

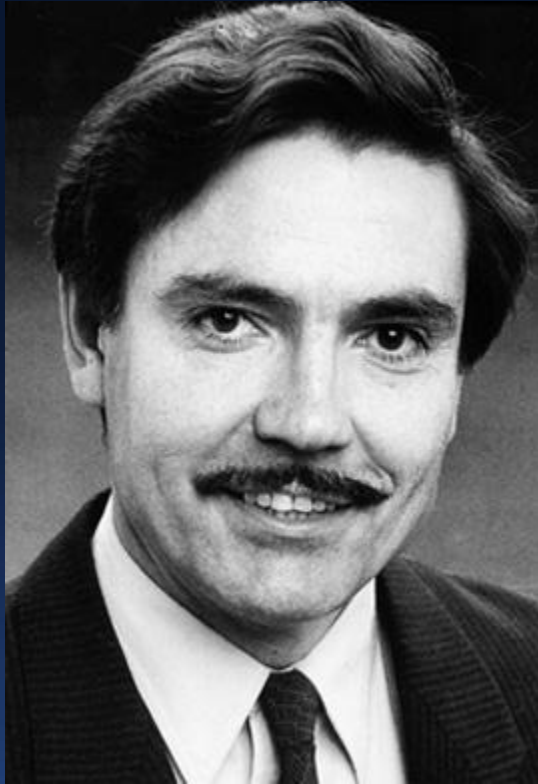
CVI SYMPOSIUM 2012

Old and New STENT Technology for CAD

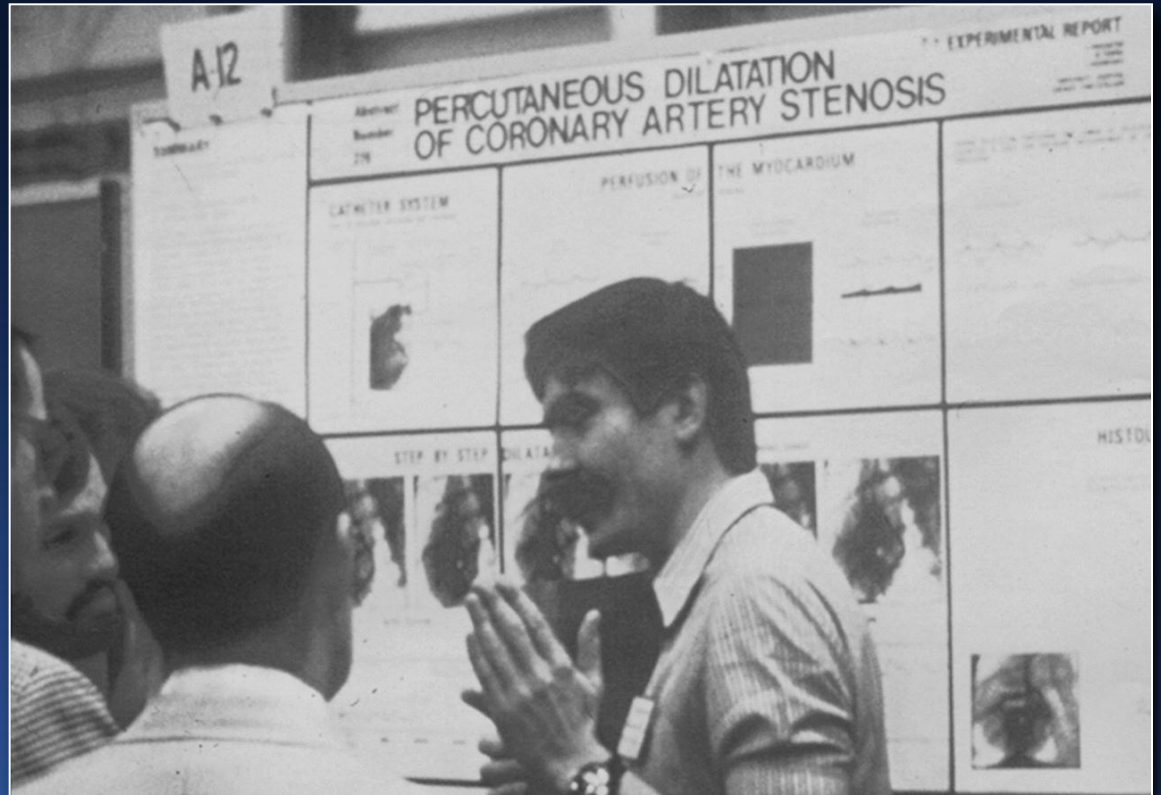
Luis F. Tami, MD

***Cardiac Cath Lab Director
Memorial Regional Hospital***

We began about 35 Years ago!



