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**Background:** As a risk factor of coronary artery disease (CAD), gender might be associated with the prognosis following percutaneous coronary intervention (PCI). However, there are limited data regarding the impact of gender on angiographic and clinical outcomes following unprotected left main (LM) coronary intervention. **Methods:** A total 181 consecutive patients (pts) who underwent PCI for unprotected LM disease with drug-eluting stents (DESs) were enrolled for this study. We compared 6-month angiographic and 24-month clinical outcomes between females group (n=54) and males group (n=127). **Results:** Baseline characteristics were similar between the two groups, except for hypertension was more prevalent in females group (79.6 vs. 62.2%, p=0.022), whereas smoking was more common in males group (45.2 vs. 1.9%, p<0.001). At index procedure, angiographic and procedural parameters were similar between the two groups. At six months angiographic follow up, males had a higher incidence of binary restenosis. However, this mid-term angiographic difference did not exert on worse clinical outcomes at least up to two years (Table). **Conclusions:** In pts undergoing PCI for unprotected LM disease, male gender showed a higher incidence of binary restenosis at six months at routine angiographic follow up; however this was not translated into worse clinical outcomes up to two years.