

EBC achievements and what will the future bring

***The 9th European Bifurcation Club
meeting.***

London, 18-19 October 2013

European Bifurcation Club



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Meetings so far.....

1. 2005 Bordeaux (30. of September)
2. 2006 Rome (30. of Septemeber)
3. 2007 Valencia (29. of September)
4. 2008 Prague (26-27. of September)
5. 2009 Berlin (16-17. of October)
6. 2010 Budapest (22-23. of October)
7. 2011 Lisbon (14-15. of October)
8. 2012 Barcelona (12-13. of October)
9. 2013 London (18-19. of October)



EBC 2005

- Idea Formulated 2004
- Originated from Bordeaux/ICPS
- Based on success of the Japanese CTO club
- A “think-tank” of cardiologists with a particular interest in bifurcations
- A non-political, independent and informal club, promoting open discussion, exchange of ideas and development of collaborative research
- A place to make friends.....



So what have we achieved.....

“The EBC annual meetings remains compact and dedicated to a single topic. As such, the meetings are able to bring together clinicians, engineers and physicists for detailed discussions. The consensus statements from the meetings reflect that unique opportunity.”



EBC 2013

- A “think-tank” of dedicated specialist with a particular interest in bifurcations
- A non-political, independent and informal club, promoting open discussion, exchange of ideas and development of collaborative research.
- Formal and independent CLUB from 2012!
- One yearly Scientific Meeting,
- Publication of a yearly consensus statement
- Still a place to make friends.....
- 10 years anniversary next year!



A Formal CLUB from 2012

The Board

- President: Yves Louvard
- President Elect: Goran Stankovic
- Treasurer: Thierry Lefevre
- Secretary: Jens Flensted Lassen

- Board Members:
 - Remo Albiero
 - Alaide Chieffo
 - Olivier Daremont
 - Miroslav Ferenc
 - David Hildick-Smith
 - Peter Mortier
 - Manuel Pan

Consensus from the 7th European Bifurcation Club meeting

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Consensus so far.....

“A bifurcation coronary lesion is a lesion occurring at, or adjacent to, a significant division of a major epicardial coronary artery. These lesions remain complex for the interventionist”

The tower of Babel (The confusion of languages)



Pieter Bruegel the Elder (1563)

