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## ASSOCIATION OF STENT THROMBOSIS AND PATTERNS OF NON-ADHERENCE TO ANTI-PLATELET REGIMENS IN STENTED PATIENTS: SIX MONTH RESULTS OF THE PARIS REGISTRY

i2 Poster Contributions McCormick Place South, Hall A Saturday, March 24, 2012, 9:30 a.m.-Noon

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**Background:** Dual anti-platelet therapy (DAPT: Aspirin + Thienopyridine) is a cornerstone of treatment for patients who present with acute coronary syndromes (ACS), and in patients undergoing percutaneous coronary intervention (PCI). Current guidelines call for prolonged DAPT for all pts undergoing PCI with a drug-eluting stent (DES), and shorter duration ( $\geq$  1 month) for all pts receiving a bare metal stent (BMS). While premature discontinuation of DAPT has been associated with an increased risk of stent thrombosis in previous studies, real-world patterns of adherence to DAPT prescription have not been characterized in detail, nor has relationship of DAPT non-adherence to other clinical outcomes been established.

**Methods:** The PARIS (Patterns of Non-Adherence to Anti-Platelet Regimens in Stented Patients) registry is a multi-center, multinational, prospective observational study that will follow subjects for 24 months after stent implantation, and will examine the features of non-adherence to DAPT following stenting.

Results: Among 5033 subjects, the mean age was 64 years, 74.5% were male, 40.9% presented with ACS, and 82% received a drug-eluting stent.

37.6% of subjects were on DAPT pre-procedure, and 99.6% were on DAPT at the time of discharge. At 30 days, the overall incidence of nonadherence was 2.1% (104 subjects, 147 episodes): disruption 69%, interruption 19%, and discontinuation 12%. Stent thrombosis (probable and definite per ARC definitions) was rare at 0.46%. Of the 26 pts with ST, 17 were definite ST, and 9 were probable ST. The rate of ST in adherent population was 0.46% (23/4929), compared to 2.9% (3/104) amongst the non-adherent group (OR: 6.3; 95% CI [1.9-21.4]). To date all pts have completed 6 month follow-up and all results including adjudicated adverse events will be presented.

**Conclusion:** In this real-world population of patients undergoing PCI with stent implantation, non-adherence to DAPT was low at 30 days. While the rate of ST at 30 days was low (0.46%), there was a strong association between non-adherence and ST. Complete 6 month data will be presented.