**Andreas Gruentzig
1939 - 1985**



AHA Meeting, Nov 1976, Miami, Florida

About Andreas Gruntzig's presentation at the AHA 1977

“.....it was standing room only and after the presentation, the audience stood and applauded, almost unheard of at a scientific meeting.”



First live demonstration in Zurich in 1978

Gruntzig pioneered live demonstrations as a way to learn and master procedures.

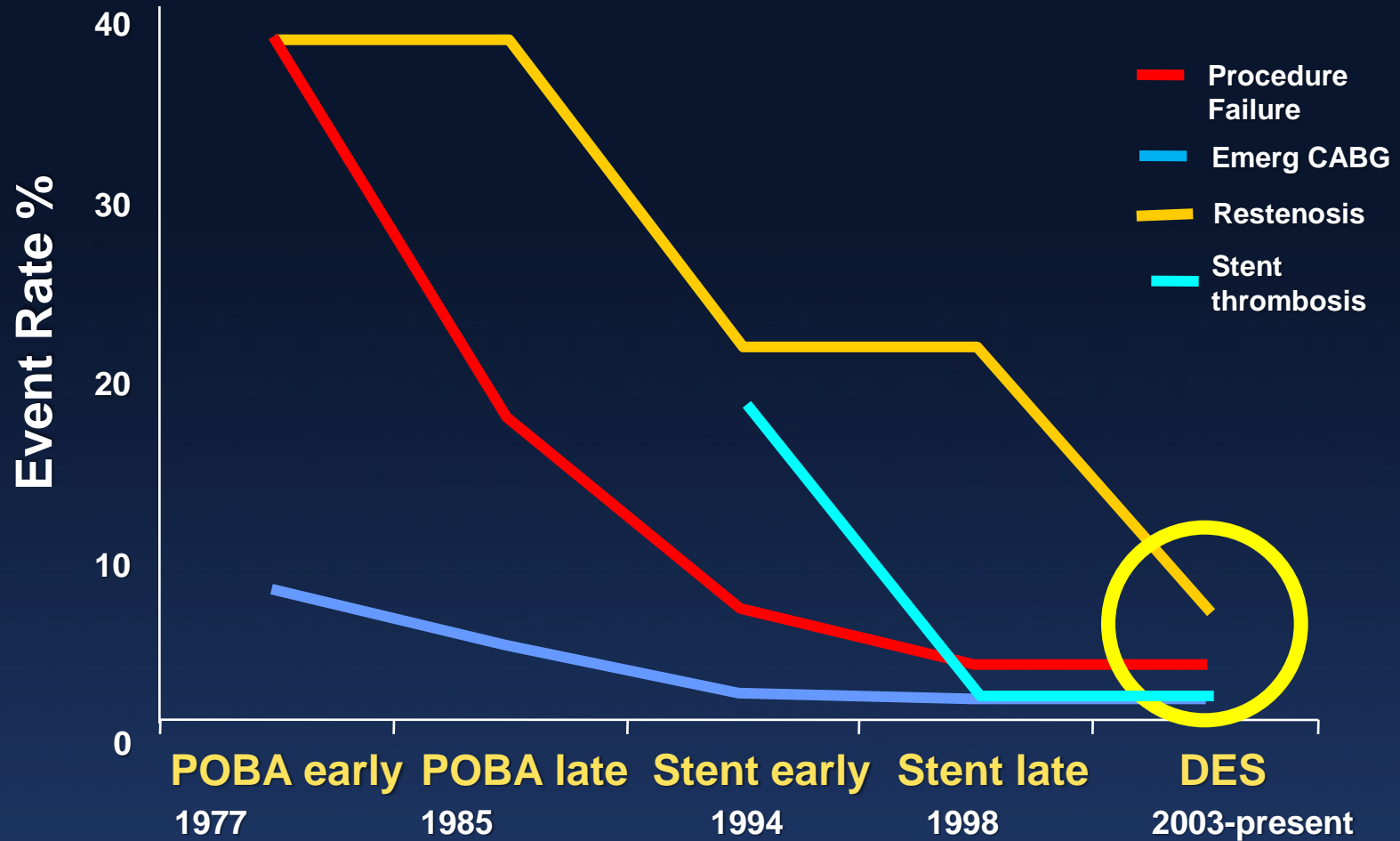
..... And even today

Live Demonstration, Miami, Oct 2012



11,800 attendees from 52 countries. 46.5 hrs of life cases

PCI: Incremental Improvements



First Report of Coronary Stenting in 1987



The NEW ENGLAND
JOURNAL of MEDICINE

*INTRAVASCULAR STENTS TO PREVENT OCCLUSION AND RESTENOSIS AFTER
TRANSLUMINAL ANGIOPLASTY*

*Ulrich Sigwart, M.D., Jacques Puel, M.D., Velimir Mirkovitch, M.D., Francis Joffre, M.D., and
Lukas Kappenberger, M.D.*

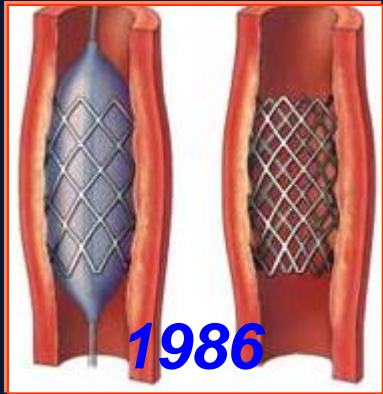
N Engl J Med 1987; 316:701-6

Ulrich Sigwarth (Lausanne, Switzerland 1986)

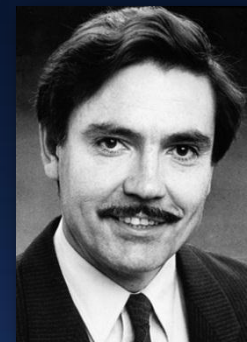
First human coronary implantation

Stents initially rejected due to stent thrombosis and bleeding due to anticoagulation

