TWO-YEAR PATIENT-RELATED VERSUS STENT-RELATED OUTCOMES FROM THE SORT OUT IV TRIAL

i2 Poster Contributions
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Authors: Lisette Okkels Jensen, Per Thayssen, Michael Maeng, Hans-Henrik Tilsted, Knud Hansen, Anne Kaltoft, Evald Christiansen, Henrik Hansen, Jan Ravkilde, Morten Madsen, Leif Thuesen, Jens Lassen, Odense University Hospital, Odense, Denmark

Background: Among drug-eluting stents released to date, the everolimus-eluting and the sirolimus-eluting stents have demonstrated the least amount of late lumen loss. There is, however, limited head-to-head randomized data on the patient-related versus stent-related outcomes for these stent types.

Methods: The Scandinavian Organization for Randomized Trials with Clinical Outcome IV trial was a randomized multicenter, open-label, all-comer, two-arm, non-inferiority trial comparing the everolimus-eluting stent with the sirolimus-eluting stent in patients with coronary artery disease. Safety and efficacy outcomes at 2 years were assessed with specific focus on patient-related composite (all death, all myocardial infarction (MI), or any revascularization) and stent-related composite outcomes (cardiac death, target vessel MI, or ischaemia-driven target lesion revascularization).

Results: 1,390 patients were assigned to receive the everolimus-eluting stent, and 1,384 patients were assigned to receive the sirolimus-eluting stent. At 2-year the patient-related outcome: 202 [15.0%] patients treated with the everolimus-eluting stent versus 211 [15.6%] patients treated with the sirolimus-eluting, (Hazard Ratio (HR) 0.95, 95 % confidence interval (CI) 0.78-1.15), and the stent-related outcome: 70 [5.2%] patients treated with the everolimus-eluting stent versus 72 [5.3%] patients treated with the sirolimus-eluting (HR 0.97, 95 % CI 0.70-1.35) did not differ between groups. Stent-related outcomes constituted 35% and 34% of all patient-related outcomes for everolimus- and sirolimus-eluting stents, respectively.

Conclusion: At 2-year follow-up, the everolimus-eluting stent was found to be non-inferior to the sirolimus-eluting stent with regard to both patient-related and stent-related clinical outcomes. Stent-related outcomes constituted one-third of patient-related outcomes for both stent types.