

Symposium Boston

« Qui peut le plus peut le moins... »

E. Bressollette

Introduction

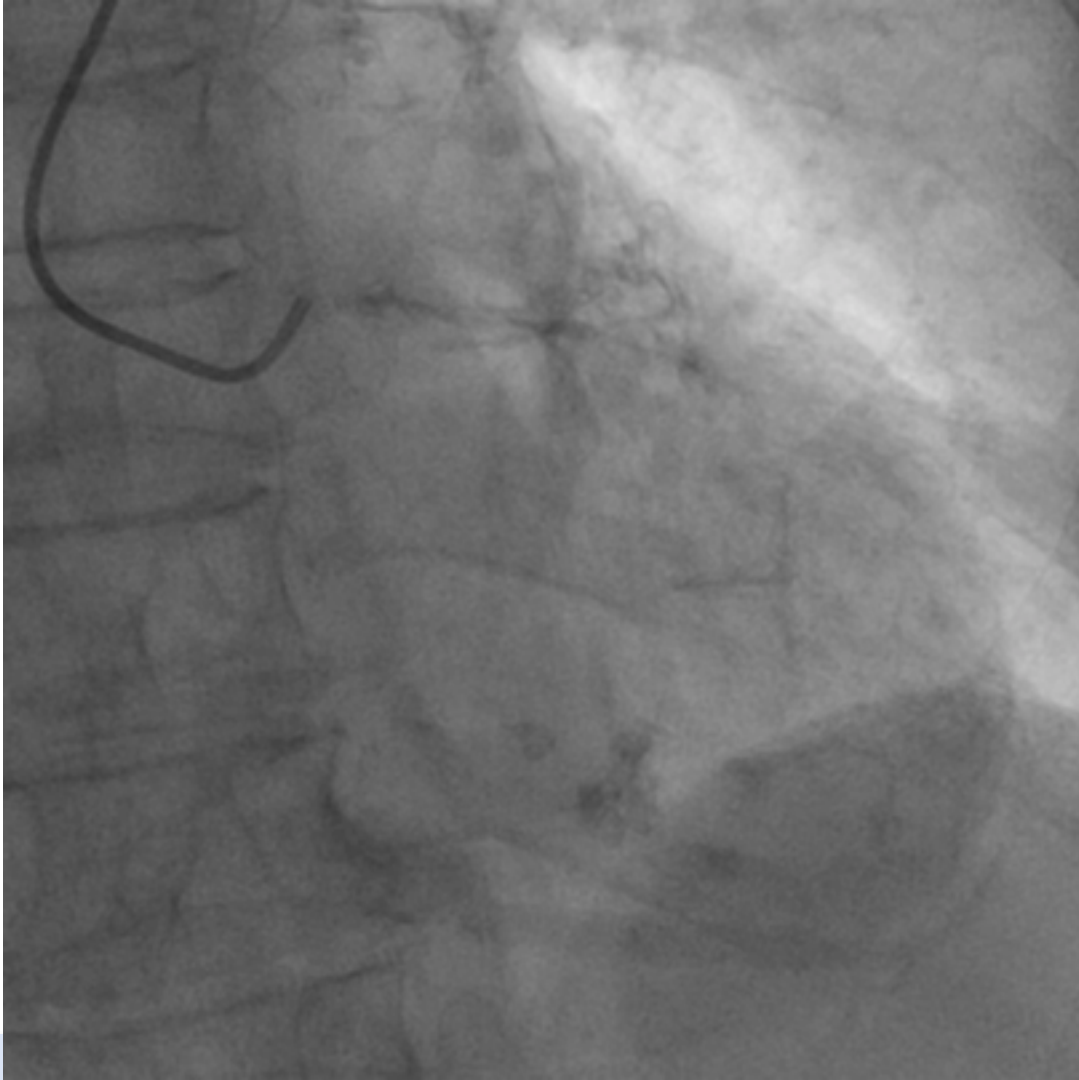
- But de la communication:
 - Autour d'un cas clinique
 - Partage d'expérience autour du Synergy
 - 3T: Tips, tricks & tools
 - Concept de « complex PCI »

Conflits d'intérêt

- Avec Boston: Proctor CTO Xboss/Stingray/rota
- Avec l'angioplastie: 15 ans de passion

Cas clinique

- Mme B... 86 ans
- OAP sur passage en FA rapide
- Pas d'Atcd connu de coronaropathie
- troubles cognitifs
- tropo = 147
- ECG= rs, sous dec diffus du ST sans séquelle IDM
- Echo: hypokinesie ant, pas de valvulopathie
- Coro=...

