

Le RePOT

dans le provisional stenting des bifurcations coronaires

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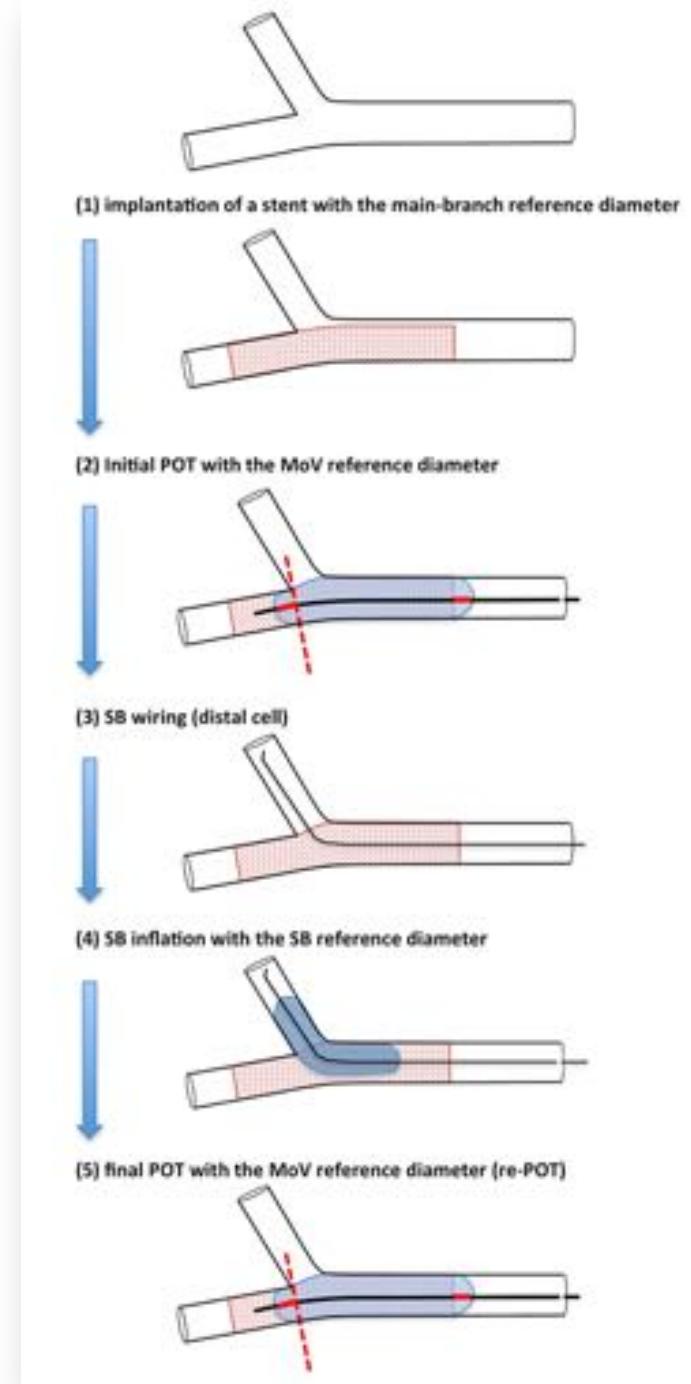
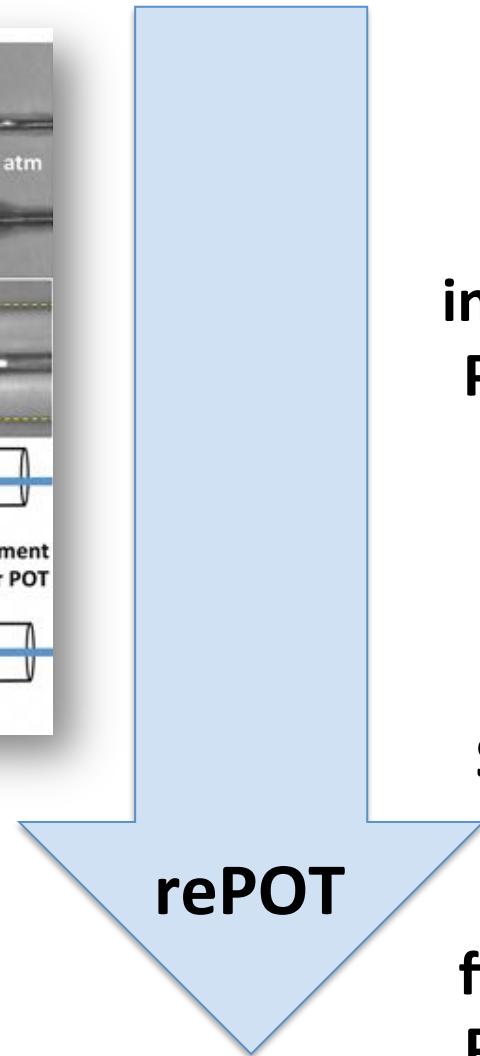
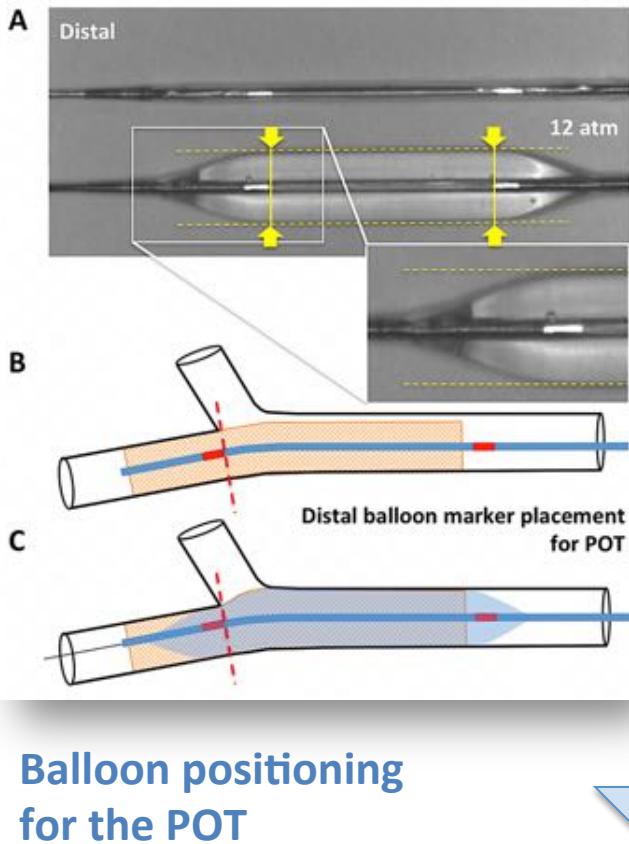
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rePOT sequence



