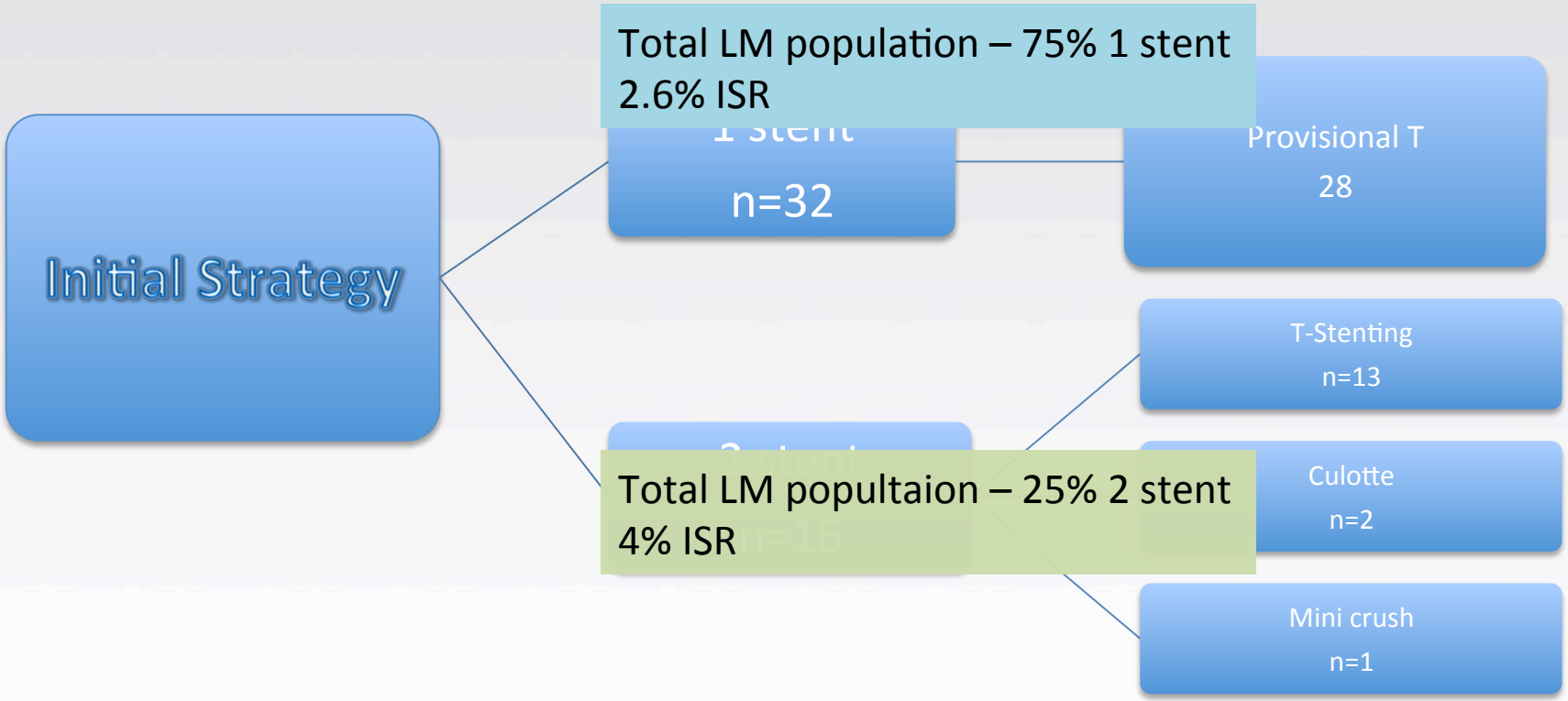
ICPS Database

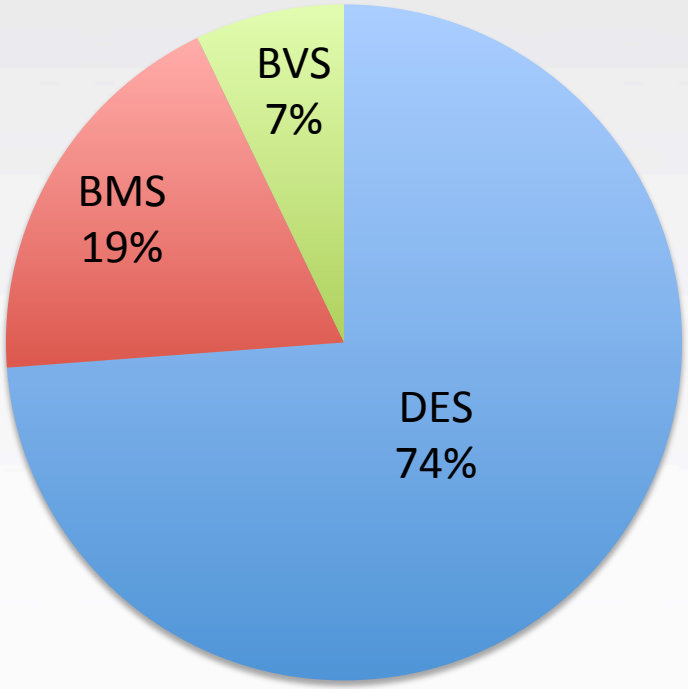


Clinical Presentation of ISR




Total LM population – 75% 1 stent
2.6% ISR
Initial Strategy
n=32
Provisional T
28
T-Stenting
n=13
Culotte
n=2
Mini crush
n=1
Total LM popultaion – 25% 2 stent
4% ISR

Initial stent



Patient Demographics per Strategy

	PCI (n29)	CABG (n19)
Age (years)	74+13	64+13
Male (%)	69	71
eGFR (ml/min)	52±26	72±22
Diabetes (%)	35	42
Clinical Presentation		
Stable (n)	19	13
NSTEMI (n)	7	6
STEMI (n)	3	0
Initial strategy		
1-stent (%)	69	63
2-stent (%)	31	37