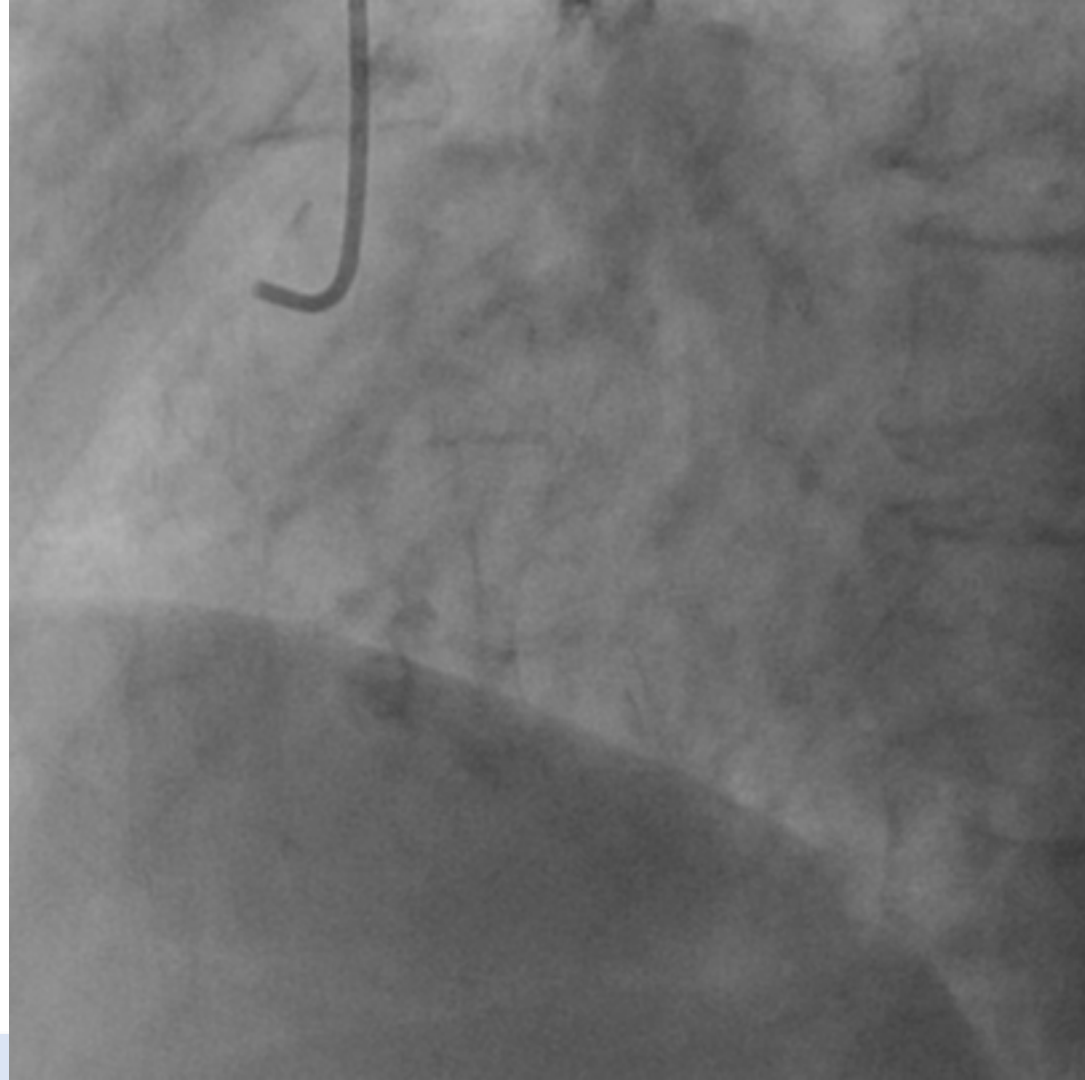


PALAIS
DES CONGRES
BIARRITZ
8/9/10
JUN 2016
www.appac.fr

APPAC
ASSOCIATION
FRANCAISE
DE
CARDIOLOGIE
EN PATHOLOGIE
CARDIOVASCULAIRE







Conduite à tenir

- Syntax score = 26
- evaluation geriatrique= « pas de CEC (troubles mnésiques) angioplastie si techniquement réalisable »

conduite à tenir

- après discussion collégiale
 - angioplastie TC-IVA
 - si possible IVA1
 - si possible Kissing TC-IVA-Cx (collat)
- « Faire au plus simple au plus vite »

Plan

- radiale G 6f
- pas de CP
- ouvrir au ballon TC distal
- ballon NC si besoin
- rota 1.25 prêt
- un guide, un ou deux stents
- « tolerance zero »

