

Real-life clinical outcomes with the use of an ultrathin sirolimus-eluting stent in Sweden: A report from the Swedish coronary angiography and angioplasty registry

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How was the study executed?



We sought to assess the performance of a **sirolimus-eluting ultrathin DES** (Orsiro, Biotronik AG, Bülach) in a large cohort of consecutive patients undergoing PCI in Sweden.

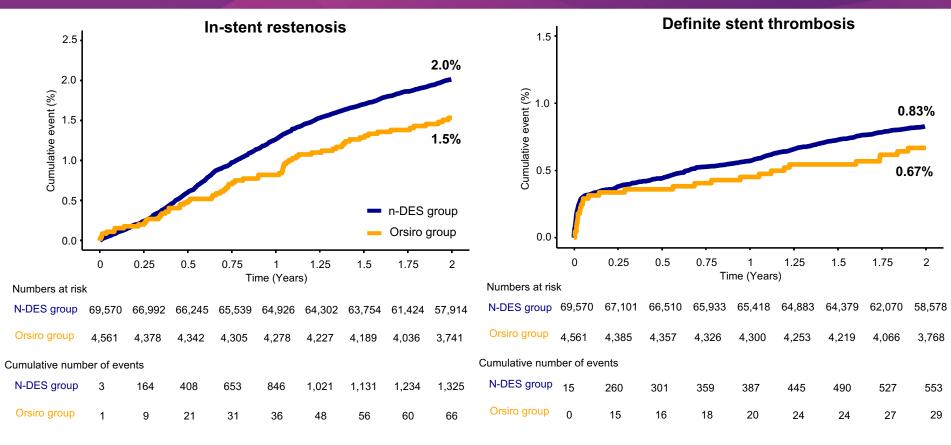
All patients in this study were registered in the Swedish Coronary Angiography and Angioplasty Registry (SCAAR).

SCAAR is a nationwide, prospective, multicenter registry which collects the clinical and procedural characteristics of *all* consecutive patients undergoing PCI in Sweden.

Outcomes of interest: all-cause death, myocardial infarction, definite stent thrombosis, clinically relevant restenosis and target lesion revascularization by PCI up to two years.



What are the essential results?



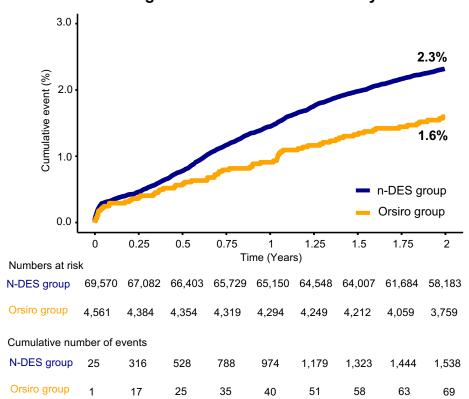
Adjusted HR 0.81, 95% CI 0.63-1.03; p=0.09

Adjusted HR 0.90, 95% CI 0.55-1.46; p=0.66



What are the essential results?

Target lesion revascularization by PCI



Adjusted HR 0.75, 95% CI 0.60-0.94; p=0.013



Why is this important?

To date, there is a paucity of data regarding the performance of **ultrathin DES in the real world.** Moreover, clinical outcomes beyond one year have not been systematically collected.

In this large nationwide analysis with a follow-up extended up two years, **Orsiro**, **a sirolimus-eluting ultrathin DES** was associated with low rates of definite stent thrombosis, numerically lower rates of in-stent restenosis and a significantly lower risk of target lesion revascularization as compared to other n-DES.

These findings corroborate the results of randomized clinical trials showing a potential incremental clinical benefit with ultra-thin metallic DES use during PCI.



The essentials to remember

Why?

There is a paucity of data regarding the performance of ultrathin DES platforms in the real world.

What?

This was a nationwide, registry-based analysis looking at the comparative performance of modern DES in the real world.

How?

We included a large cohort of consecutive patients undergoing PCI with modern generation DES in Sweden.

What are the results?

After addressing confounding, an ultrathin sirolimus-eluting DES use during PCI was associated with low rates of definite ST, restenosis and a significantly lower risk of target lesion revascularization by PCI.

Why is this important?

Our results corroborate the emerging evidence showing incremental benefits with ultrathin DES use during PCI.