60 % Percutaneous Management

Further stent

n=26

POBA

n= 3

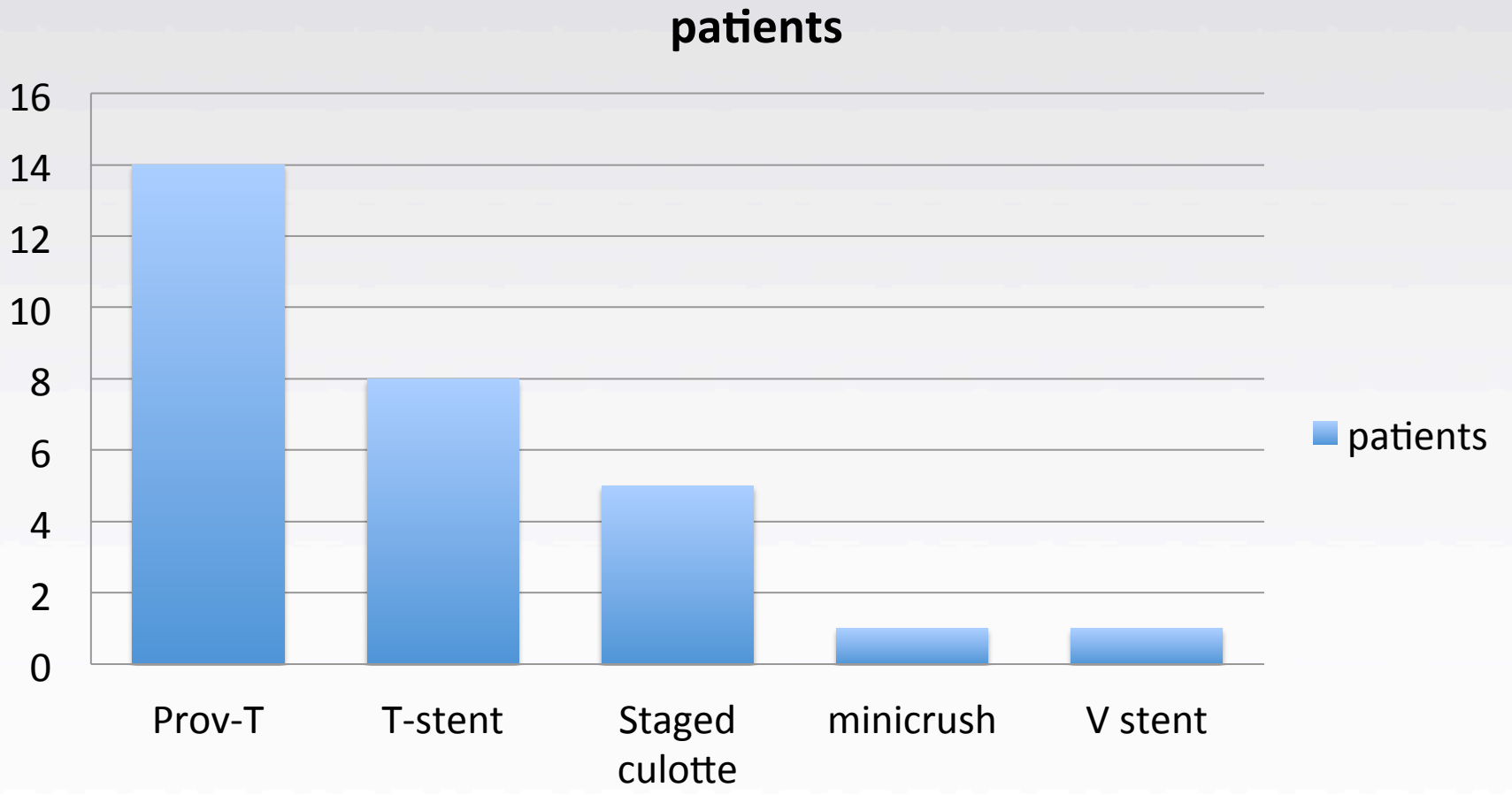
1-Stent

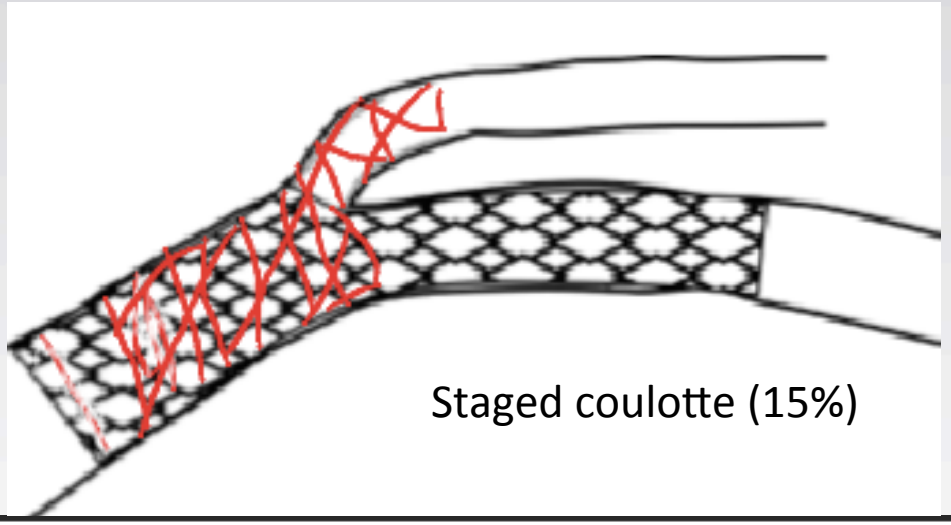
n=21 (81%)

