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Three Year Follow-up of Chronic Total Occlusion (CTO) Treated with Selective Use of Sirolimus-Eluting Stent Compared with Non CTO.

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Background: There is limited evidence on the long-term outcomes of patients with chronic total occlusion (CTO) treated with selective use of sirolimus-eluting stent (SES) compared with non CTO lesions in the same era. Methods: In 2005 we treated 1061 patients with selective use of SES excluding ST elevation myocardial infarction. 33 patients were CTO and 1028 patients were non-CTO. We investigated the clinical outcome at three year. Results: There was no significant difference in terms of major adverse cardiac event at three year compared CTO with non-CTO (12.1 vs 21.8%, p value=0.18). Table shows other results. Conclusions: Despite selective use of SES, the clinical outcome of CTO at three year was favorable compared with non-CTO.

	сто	non CTO	P Value
Number of patients	33	1028	
Usage of SES (%)	17 (51.5)	246 (23.9)	0.0003
Angiographic follow-up at 6 month (%)	22 (66.7)	637 (62.0)	NS
Angiographic restenosis at 6month (%)	7 (21.2)	96 (9.3)	0.03
Angiographic follow-up at 12 month (%)	7 (21.2)	462 (44.9)	0.006
Angiographic restenosis at 12 month (%)	2 (6.1)	26 (2.5)	NS
TVR at 1 year (%)	2 (6.1)	82 (8.D)	NS
TVR at 2 year (%)	2 (6.1)	143 (13.9)	NS
TVR at 3 year (%)	2 (6.1)	155 (15.0)	NS
Death at 3 year (%)	2 (6.1)	62 (6.0)	NS
MI at 3 year (%)	0	3 (0.2)	NS
Stent Thrombosis at 3 year (%)	0	4 (0.4)	NS

CTO: Chronic total occlusion, TVR: Target vessel revascularization

SES: Sirolimus eluting stent MI:Myocardial Infarction