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## Vascular Medicine

## IMPACT OF RUNOFF SCORE FOR THE OUTCOME FOLLOWING ENDOVASCULAR THERAPY IN SMALL FEMOROPOPLITEAL DISEASE

Poster Contributions

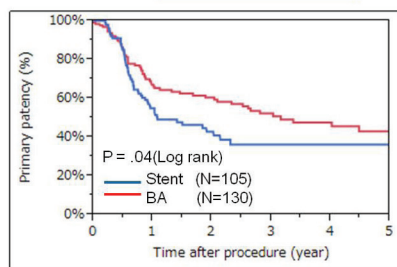
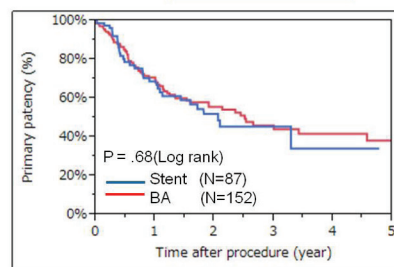
Hall C

Monday, March 31, 2014, 9:45 a.m.-10:30 a.m.

Session Title: Outcomes for Intervention in PAD and Aortic Aneurysms: Endovascular Therapy

Abstract Category: 31. Vascular Medicine: Endovascular Therapy

Presentation Number: 1253-86

Authors: *Norihiko Kamioka, Yoshimitsu Soga, Kokura Memorial Hospital, Kitakyushu, Japan***Background:** Impact of runoff score for the outcome after endovascular therapy (EVT) in small vessel of femoropopliteal (FP) disease is unclear.**Methods:** From January 2004 to April 2013, 1150 consecutive patients (1406 limbs) who had undergone their first EVT in FP lesions were enrolled. In this study, 402 cases (474 limbs) were analyzed; 192(40.5%) were implanted the self-expanding nitinol stent, 282(59.5%) were balloon angioplasty (BA) alone. We evaluated primary patency for the primary outcome and secondary patency, assisted-primary patency and major adverse limb events (MALE) for the secondary outcome according to runoff score; better runoff was defined as above 1, and poor runoff as 1 or less.**Results:** The mean reference vessel diameter was  $3.9 \pm 0.5$  mm and the mean lesion length was  $86.2 \pm 75.9$  mm. In the better runoff group, BA group had a better result in the primary, secondary and assisted-primary patency than stent group (42.9% vs 36.1% at 5-year,  $P=.04$ ; 86.8% vs 73.5% at 5-year,  $P=.0003$ ; 58.5% vs 48.4% at 5-year,  $P=.03$ , respectively). On the contrary, there was no significant difference with those outcomes between the two groups in the poor runoff group. The independent predictors of primary patency were female gender, diabetes, hemodialysis, history of coronary artery bypass grafting, non-administration of cilostazol, and lesion length ( $\geq 63.2$ mm).**Conclusion:** In this study, BA alone was suggested to contribute to better patency than stent implantation for the small FP lesion with better runoff.Primary Patency(RVD $\leq$ 4.5mm)Runoff > 1Runoff  $\leq$  1

	0	1	2	3	4	5		0	1	2	3	4	5	
Stent	No. at risk	105	48	23	9	5	4	No. at risk	87	39	18	6	2	1
	%	100.0	55.0	42.9	36.1	36.1	36.1	%	100.0	68.8	52.0	45.5	34.1	34.1
	SE	-	0.05	0.07	0.06	0.06	0.06	SE	-	0.06	0.07	0.1	0.1	0.1
BA	No. at risk	130	75	57	35	26	13	No. at risk	152	80	45	23	18	12
	%	100.0	67.2	60.5	50.8	47.5	42.9	%	100.0	69.0	55.7	44.1	41.8	38.3
	SE	-	0.04	0.05	0.05	0.05	0.06	SE	-	0.04	0.05	0.05	0.06	0.06

Primary patency.

\* BA, balloon angioplasty; SE, standard error.