

61st Annual Scientific Session & ExpoACC-i2 with TCT
Innovation in Intervention

E321

JACC March 27, 2012

Volume 59, Issue 13



ACC-i2 with TCT

STENT THROMBOSIS: INSIGHTS ON OUTCOMES, PREDICTORS AND IMPACT OF DUAL ANTIPLATELET THERAPY INTERRUPTION FROM THE SPIRIT II, SPIRIT III, SPIRIT IV AND COMPARE TRIALS

i2 Oral Contributions

McCormick Place South, S101a

Sunday, March 25, 2012, 11:15 a.m.-11:25 a.m.

Session Title: Drug-eluting Stents

Abstract Category: 16. PCI - DES (clinical/outcomes)

Presentation Number: 2506-9

Authors: *Elvin Kedhi, Gregg Stone, Dean Kereiakes, Patrick Serruys, Helen Parise, Martin Fahy, Charles Simonton, Krishnan Sudhir, Poornima Sood, Pieter Smits, Maasstad Hospital, Rotterdam, The Netherlands*

Background : Recent studies have suggested that everolimus-eluting stent (EES) may reduce ST compared to paclitaxel-eluting stent (PES), but no individual trial has been adequately powered to give insights on incidence and predictors of stent thrombosis, as well as the impact of dual antiplatelet therapy (DAPT) discontinuation during the first 2 years.

Methods: Pooled patient-level data from the SPIRIT II, SPIRIT III, SPIRIT IV and COMPARE trials (n=6,789 patients) were analyzed. Two-year ST rates were calculated using time-to-event methods and compared with the log-rank test. ST rates were also determined after DAPT discontinuation.

Results: EES compared to PES significantly reduced the 2-year rates of ST (0,7 % versus 2,3 % , p=0,0001), including the interval rates of ST up to 30 days (0,2 % versus 1,0 % , p<0,0001), between 31 days and 1 year (0,2 % versus 0,6 % , p=0,02), and after 1 year (0,3 % versus 0,8 % , p=0,001). EES also reduced the 2-year composite rate of cardiac death or MI (4,0 % versus 6,6 % , p=0,0001). Increased rates of ST after DAPT discontinuation beyond 6 months were observed in the PES cohort, but not in the EES cohort.

Conclusions: In this large pooled analysis from four randomised trials, treatment with EES compared to PES significantly reduced the rates of ST through 2 years of follow-up, with a concomitant reduction in cardiac death or MI. DAPT discontinuation beyond 6 months may be safe with EES.

Two-year Cumulative Definite/Probable Stent Thrombosis (ARC)
Landmark Analysis Beyond 6 Months

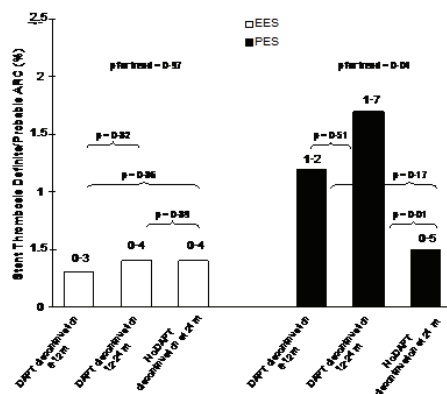


Figure 3