2-Stent

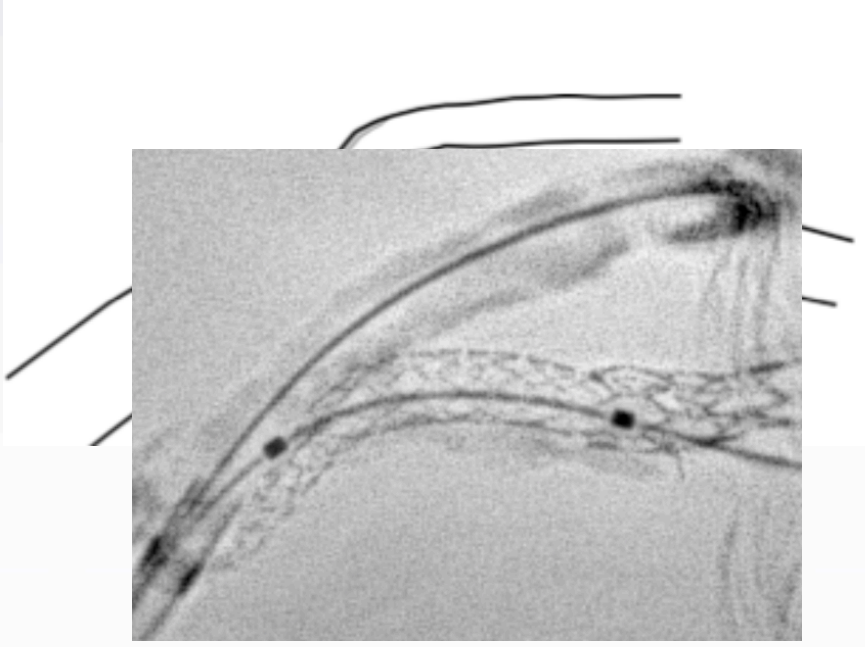
n=5 (19%)

