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Background : In Korea, Everolimus-eluting stent has been used on real world from May, 2008. This study was aimed to establish the clinical outcomes of PCI with Everolimus-eluting stent on Real World. **Methods :** From May, 2008 to February, 2009, 134 patients were enrolled (M:F 88:46, mean age 65.5 yrs) and total 204 Xience V stents were inserted. Mean duration of clinical follow-up were 12 months. 46 AMI patients and 28 unstable angina patients were included. Patients with DM were 33 (24.6%), chronic renal failure (CRF) were 9 (6.7%). All patients were received dual-antiplatelet regimen (Aspirin + clopidogrel) during whole follow-up periods. Primary endpoint was cumulative incidence of major adverse cardiac events (MACE) including all cause mortality, cardiac death, MI, target lesion revascularization (TLR) and stent thrombosis (ST) at 12 months. **Results :** During 12-months follow-up period, the incidence of MACE was 9 events (6.7%). 6 deaths (3.7%) happened including 4 cardiac deaths (2.9%); 1 case was death from acute ST, other 3 cases were deaths from heart failure after extensive MI. 3 ST (2.2%) happened; 1 case discontinued dual antiplatelet agent for himself. 4 TLR (3.0%) happened. Development of MACE were associated with CRF ($r=0.182$, $P=0.039$), especially with death ($r=0.246$, $p=0.05$). **Conclusion :** PCI with Xience V in real world, our data showed slightly high incidence of MACE and ST compare with result of SPIRIT III trial. Allowing for the clinical and angiographic characteristics of patients, low adherence to prescription, our study showed the efficacy and safety of Xience V on real world.