MEDINA classification

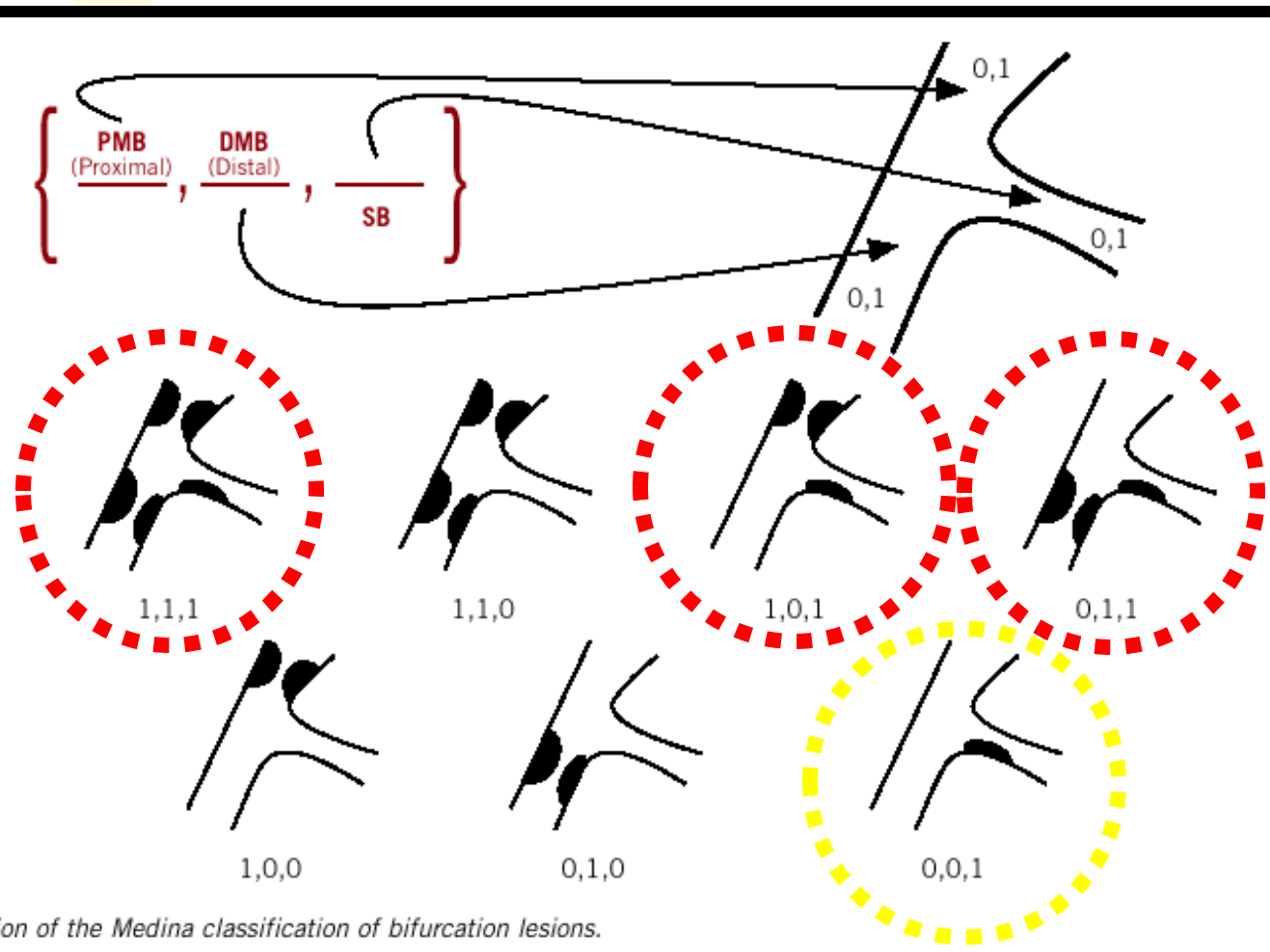
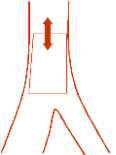
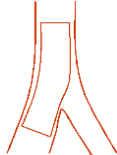
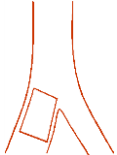
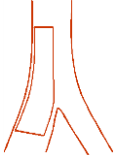

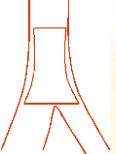
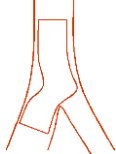
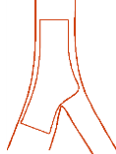
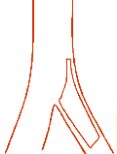

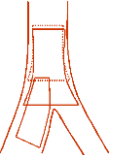
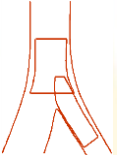
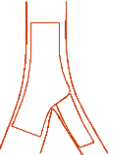
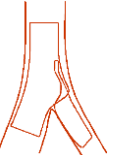
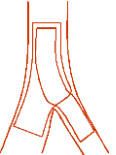
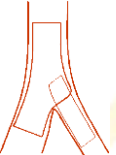
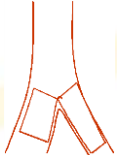
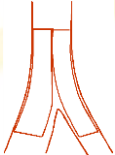
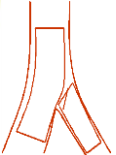
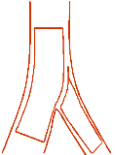
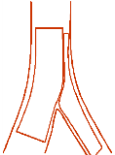
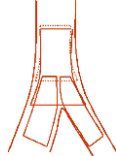
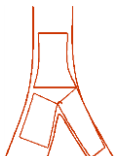