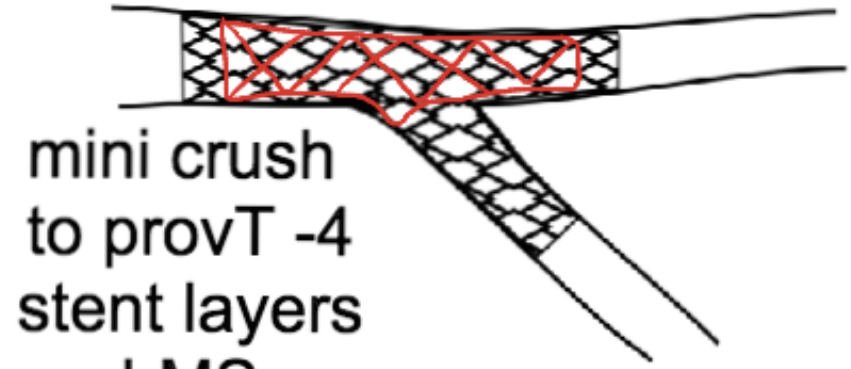
Final bifurcation Strategy





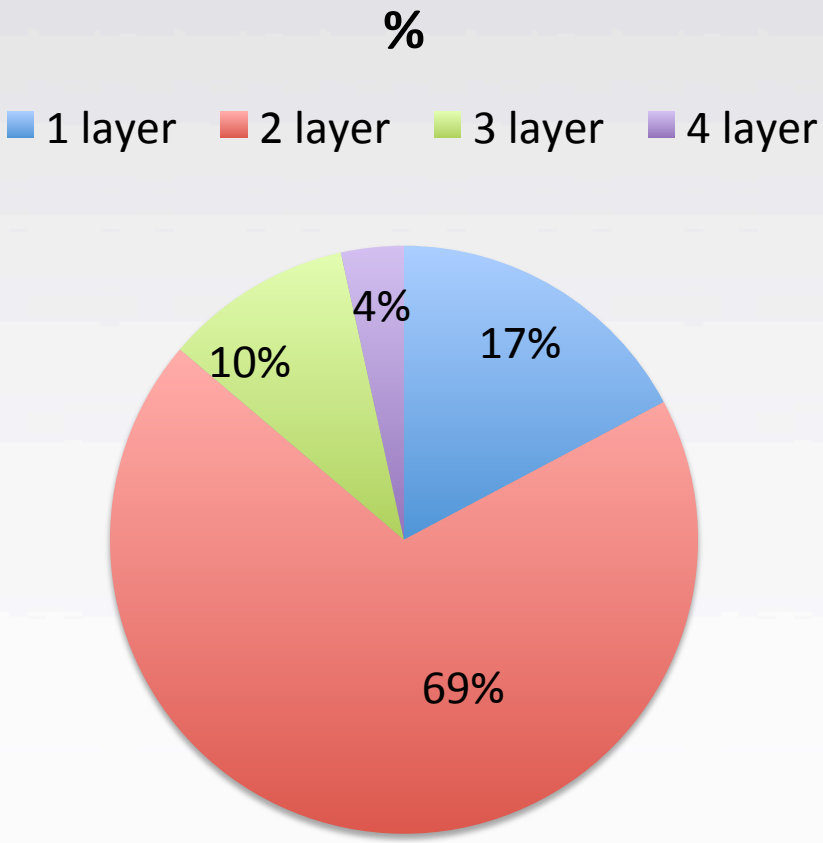
Staged coulotte (15%)





mini crush
to provT -4
stent layers
LMS (1 case)

Final Strategy
Number stent layers overlapping



MACE at last follow up (32+/- 21 months)

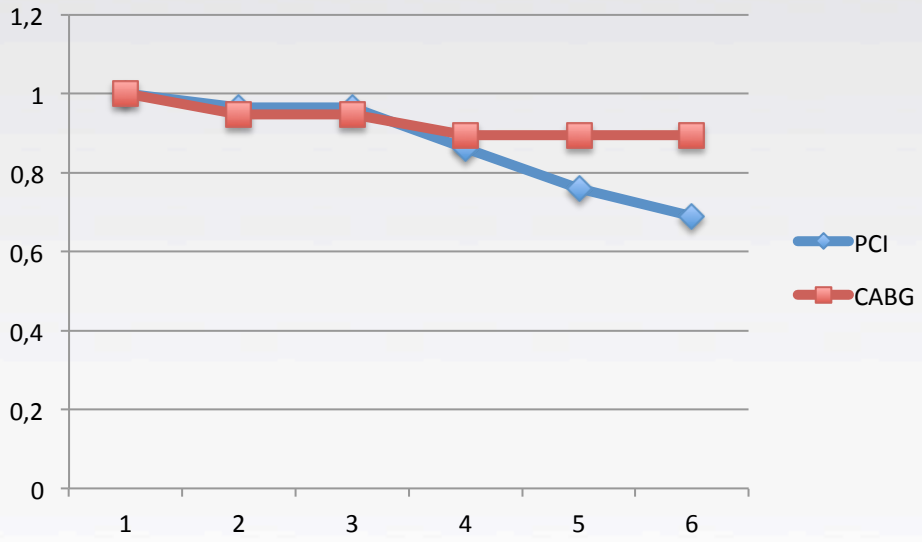
	PCI (n 29)	CABG (n 19)
All MACE	31%	10.5%
	7 (24.5%)	0
	2 (7%)	1
	2 (7%)	1
TVF%	1 (3.5)	0
Stent thrombosis		
Definite/probable	2(7%)	0
Possible	1(3.5%)	0

Delay from 2nd procedure to death 7 +/- 9 months

Death
4 cardiac
2 non cardiac
1 unknown

KM Survival Curves

All death, MI,



Conclusion

- Restenosis after ULM stenting presents with a stable clinical course in most cases.
- Can be percutaneously managed with a simple one-stent strategy in the majority of cases.
- Initial 1-stent strategy may make percutaneous management of ISR more feasible.
- Higher MACE in PCI group may may be attributed to operator bias to treat older , more unstable patients with PCI.

Maybe its just not in the LMS……

Ozzy was here