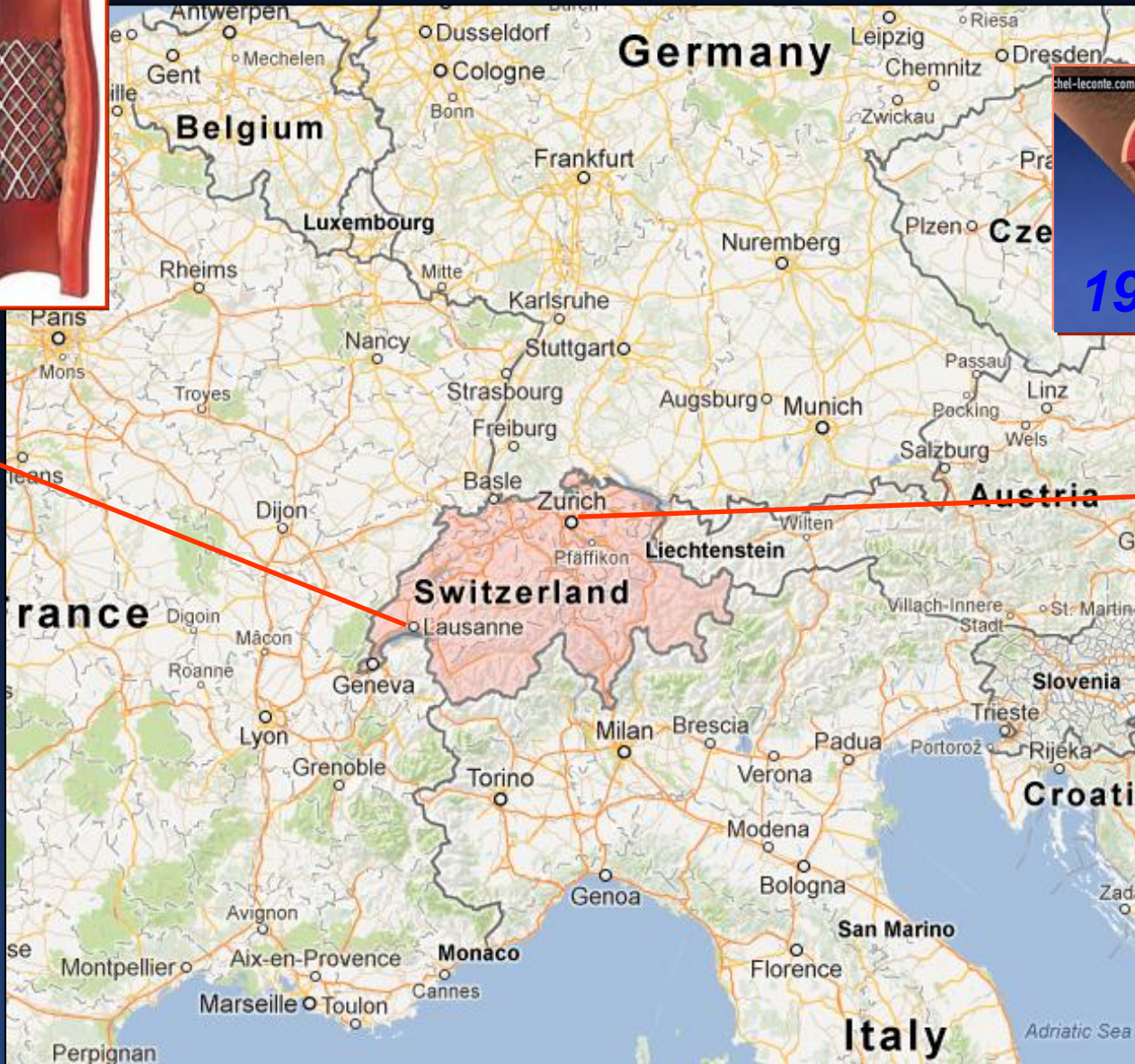
Coronary stents — implantation of foreign bodies into stenotic human coronary arteries: dream or nightmare?