SYNERGY Stent Technology Design

Platinum Chromium Platform

- 74 μ m (0.0029in) strut thickness

- ↑ Visibility
- ↑ Strength
- ↑ Flexibility
- ↑ Conformability
- ↓ Recoil

Everolimus-Eluting

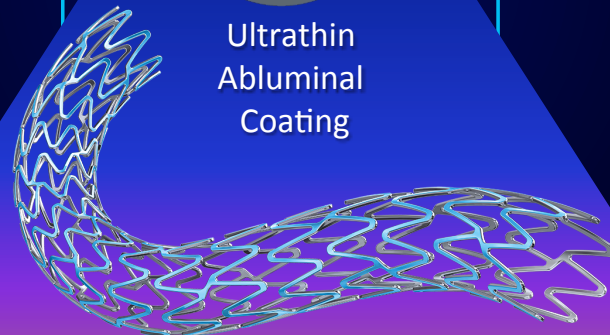
- 100 μ g/cm²
- 3 month release time

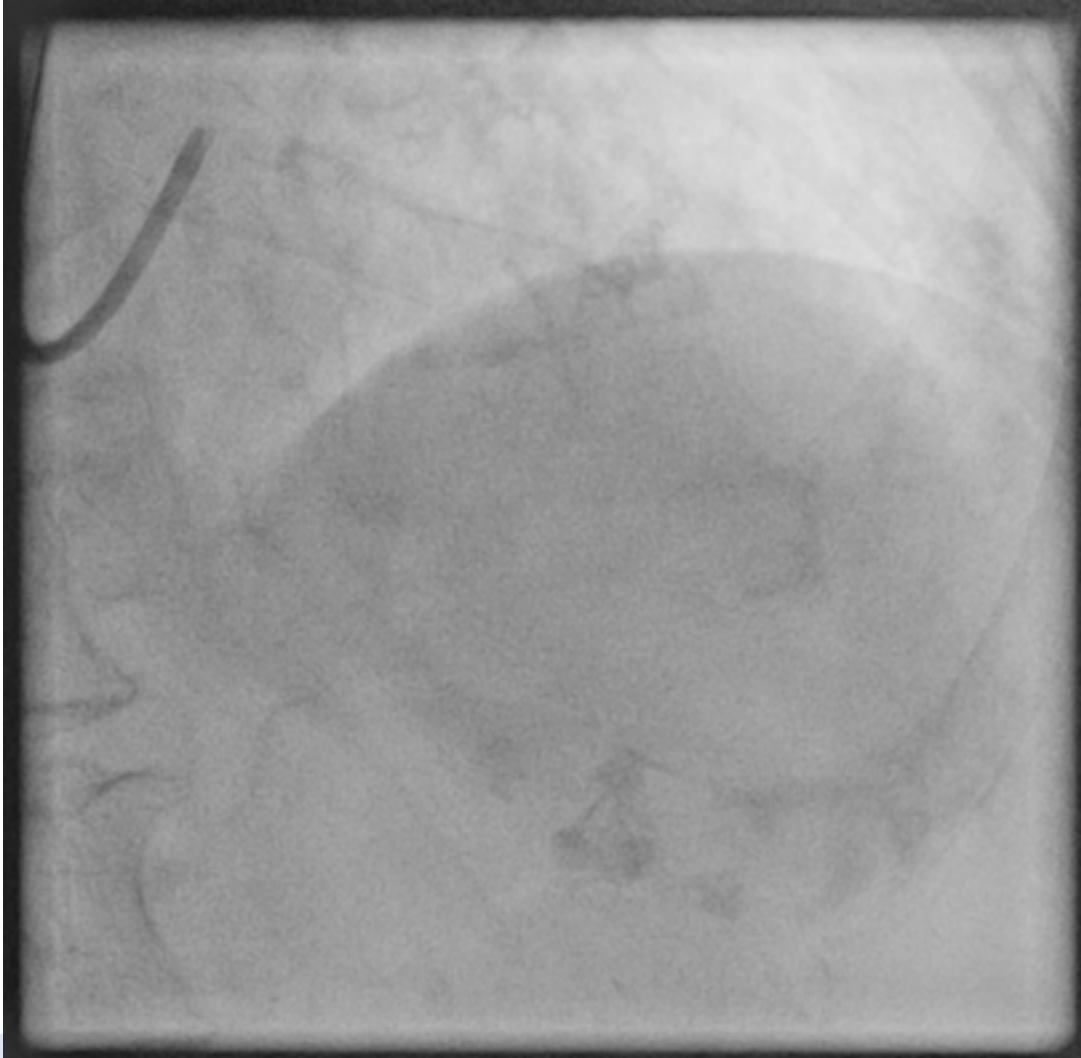


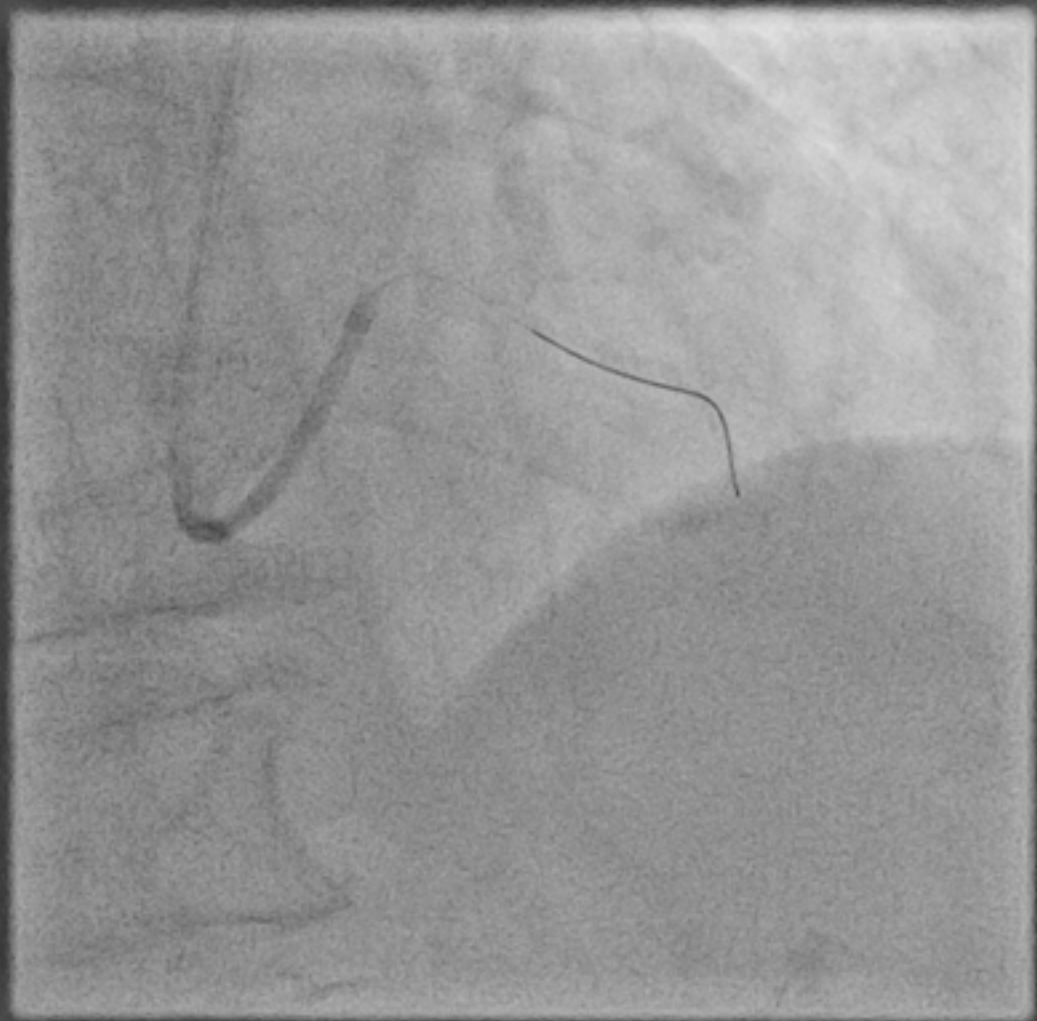
Ultrathin
Abluminal
Coating

Bioabsorbable Polymer Coating (PLGA)

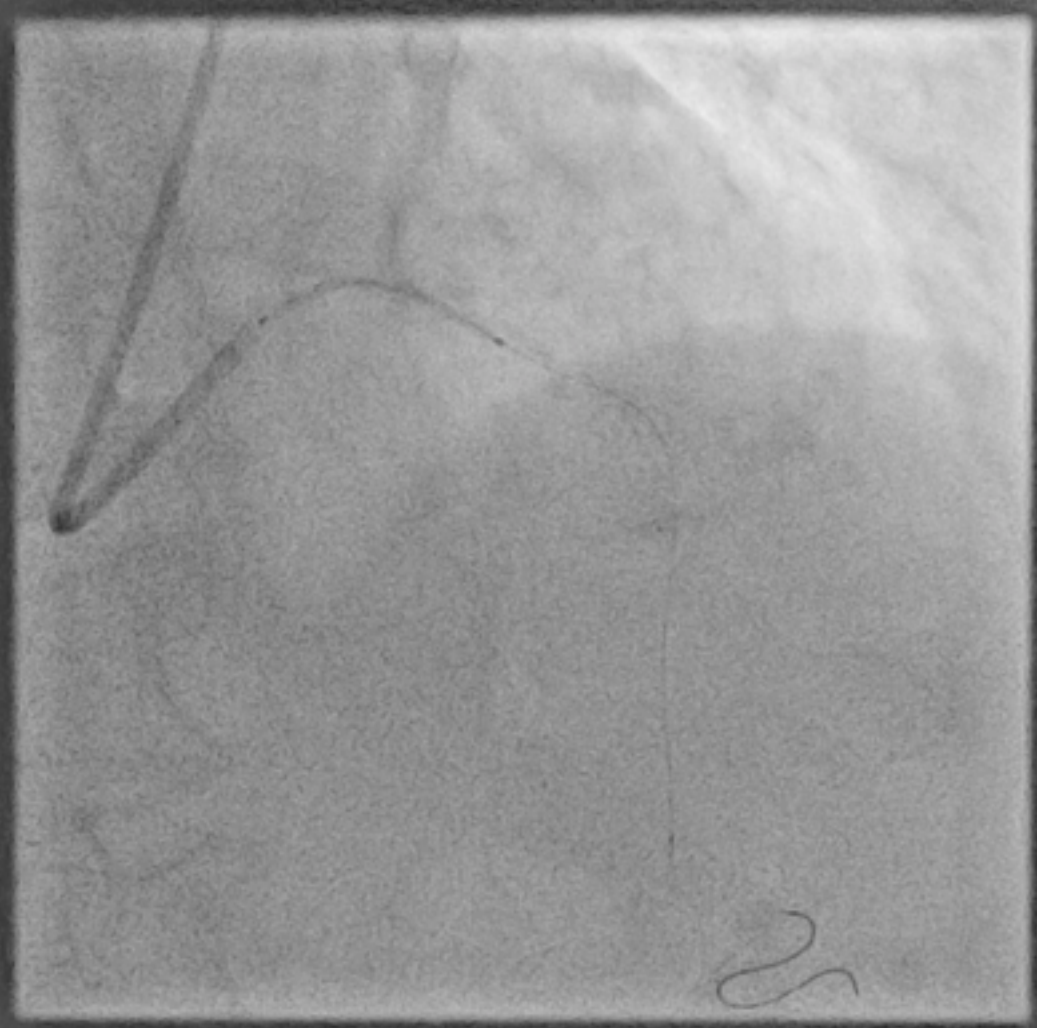
- Abluminal
- 4 μ m thick
- 85:15 ratio
- <4 month absorption time