The rePOT sequence

re-POT sequence

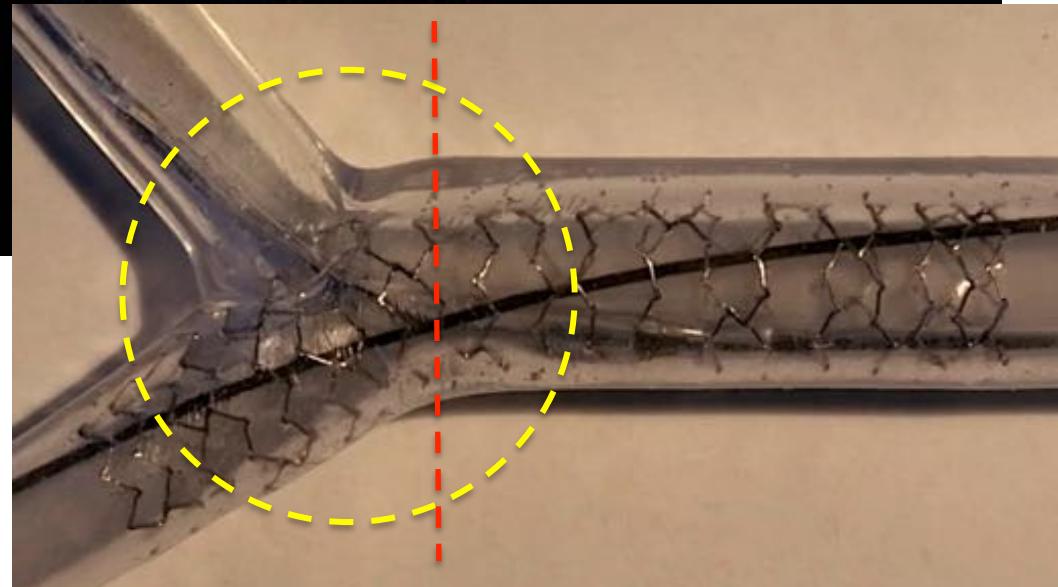
in fractal bifurcation bench model

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RePOT sequence
in fractal bif bench model