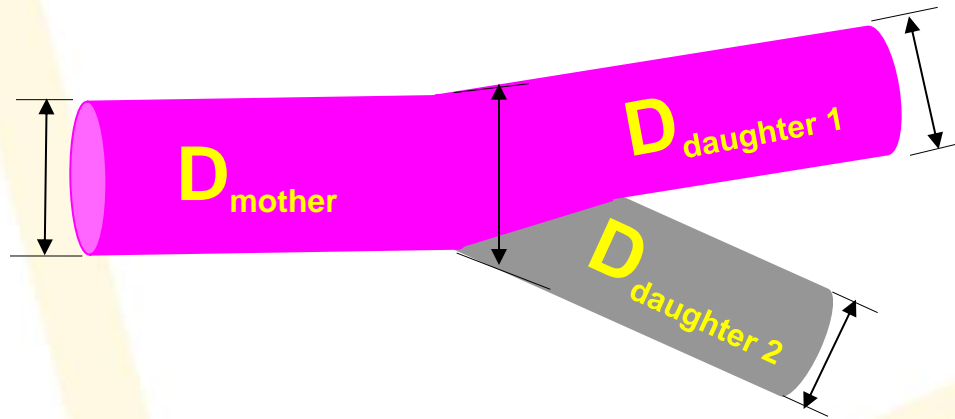
Figure 1. Description of the Medina classification of bifurcation lesions.



Proposed by Yves Louvard and named MADS by Ran Kornowski

Intention	M	A	D	S
Final	Main prox. first	Main Across side first	Distal first	Side branch first
1st stent	 <p>PM stenting</p>	 <p>MB stenting across SB</p>	 <p>DM stenting</p>  <p>Provisional SKS</p>	 <p>SB ostial stenting</p>
After balloon	 <p>Skirt</p>	 <p>MB stenting + SB balloon</p>  <p>MB stenting + kissing</p>		 <p>SB minicrush</p>  <p>SB crush</p>
2 stents	 <p>Skirt + DM</p>  <p>Skirt + SB</p>	 <p>Elective T stenting</p>  <p>Internal crush</p>  <p>Culotte</p>  <p>TAP</p>	 <p>V stenting</p>  <p>SKS</p>	 <p>Syst. T Stenting</p>  <p>Minicrush</p>  <p>Crush</p>
3 stents	 <p>Extended V</p>		 <p>Trousers legs and seat</p>	

Finet's adaption of Murray's law



*On the design of the coronary arterial tree:
a generalization of Murray's law*

$$D_{\text{mother}} = 0.67 * (D_{\text{daughter 1}} + D_{\text{daughter 2}})$$



“Simpler is better”

Provisional stenting of side branch

“...beginning by stenting the main vessel across the side branch, and then allowing techniques like provisional T, elective T stenting, classical Culotte ...It is also the strategy for the most frequently used dedicated stents (Petal, Minvasys, Frontier, Invatec...)”