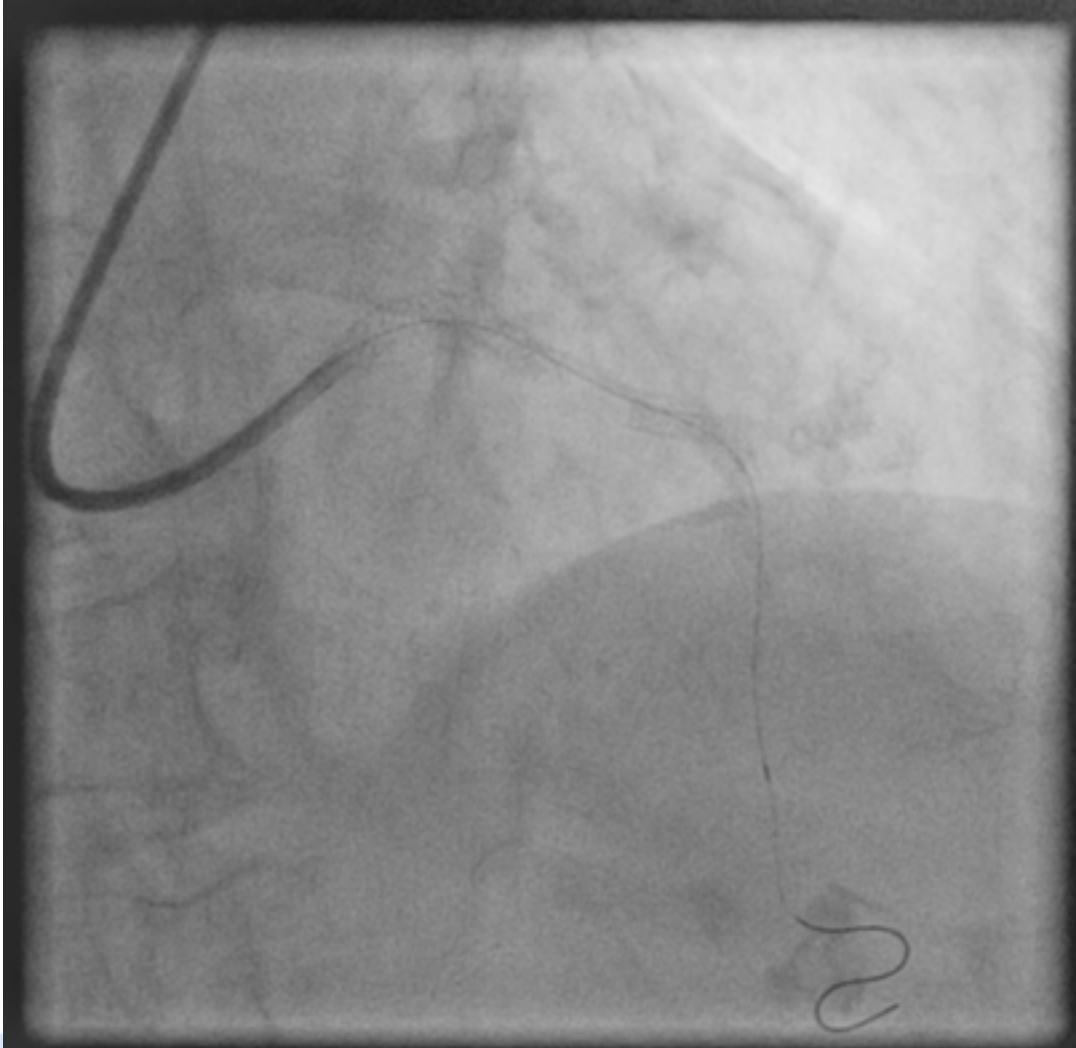






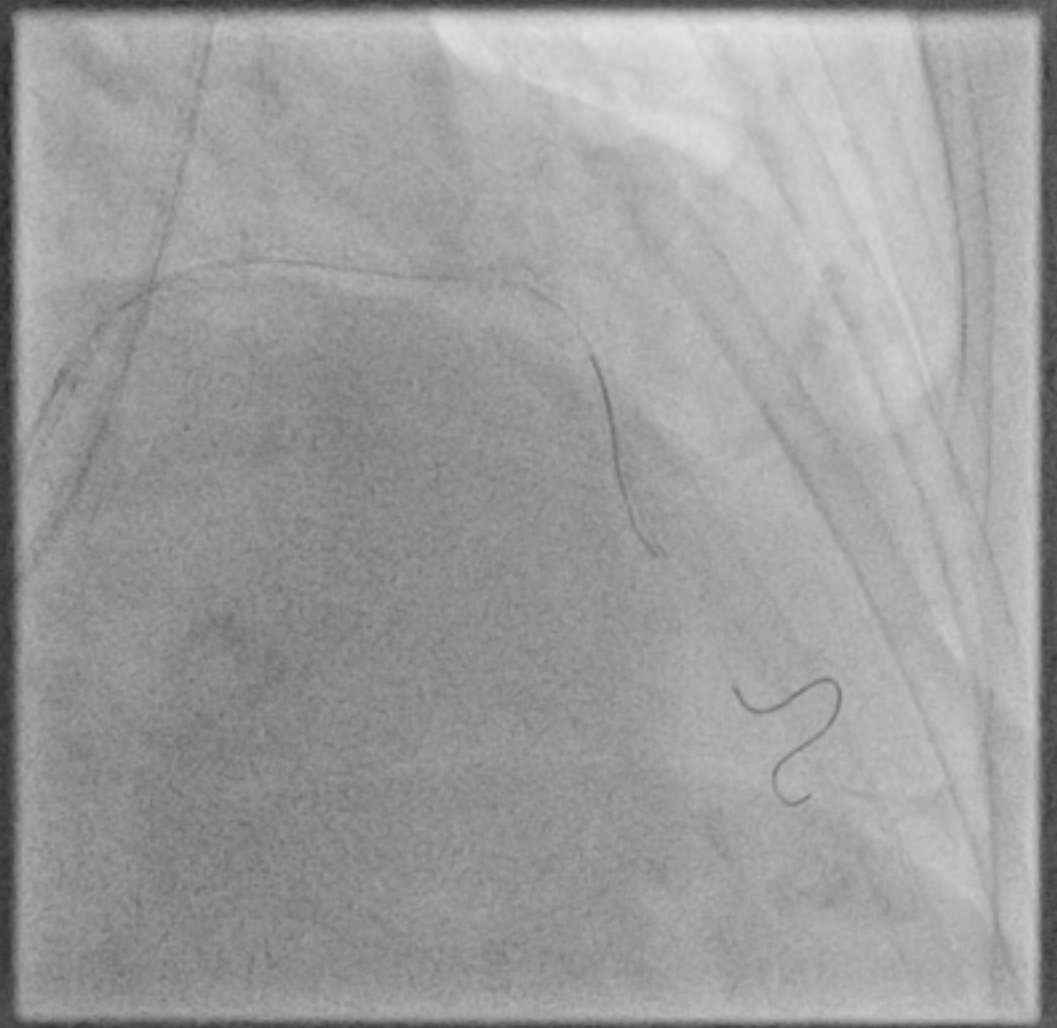




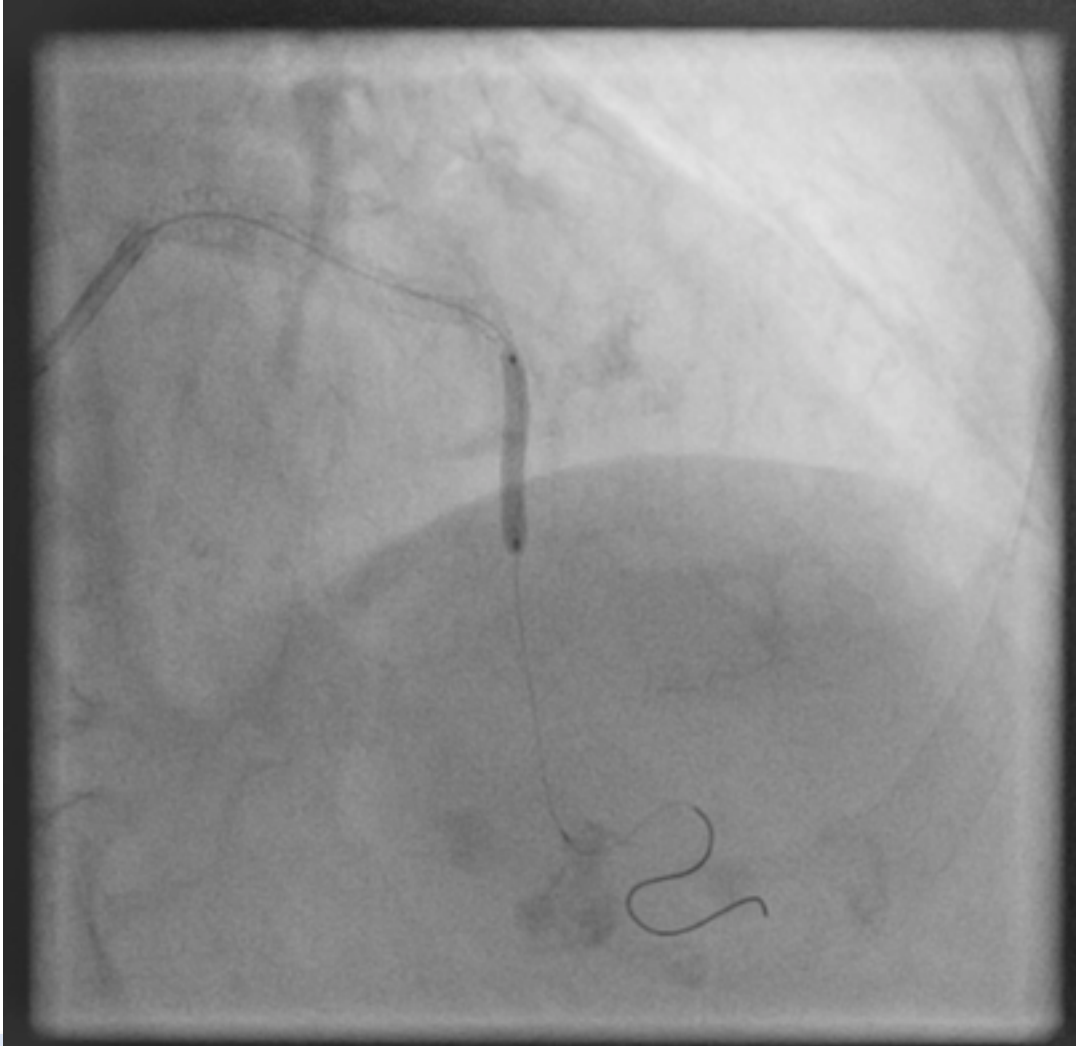