*Ulrich
Sigwart*

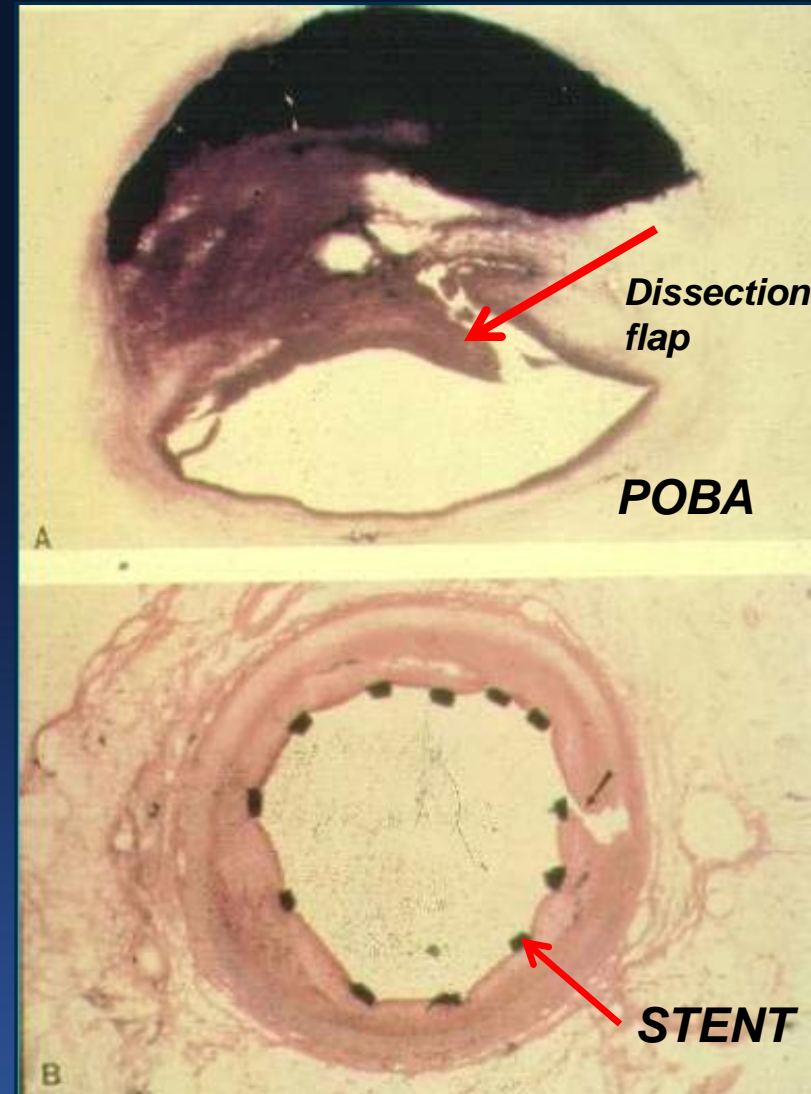


*Andreas
Gruntzig*



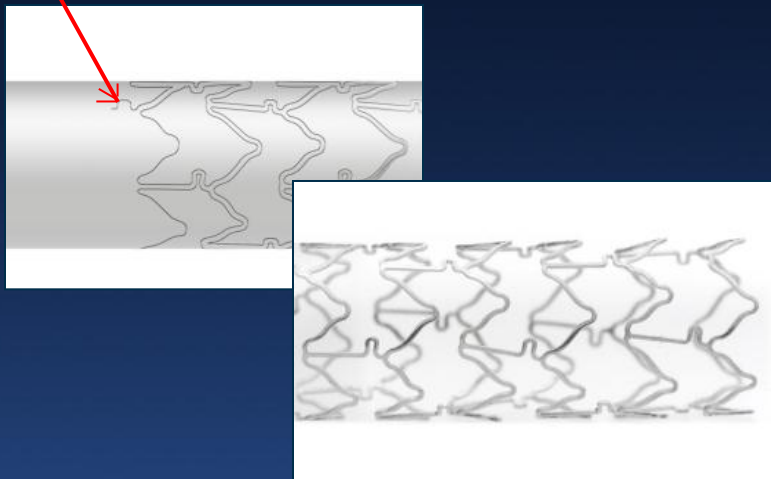
Why to Stent?

- *Mechanically scaffold the artery and create a larger lumen predictably*
- *Prevent / treat abrupt vessel closure*
- *Reduce restenosis*

