ew Cobalt-Chromium Ultra-Thin Strut Stent: Feasibility, Vascular Compatibility and Safety Evaluation in Porcine Coronary Arteries

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Background: Stent-strut thickness is related to in-stent restenosis. Therefore, modern bare-metal stents (BMS) with lower strut thickness are in development. We sought to evaluate a new 'third-generation' BMS comprising an ultra-thin-strut, cobalt-chromium platform with fixed geometry and uniform cell sizes, in a clinically relevant animal model.

Methods: 36 BMS of two types were implanted in pig coronaries using quantitative coronary angiography (QCA) to optimize stent apposition: a commercially available cobalt alloy thin-strut stent (91 μ m) as control (n=18), and an ultra-thin-strut (65 μ m) cobalt-chromium stent (Protea CoCr; n=18). Animals underwent angiographic restudy and termination 1-wk and 1-mo post-implant for coronary artery histology. In addition, 12 overlapping Protea CoCr stents were analyzed at 1-mo.

Results: All stents deployed without difficulties. Thin neointima and mild inflammation was seen in both groups at 1-wk. For 1-mo, QCA % diameter stenosis was significantly less for Protea CoCr $(2\pm5\% \text{ vs. } 17\pm16\%, \text{ p=0.032})$. By histomorphometry, intima thickness $(0.11\pm0.05\text{mm vs.} 0.23\pm0.11\text{mm}, \text{p=0.003})$ and % area stenosis $(19\pm1\% \text{ vs. } 32\pm11\%, \text{ respectively, p=0.004})$ were also significantly lower for Protea CoCr. The strut injury score was low and similar between the two groups. QCA % stenosis; intima thickness; and % area stenosis of overlapping Protea CoCr were $3\pm3\%, 0.13\pm0.02\text{mm}, \text{ and } 22\pm4\%, \text{ respectively.}$ Stable fibrocellular neointimal incorporation of all stents including overlapped Protea CoCr, with complete endothelialization and minimal inflammation, was seen at one month.

Conclusions: Protea CoCr showed favorable arterial response with significant reduction of neointima formation compared to a commercial cobalt alloy BMS, one month post implant in pig coronary arteries. This ultra-thin-strut stent platform therefore appears to be a suitable and attractive alternative to current BMS. Combining the lower levels of neointima formation, fixed geometry, and uniform cell size, the Protea CoCr may be a preferred platform for next-generation drug-eluting stents.