DES-Related In Stent Restenosis (ISR) – Treatment Modalities and Outcomes

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Background: The best therapeutic alternative for patients suffering from ISR after DES implantation remains to be established.

Goal: To explore the clinical outcome of pts with DES failure according to different treatment options.

Methods: A total of 141 Consecutive pts had restenosis after DES deployment. Demographic, Clinical and angiographic data were collected. We analyzed the pts outcomes after six month. Results: The majority of our pts had Cypher stents restenosis (74%) followed by Endeavor stents 16%. The mean time to restenosis was 15 ± 13 months. Unstable angina was the clinical presentation in 61% of pts, 12% had STEMI while 27% had stable angina syndrome. Mean age was 64 ± 11 years, 75% were male, and 60% had diabetes mellitus. 76% had two/ triple vessel coronary artery disease. Mean artery diameter was 3.0 ± 0.4 mm and total stents length was 22 ± 7.7 mm. Focal restenotic pattern was founf during angiography in 70% of cases.Pts outcomes according to the treatment options are presented in the Table:

6 Month Outcomes	Stent	PTCA	CABG	Conservative
	(N=90)	(N=32)	(N=13)	(N=6)
Death(%)	1.1	0	0	17
MI(%)	4.4	6.3	0	0
TVR(%)	13	16	0	17
MACE(%)	17	19	0	33

Outcomes were similar for re-stenting versus balloon angioplasty focal ISR cases after 6-12 months.

Conclusion: DES-related ISR is relatively infrequent but remains a major clinical challenge. There were no differences in outcomes whether the treatment was PTCA or re-stenting for focal ISR angiographic pattern.