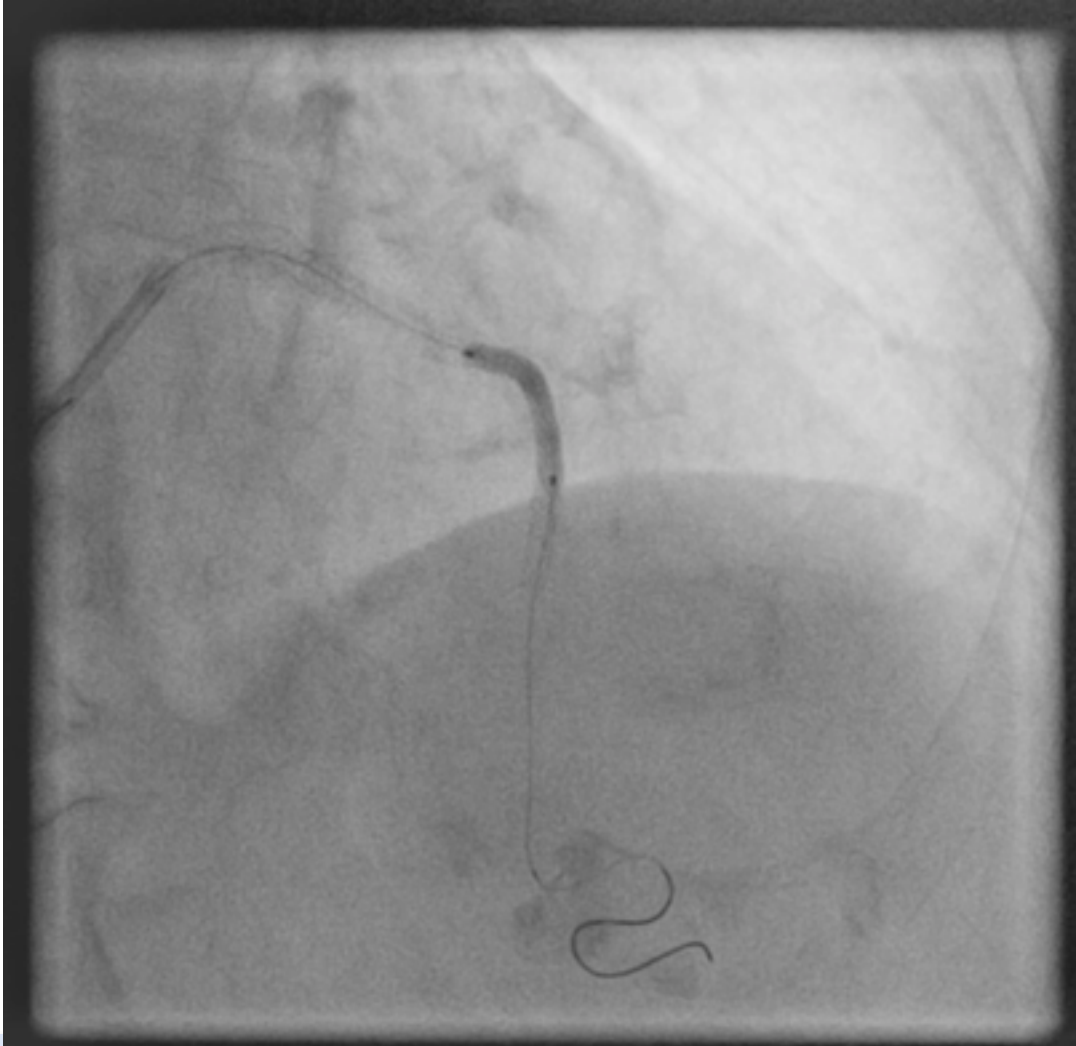
dissection

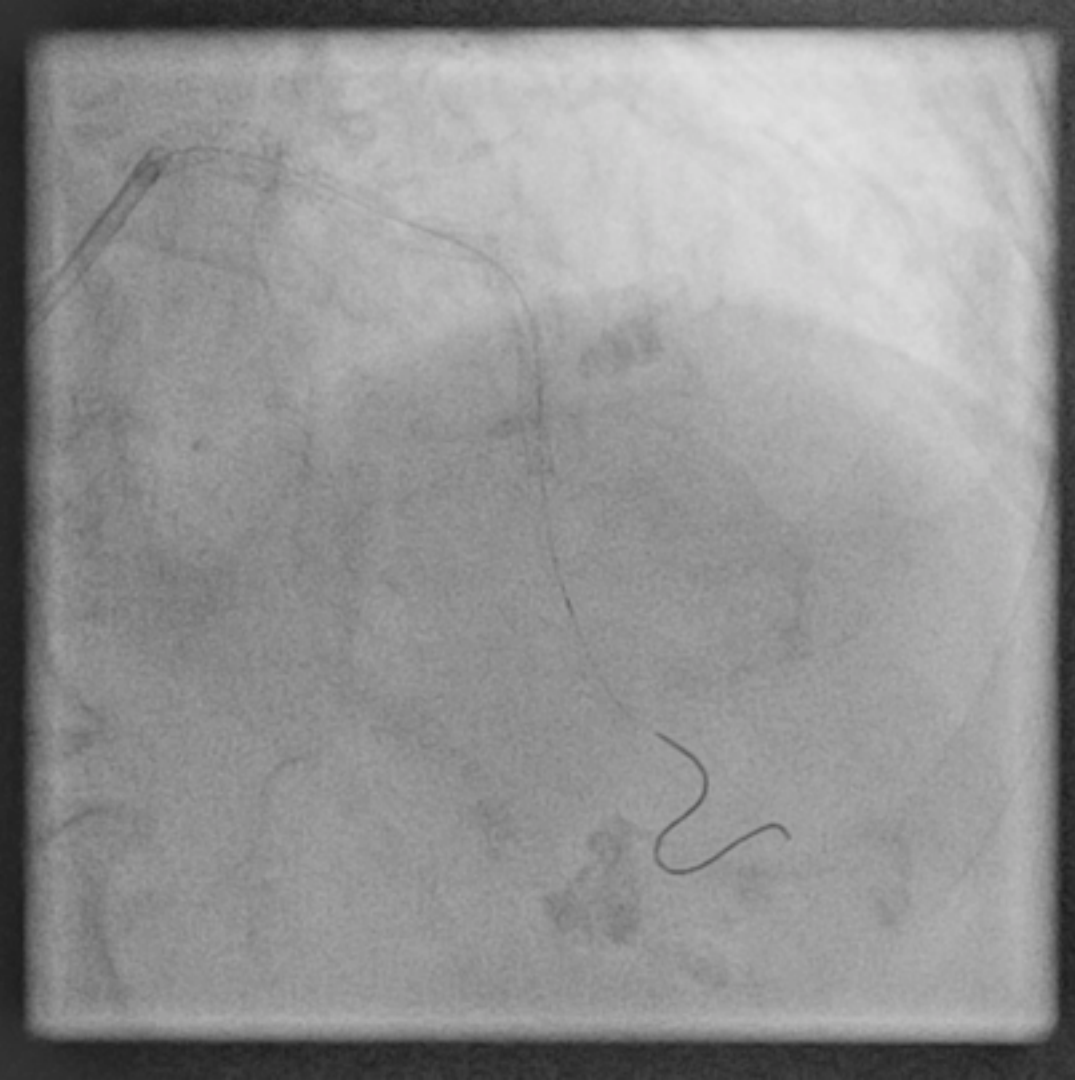
- echec de Synergy 2.25X16
- TIMI3, stabilite hémodynamique relative
- que faites vous?
 - j'appelle un ami
 - rien
 - autre stent?
 - augmente support (mother in child? ...???)