Y Louvard 2008

Supported by BBC 1 and Nordic 1 and advocated by EBC

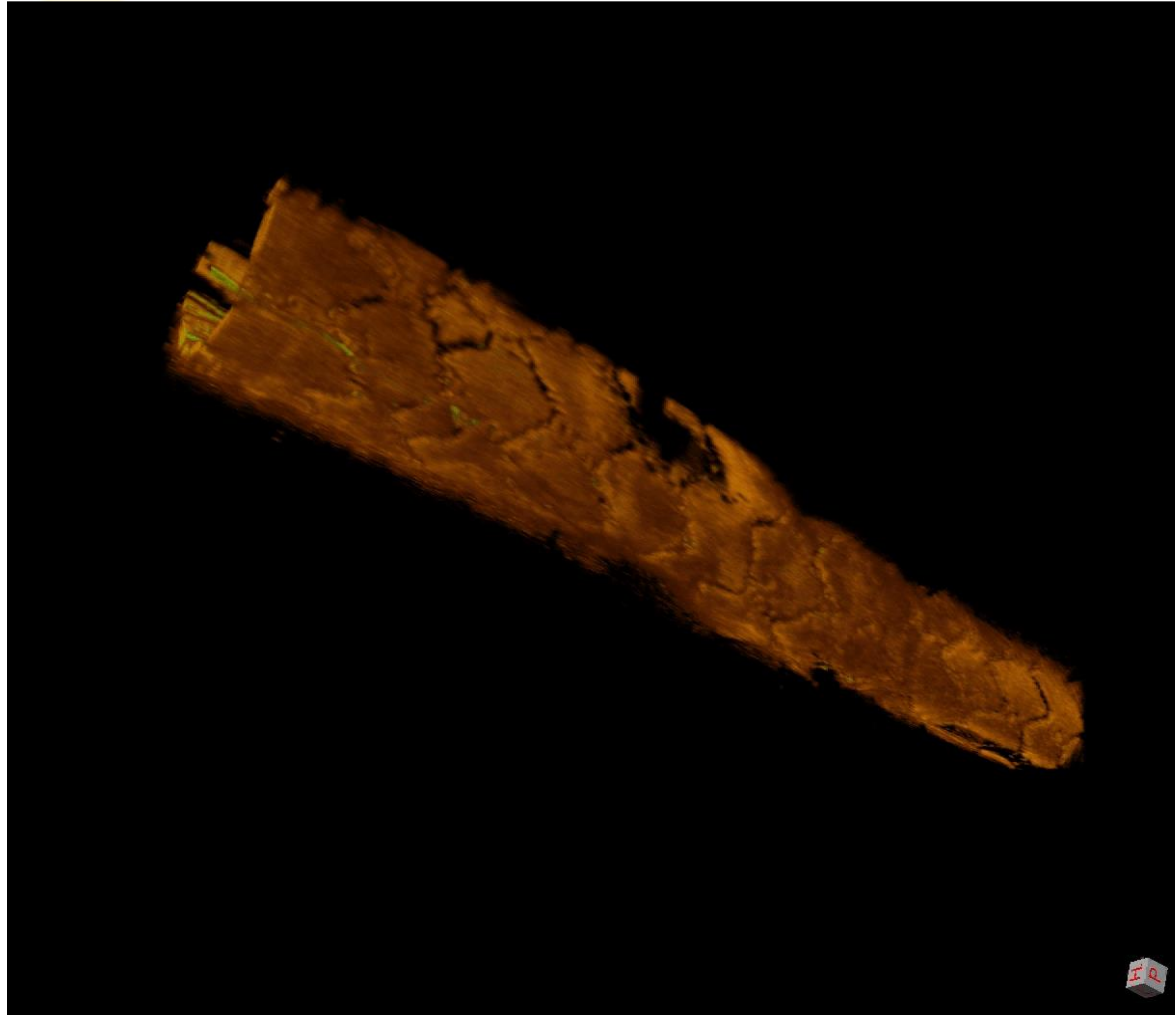


POT, the proximal optimisation technique (devised by O. Darremont)

Consensus 2009:

- The POT technique should be used in any case of difficulty recrossing into a side branch with either a wire or balloon.

3D-OCT after proximal high pressure balloon inflation





EBC-TWO Trial.

- “A non-political, independent and informal club, promoting open discussion, exchange of ideas and development of collaborative research.”**
- One versus two stents in bifurcation with large side branches.**
 - Planned patient level meta analysis With BBC1, NORDIC one, Nordic IV and EBC TWO**



EBC-TWO Trial

Very few (20) patients to go before study finalizing.

Make a effort to find them.

.. In order to be able to imbark on the next study soon.

