COMPARISON OF THE EFFICACY AND SAFETY OF PACLITAXEL-ELUTING COROFLEXTM PLEASE STENT VERSUS PACLITAXEL-ELUTING STENT IN PATIENTS WITH CORONARY ARTERY DISEASE: THE PIPA RANDOMIZED CONTROLLED TRIAL

i2 Poster Contributions
Ernest N. Morial Convention Center, Hall F
Monday, April 04, 2011, 9:30 a.m.-10:45 a.m.

Session Title: PCI - DES III
Abstract Category: 16. PCI - DES (clinical/outcomes)
Session-Poster Board Number: 2508-536

Authors: Young-Hak Kim, Hyun-Sook Kim, Duk-Woo Park, Sang-Sig Cheong, Bong-Ki Lee, Seung-Wook Lee, Keun Lee, Nae-Hee Lee, Sang-Gon Lee, Chang Hoon Lee, Ki Won Hwang, Gyung-Min Park, Yong-Giun Kim, Jung-Min Ahn, Hae Geun Song, Won-Jang Kim, Jong-Young Lee, Soo-Jin Kang, Seung-Whan Lee, Cheol Whan Lee, Seong-Wook Park, Seong-Jung Park, Division of Cardiology, University of Ulsan College of Medicine, Asan Medical Center, seoul, South Korea

Background: Currently, it is now time for the development of the next generation of drug-eluting stents (DES) to guarantee more safe and efficient profile as compared to the first generation of DES. We compared the efficacy and safety of the new paclitaxel-eluting stents (CoroflexTM Please), compared with first-generation paclitaxel-eluting stents for coronary revascularization.

Methods: We performed a single-blind, multicenter, prospective randomized trial to compare the safety and efficacy of the CoroflexTM Please stent and TAXUS stent in patients with de novo coronary disease. The primary end point was an in-segment late luminal loss at 9-month follow-up angiography. Clinical events were also monitored for at least 12 months.

Results: A total of 319 patients were randomized 1:1 to received CoroflexTM Please stent (n=159) and paclitaxel-eluting stent (n=160). At 9 month, the primary end-point of in-segment late loss was similar in patients receiving CoroflexTM Please stent and in those receiving Taxus stent (0.40±0.38 and 0.39±0.38, P=0.98). The rate of angiographic in-segment restenosis was also similar between 2 groups (22.2% and 18.8%, P=0.48). There were no significant between-group differences in the rate of death from cardiac causes, any myocardial infarction, or revascularization. The rate of definite or probable stent thrombosis was 0.6% in the CoroflexTM Please stent group and 1.3% in the Taxus stent group (P=0.99).

Conclusions: During 1 year of follow-up, the newer-generation paclitaxel-eluting CoroflexTM Please stent was found to be noninferior to early generation paclitaxel-eluting stent for coronary revascularization.