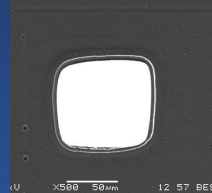


Basic strut types / Construction

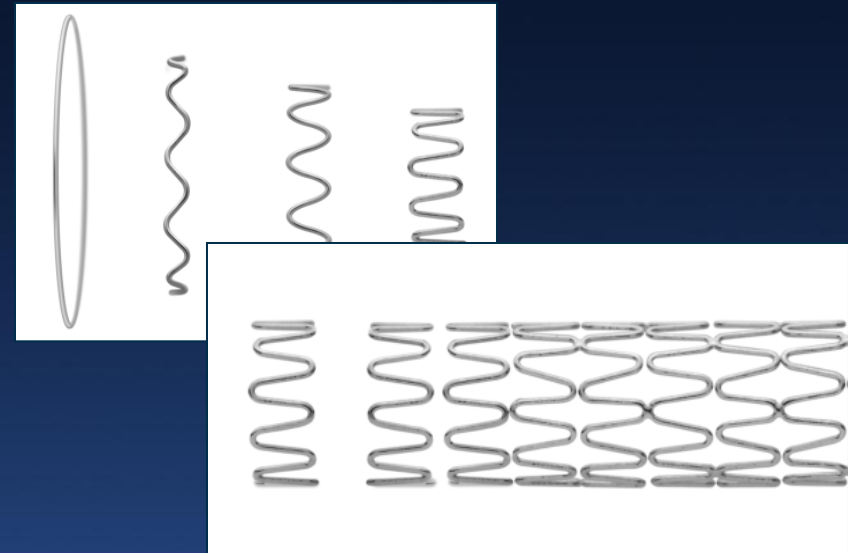
1. *Laser-cut stents start as a tube, a laser removes material and a stent remains. Laser-cut stent production leaves square (blunt) edges.*