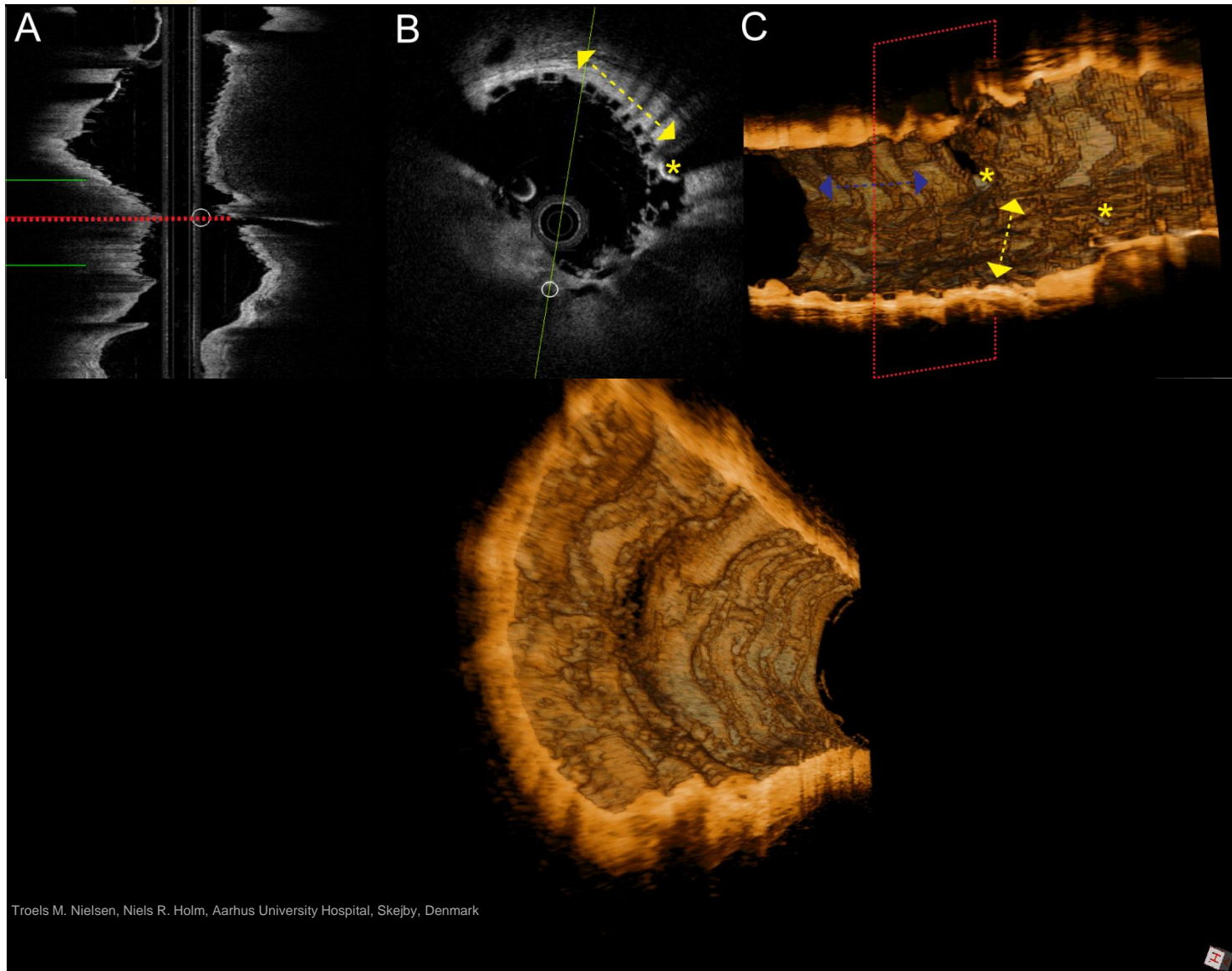


...And what will the future bring ??

What Will we focus on this year:

1. BVS for bifurcation treatment - search for a EBC consensus statement.
2. OCT Guided bifurcation stenting - the EBC consensus statement.
3. Left main dedicated stents.
4. New EBC – Trial.
5. - and a lot more.....:
 - Side branch evaluation (FFR)
 - Bifurcation stenting simulation
 - News
 - Long term- outcomes

BVS – Where to go ?





...And what will the future bring ??

- Will new evidence published since last year change the current EBC consensus?
- Will presentations during this meeting change the current EBC consensus?

There are still so much to discuss.....

**Enjoy the 2013 discussions and
Thank you for your attention**

European Bifurcation Club