Mandatory mechanical effect
of the final POT in the POC



Significant benefits of Proximal Optimizing Technique (POT)

TABLE 1 Quantitative Analysis of the Mechanical Effects of POT

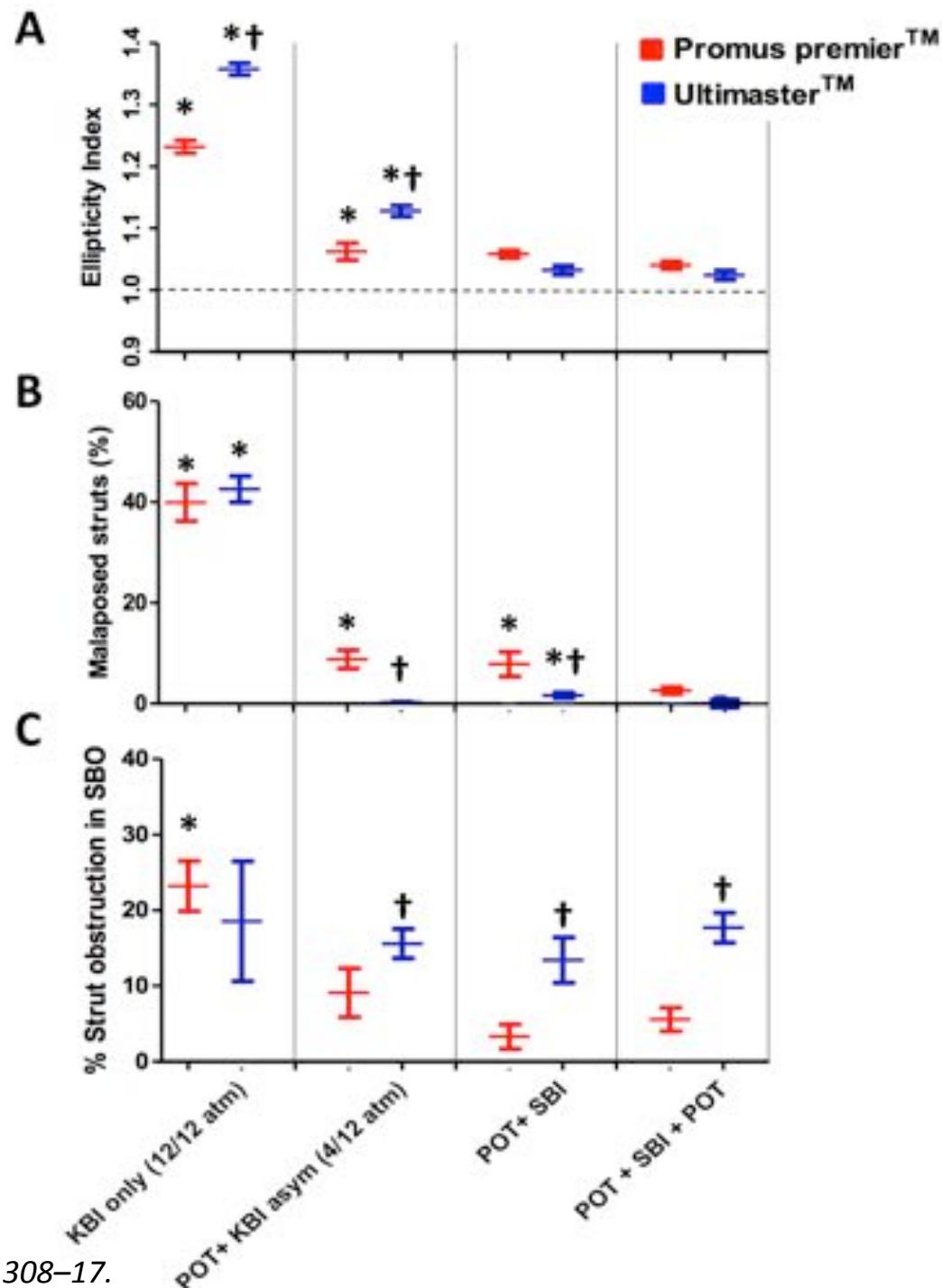
	Pooled Results (Promus Premier and Ultimaster Stents)	Before POT (n = 40)	After POT (n = 40)
2	Mean MoV _{ref} D, mm	4.08 ± 0.03*	4.23 ± 0.08
2	Proximal mean stent D, mm	3.32 ± 0.08*	4.23 ± 0.08
	Expected stepwise difference in diameter between MoV _{ref} -MB _{ref} according to fractal geometry	0.83 ± 0.03	NA
	Measured diameter difference between MoV _{ref} and stent, mm	0.76 ± 0.06*	0
3	Ellipticity ratio of reference MoV	1.03 ± 0.02	1.03 ± 0.01
	Ellipticity ratio of stent in MoV	1.04 ± 0.02	1.03 ± 0.02
1	Stent strut obstruction in SBO, %	34.0 ± 7.4*	26.0 ± 4.2
	Distal cell area ratio in SBO, %	22.1 ± 15.9*	28.7 ± 19.6