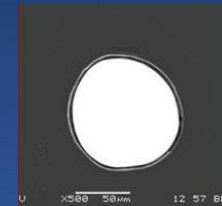
Squared edges



2. *Metallic rings are formed into sinusoidal elements that are fused together to comprise a modular stent.*



Ultrathin, smooth, rounded struts

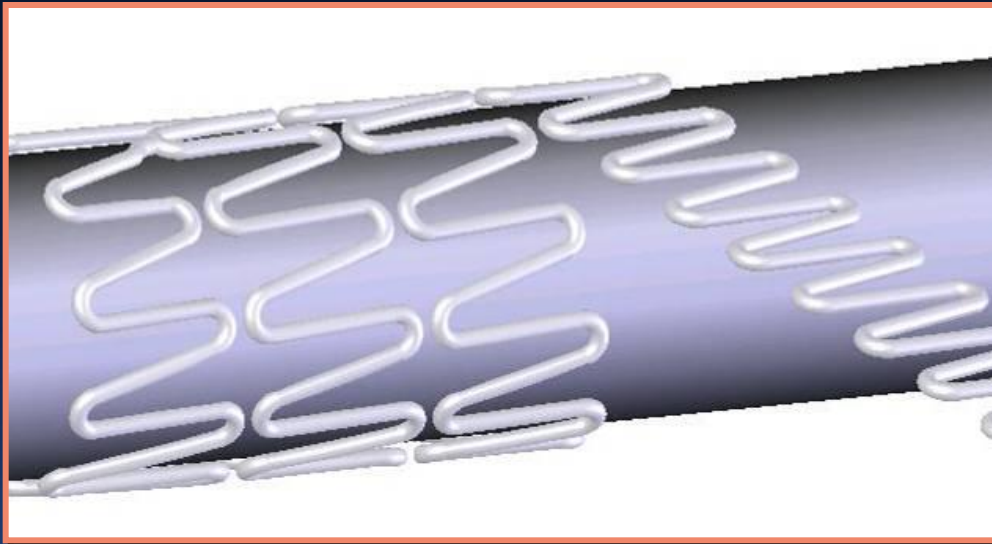


ALL OTHER STENTS

Driver, Endeavor

Continuous Helical Technology for stent strut construction

Continuous Helical Technology



0.0038"



0.0034"



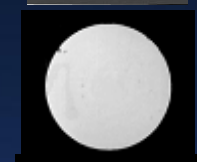
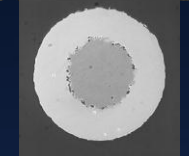
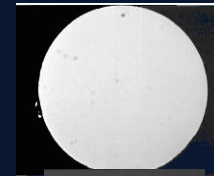
0.0030"



0.0025"



0.0020"



- *Enhance deliverability and conformability without compromising strength & opacity*



Integrity, Resolute

AS A RESULTS OF STENTS...

***Interventional Cardiologist
sleep better at night***

BUT

The Limitation of Bare Metal Stents: RESTENOSIS



LATE LOSS = Intimal Hyperplasia

SOLUTION: Drug-Eluting Stents

First Generation

Stent design and delivery system

**Drug-
Eluting
Stent**

```
graph TD; A((Drug-Eluting Stent)) --> B[DRUG]; A --> C[Drug carrier polymer]; A --> D[Stent design and delivery system]; A --> E[Known FDA-approved drugs with approximated release kinetics];
```

