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i2 SUMMIT

DRUG-ELUTING STENTS FOR THE TREATMENT OF LEFT MAIN CORONARY ARTERY DISEASE WITH SIROLIMUS, PACLITAXEL, ZOTAROLIMUS, BIOLIMUSA9, EPC CAPTURE AND EVEROLIMUS-ELUTING STENT: MULTICENTER REGISTRY IN ASIA

i2 Oral Contributions
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Aim: The aim of this study is to compare the safety, efficacy and durability of Sirolimus (SES), Paclitaxel (PES), Zotarolimus (ZES), BiolimusA9 (BES), EPC capture (ECS) and Everolimus-eluting stent (EES) on the outcome of patients with left main coronary arteries (LMT) stenosis.

Methods: A prospective analysis of 676 patients with 628 LMT stenosis (248 SES, 172 PES, 104 ZES, 60 BES, 42 ECS, 50 EES) in six high volume Asian centers after successful stenting in LMT stenosis was performed. The study endpoints were 30 days and 9 months major adverse cardiac events (MACE), 9 months angiographic restenosis and target lesion revascularization (TLR) in those 4 groups and 24 months MACE in SES and PES groups.

Results: See table for clinical results.

Conclusion: The use of drug-eluting stents in patients with LMT stenosis was safe with low acute complication. Patients treated with SES, BES and EES showed lesser rate of restenosis compared with other drug-eluting stents.

	SES	PES	ZES	BES	ECS	EES
Number of patients	248	172	104	60	42	50
Procedural success (%)	100	100	100	100	100	100
MACE at 30 days (%)	0	0	0	0	0	0
Proximal reference diameter (mean: mm)	3.6	3.5	3.5	3.7	3.7	3.5
Stenting procedure: culotte/single/mini-crush	75/87/86	52/40/80	36/39/29	8/32/20	10/29/3	4/30/16
Minimum lumen diameter at post(mean: mm)	3.5	3.5	3.3	3.5	3.5	3.4
Minimum lumen diameter at 9 mo. (mean: mm)	3.4	3.0	2.9	3.4	3.1	3.3
Restenosis rate at 9 months (%)	7.3*	9.9	16.3	6.7*	16.7	6.0*
TLR at 9 months (%)	6.0*	8.7	14.4	6.7*	14.3	6.0*
MACE at 2 years (%)	6.0*	8.7	14.4	6.7*	14.3	6.0*
*p<0.05 vs. ZES, ECS						