Values are mean ± SD. *p < 0.05 versus after POT.

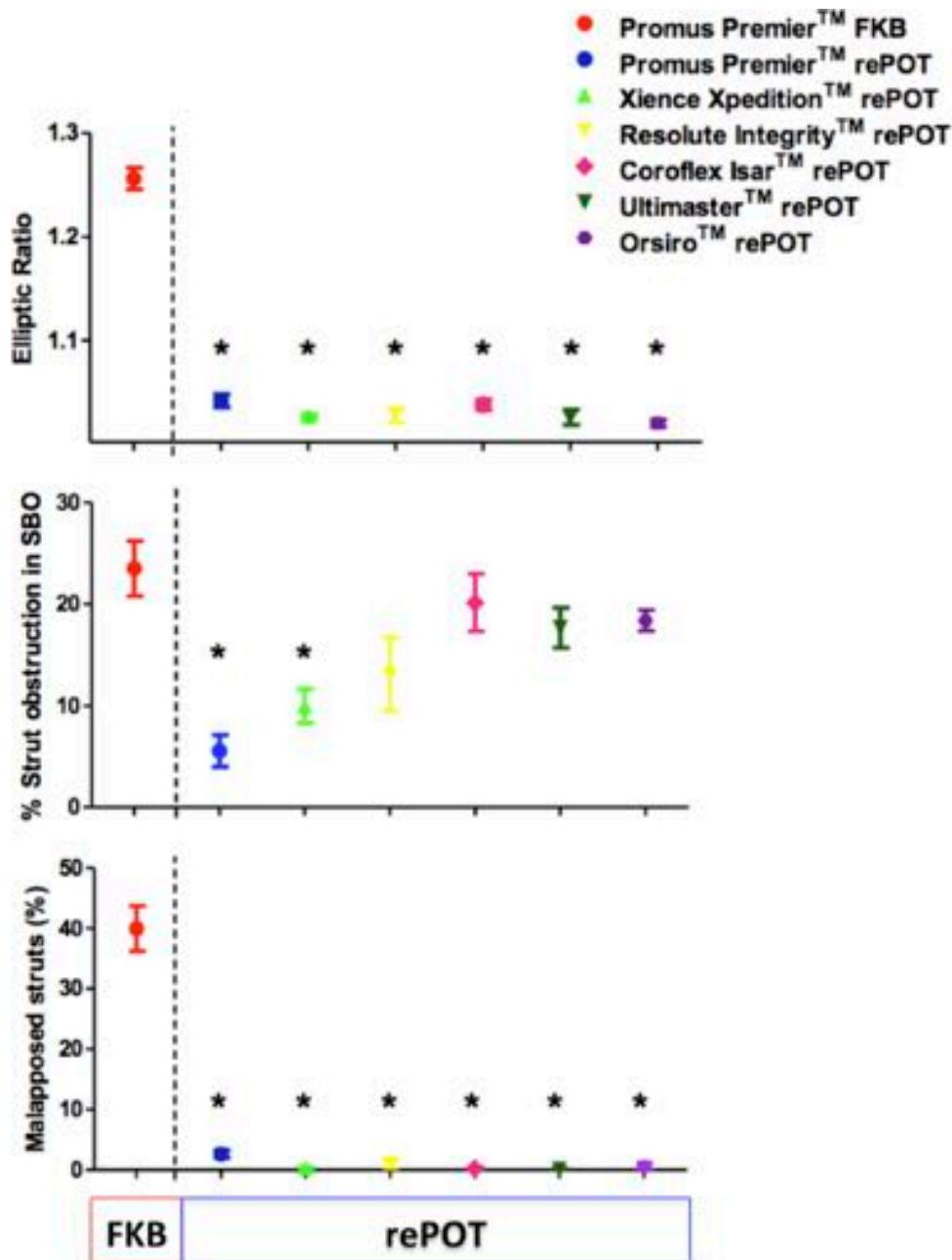
D = diameter; MB = main branch; MoV = mother vessel; NA = not applicable; POT = proximal optimizing technique; ref = reference; SBO = side-branch ostium.

