

Provisional strategy as a Gold Standard

David Hildick-Smith
Sussex Cardiac Centre, UK



Opponent's title...

- “Provisional stenting is the gold standard for bifurcation stenting....”

Main theme

- KISS
- *“There is nothing more likely to go wrong than a complicated bifurcation strategy undertaken as something of a novelty”*

Risks with complex approaches

- For an optimally-done case, will the risk be the same for a one-stent and a two-stent technique?
- For a badly done case, will the risk be the same for a one-stent and a two-stent technique?
- With which technique is there more potential for mayhem?



Two-stent cases

- If I do 300 cases per year and...
- 15% of cases are bifurcations...
- 10% are for $>2.5\text{mm}$ diameter $>5\text{mm}$ length

- 4 cases per year

“There is nothing more likely to go wrong than a complicated bifurcation strategy undertaken as something of a novelty”

(Nearly) All options are provisional...

- Supersimple (stent and go)
- Simple (stent, pot and go)
- Provisional T (stent, pot, kiss)
- Provisional T/TAP (stent, pot, T/TAP, kiss)
- Provisional culotte (stent, pot, kiss, culotte, kiss)

One option is non-provisional



The Provisional Approach

- You adapt and respond as you go
- ~95% of cases will be “provisional T” without side branch stent
- ~5% of cases will be “provisional culotte”
- 2% of cases will be planned culotte (non-provisional)
 - Wiring of the side branch very difficult
 - Large diseased side branch

Gold Standard

- Does not mean slavish adherence to a particular technical idiom at all costs
- Does mean that the vast majority of cases will be done according to a particular practice

The Provisional Approach

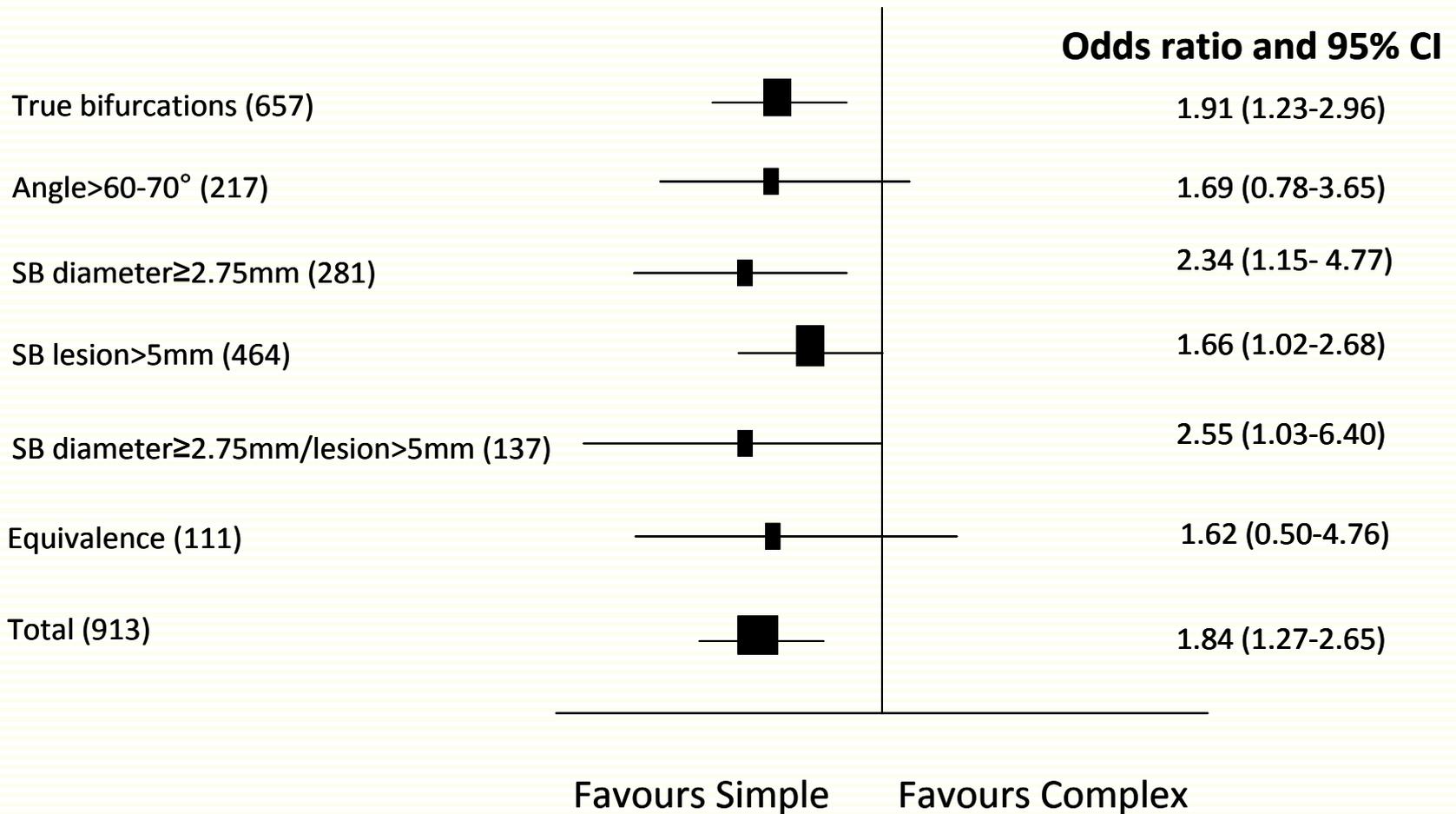
- If you:
 - Predilate the main vessel
 - Protect the diseased side branch with a wire
 - Stent the main vessel according to the distal diameter
 - Optimise the proximal part of the stent (POT)
- You will have done the patient a good turn in the vast majority of bifurcation procedures

Dr Nolan says...



- “Tell them in Bordeaux that Dr Nolan says you stent the main vessel and let the side branch look after itself and that’s why I’m driving home in my Porsche at 4pm”

BBC ONE NORDIC meta-analysis



CONCLUSIONS

- The provisional approach remains the gold standard for bifurcation lesions
 - Applicability
 - Flexibility
 - Adapatability
- Some patients require a planned two-stent strategy, but these patients are “the exception to prove the rule”