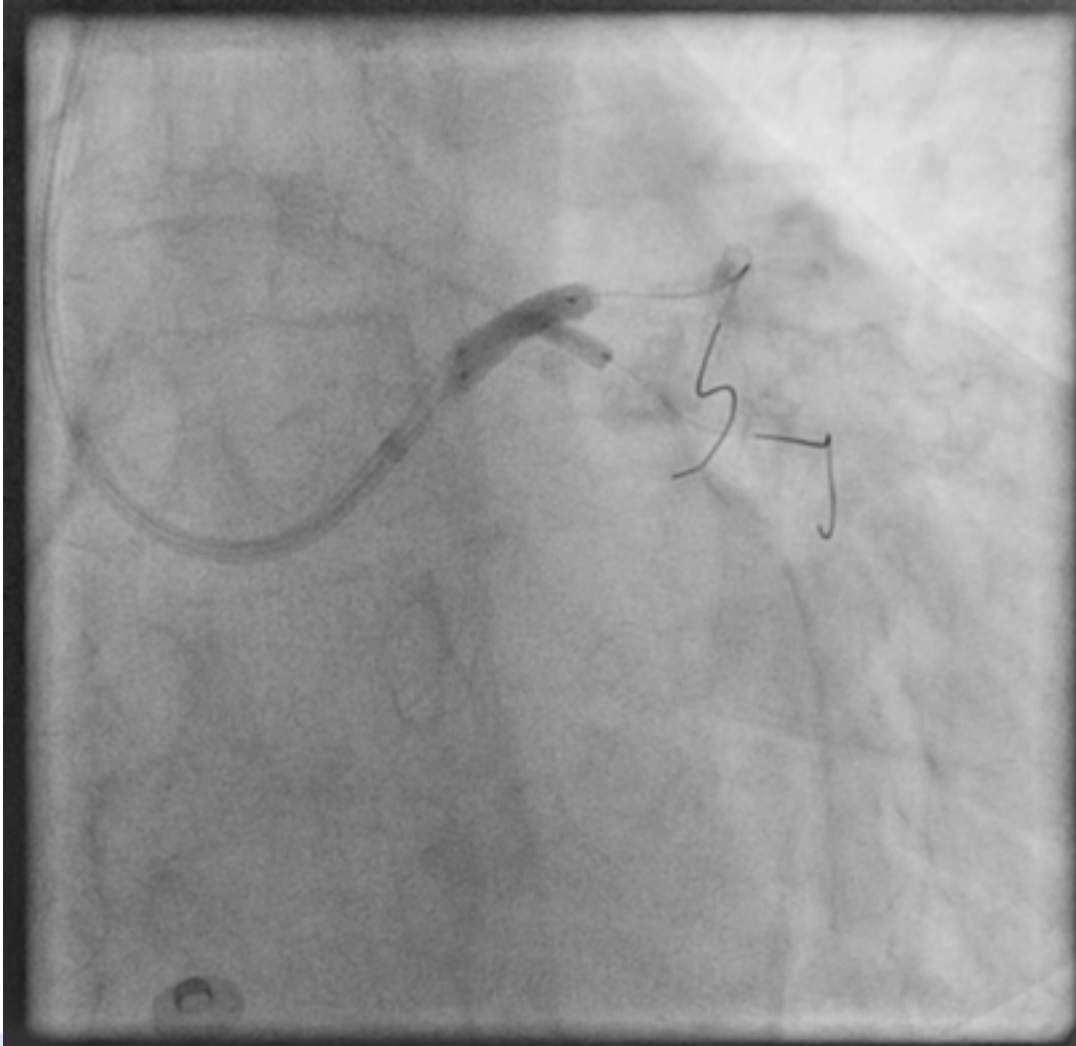


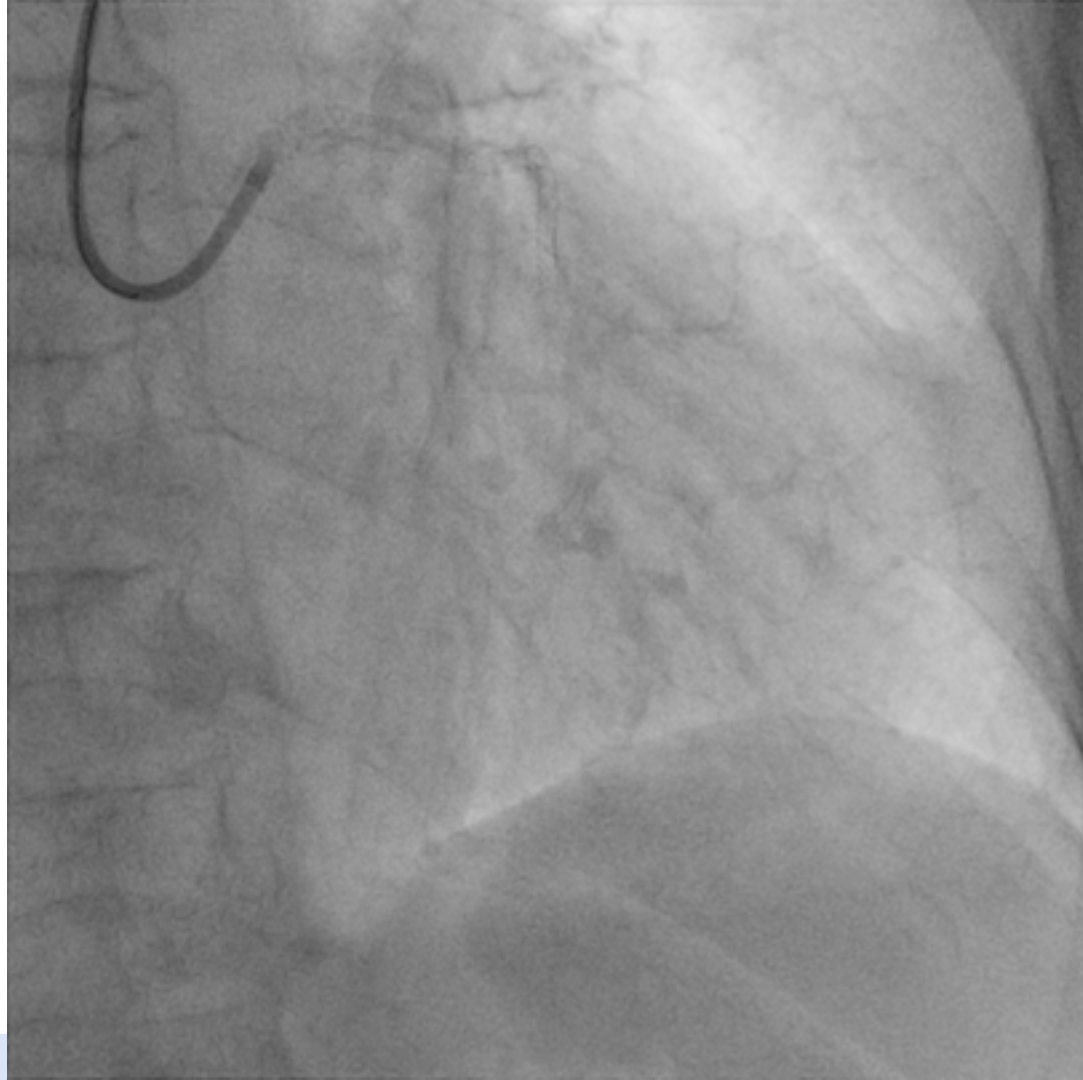








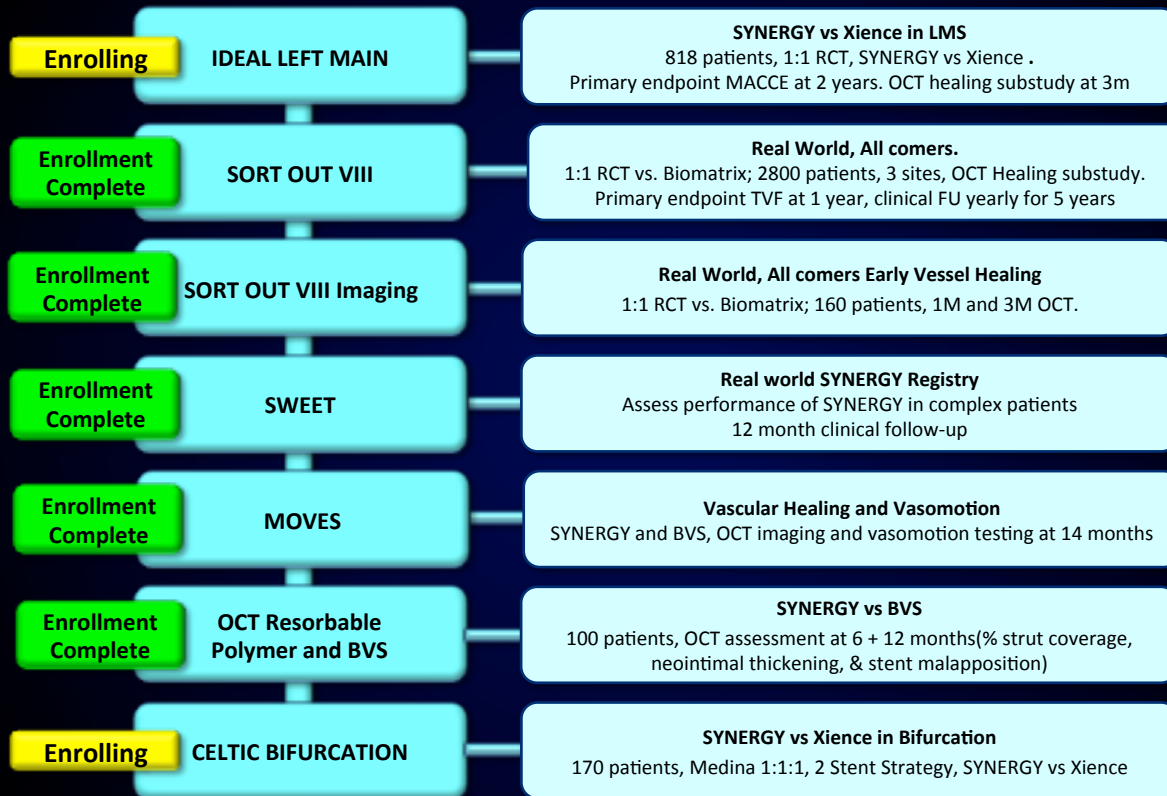




trucs & astuces

- dissection en aval d'un stent et échec de franchissement
 - **impacter le stent proximal**
 - **deuxième guide**
 - rail
 - augmentation du support
 - éviter extensions de catheters

SYNERGY: Investigator Sponsored Research (2 of 3)



Boston Scientific is not responsible for the selection, analysis or reporting of the investigator-sponsored research output which is the sole responsibility of the investigators. Boston Scientific's involvement in investigator-sponsored research is limited to providing financial support for research that advances medical and scientific knowledge about our products. Indications, contraindications, warnings and instructions for use can be found in the product labeling supplied with each device.

The Heidelberg Experience

Bailout stenting in complex lesions with the SYNERGY Stent

- **87.1% success rate** with the SYNERGY Stent in a study of 116 patients where another stent was unsuccessfully deployed
- Prior unsuccessful stent deployments were with Xience Prime, Resolute Integrity, or Promus Element Stents

	Patients with unsuccessful stent deployment (N=116)	Successful bailout stenting with SYNERGY (N=101)	Unsuccessful bailout stenting with SYNERGY (N=15)
CABG, N (%)	24 (20.7)	20 (19.8)	4 (26.7)
Type A Lesions, N (%)	1 (0.9)	0 (0)	1 (6.7)
Type B Lesions, N (%)	27 (23.3)	26 (25.7)	1 (6.7)
Type C Lesions, N (%)	88 (75.8)	75 (74.3)	13 (86.6)

Main procedure indications: ACS (46.5%), elective PCI (25.9%), and stable angina and/or positive tests (21.6%). 61.9% of patients were classified as high SYNTAX risk.

message à emporter

- « complex PCI »
 - élaborer la stratégie en amont avec matériel prêt (rota)
 - bien connaitre son matériel
 - mailles fines
 - déformation du stent (bifs)
 - principe ALARA (Rx, Iode)

MERCI