RePOT (POT-SBI-POT) and the other sequences *(head to head comparison)*

Comparison of
1) ellipticity index,
2) global malapposed strut ratio (%),
3) strut obstruction ratio in SBO (%)



Influence of platform design of six different drug-eluting stents in provisional coronary bifurcation stenting by rePOT sequence: a comparative bench analysis.



Immediate in vivo assessment of the rePOT sequence in coronary provisional stenting

Serial OCT analysis

Derimay F, Souteyrand G, Motreff P, Maillard L, Aminian A, Lattuca B, Cayla G, Rioufol G

Multicenter prospective registry (France-Belgium)

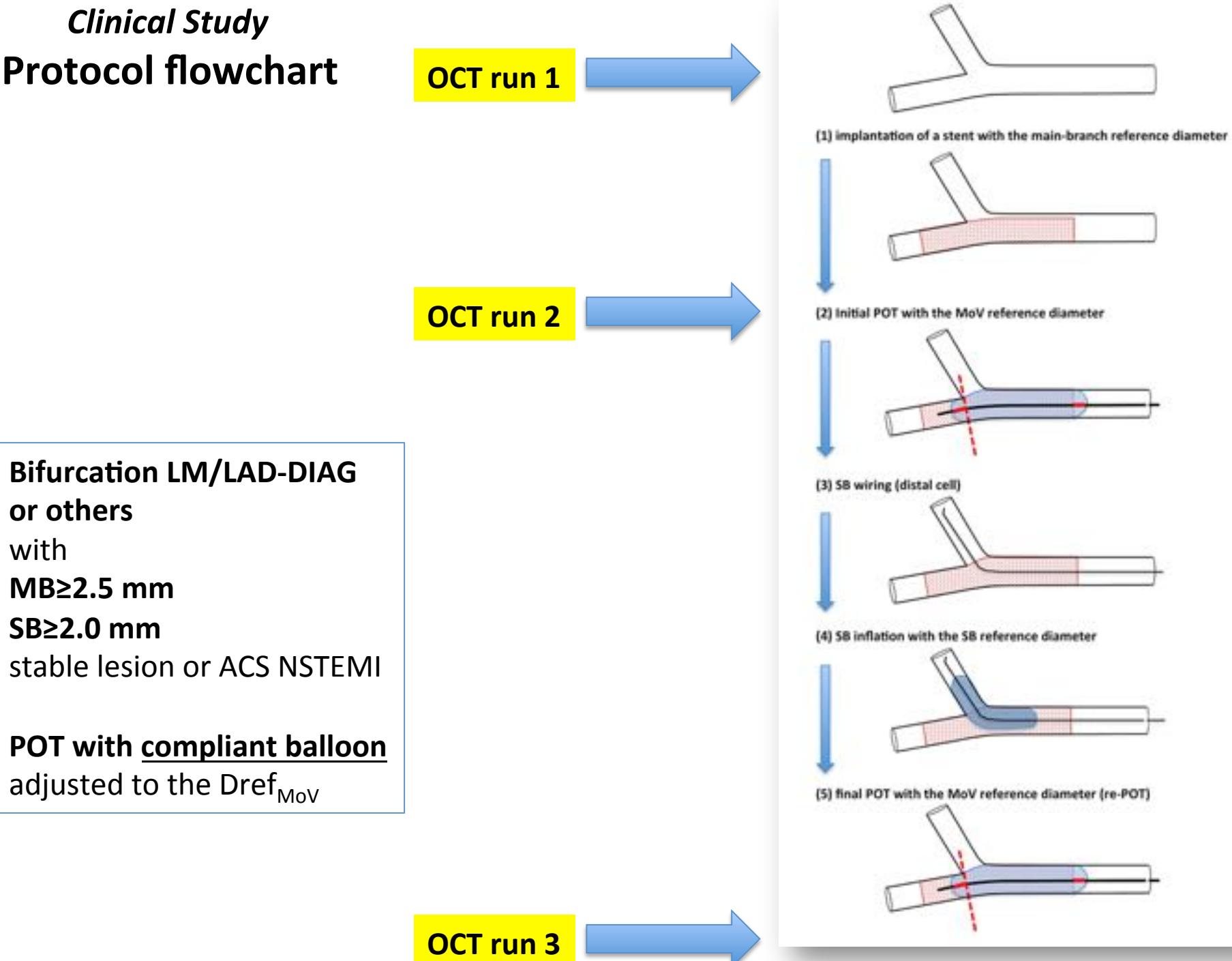
National ethics committees approved the study protocol

