Coronary revascularization and a generalized estimating equation model was used to determine the interaction with restenosis.

Results: Patients in the lowest creatinine clearance group were older, had a greater proportion of women, and had more diabetes. At 30 days, there was no difference in adverse events between those in the lowest, middle, and highest creatinine clearance groups in terms of myocardial infarction (1% vs. 0%, vs. 0%, p=0.33), death (0%, vs. 0%, vs. 0%, p=0.06), or target vessel revascularization (1% vs. 1%, vs. 1%, p=0.28) respectively. At 9 months, mortality and non-fatal myocardial infarction in the lowest creatinine clearance group (n=1 vs. 1% vs. 1% vs. p=0.001), but myocardial infarction and target vessel revascularization were not different. In patients undergoing protocol follow-up angiography (n=2,556), restenosis was not increased with CKD (22% vs. 22% vs. 21%, p=0.13). 10/00 a.m.

1075MP-169 Oral Sirolimus to Prevent Restenosis After Stenting of Native Coronary Lesions

Gustavo P. Costantini, Daniel Zarutis, 3mgh Tebeline, Rubens Daruicul, Joyce L. Lazarte, Costantini O. Costantini, Mari Maranhao, Manuel Andrade, Maria R. Oliveira, Luis Sabatini, Gilson Yared, Marco Bubna, Marco Mediero, Lauro Rubbbini, Marcello Freitas, Clinica CardioCreta C. Costantini, Curitiba, Brazil

Background: Sirolimus-eluting stents have been shown to significantly lower in-stent restenosis rates compared to balloon angioplasty and bare-metal stents. However, concerns about the long-term effects of systemic exposure to sirolimus have led to the development of oral sirolimus for use after percutaneous coronary intervention (PCI). We hypothesized that oral sirolimus could provide long-term antirestenotic effects in vivo.

Methods: From 11/2001 to 8/2002, 22 CN coronary lesions underwent stent PCI in 20 pts. Treatment with oral sirolimus was started with a loading dose of 6mg before PCI followed by 2mg/day for 14 days. Before PCI, at 10 days, 1 and 6 months pts were clinically and angiographic results will be ready at presentation.

Results: The mean age was 64±7 years, 75% were men and 20% had diabetes. Baseline mean reference diameter was 3.18±0.35mm, MLD was 1.00±0.24 and DS 65%. 22 BX stents were implanted guided by IVUS with a mean pressure of 17.2±2.1atm. Angiographic success was 100% with a final MLD of 3.1±0.6 and DS of 0.9±...