Identifier of french clinical trial registration: ANSM N° 2015-A00029-40

All patients provided written informed consent

Clinical Study

Protocol flowchart



RESULTS

Baseline patient characteristics

	n =106
Age (years)	65±14
Male gender	80 (75%)
Diabetes mellitus	30 (28%)
Hypertension	50 (50%)
hypercholesterolaemia	41 (41%)
Current smoker	28 (28%)
Previous MI	25 (25%)
LVEF (%)	54±13%
Radial approach	86 (86%)
6F	100 (100%)
Total contrast medium	205±81 ml
Contrast medium w/o OCT	102±90 ml
X-ray	73264±19420 mG.cm ²

RESULTS

Baseline bifurcation lesion characteristics

		n =106
	LM	43 (40%)
	LAD/DIAG	51 (51%)
	Others	12 (12%)
	%DS	$77.5 \pm 18.4\%$
	“True bifurcation lesion”	48 (37.7%)
	Medina 111	27 (27%)
	Medina 100	13 (13%)
	Medina others	15 (15%)
	SB/MB bif angle	$68 \pm 26^\circ$
	MoV/MB bif angle	$153 \pm 54^\circ$

In vivo demonstration of POT's benefits

Clinical rePOT study	Before (re)POT (n=106)	After (re)POT (n=106)
Mean proximal ref D _{MoV} , mm	3.75±0.66	3.90±0.66*
Mean proximal D _{stent} , mm	3.10±0.52	3.84±0.66*
Difference in diameter between MoV and stent, mm	0.65±0.42	0.04±0.12*
Ellipticity ratio MoV	1.19±0.11	1.13±0.12*
Stent/artery ratio MoV	0.84±0.09	1.04±0.09*
	After stent implantation @ MB_D	
Global stent MAP (%)	18.9±13.4%	3.2±3.9%*
SB Obstruction (%)	36.1±16.2%	12.1±14.5%*

* p<0.05 vs before rePOT



Final summary on the significant advantages of rePOT

The four methodological steps		KB	rePOT
1	Technical concept	Yes	Yes
2	<u>Fractal</u> bench tests	No	Yes
3	Clinical replication of bench tests	No	Yes
4	RCT or Registry	Yes but fail to improve the rate of MACEs	not yet

Long KISS(S) principle: “Keep it Simple, Swift, Safe, and Superior”