*"Off the shelf" outdated
stent and delivery system*

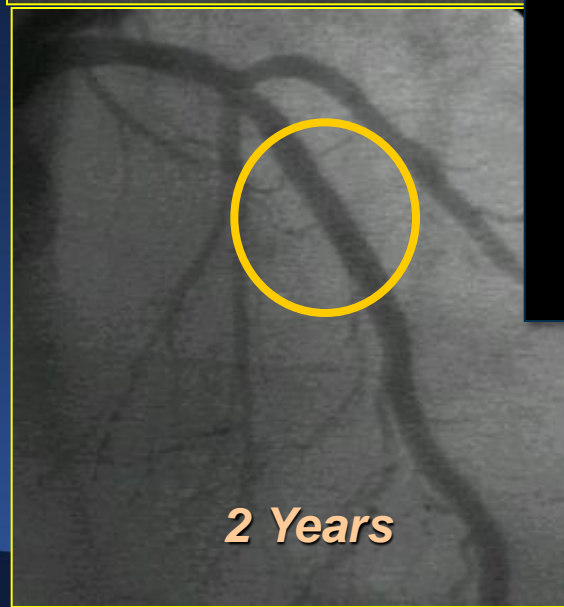
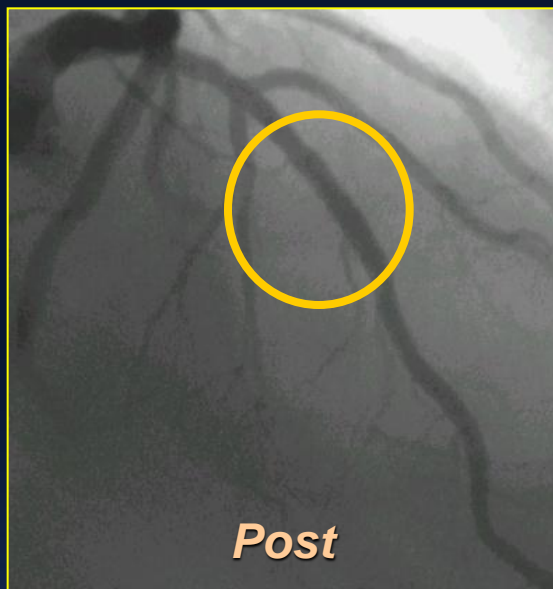
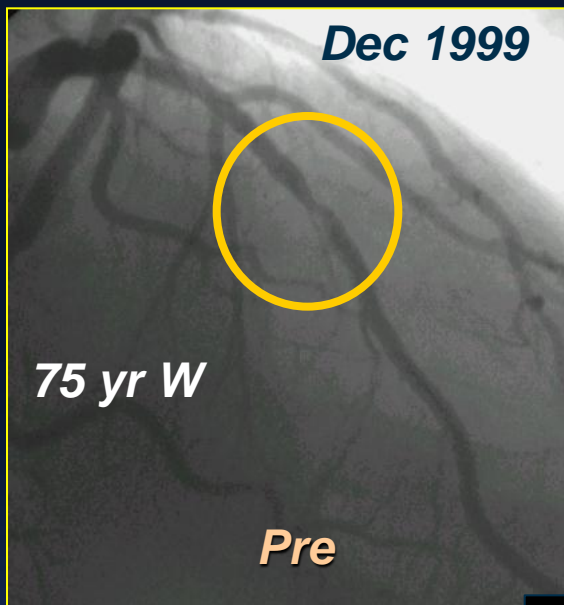
DRUG

*Known FDA-approved
drugs with approximated
release kinetics*

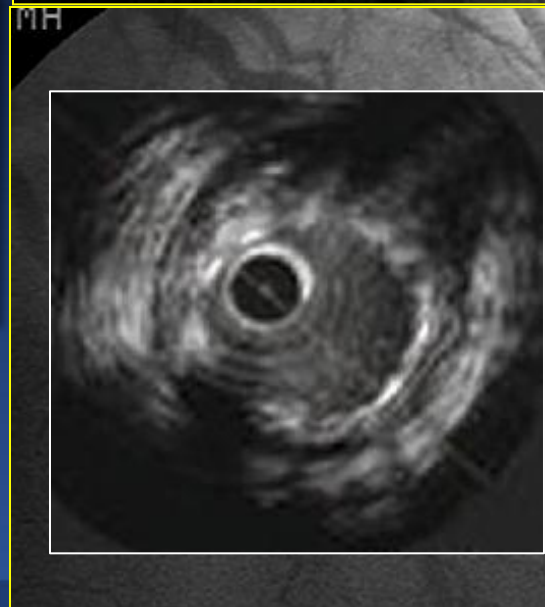
**Drug carrier
polymer**


*Available, FDA-approved
biostable polymers*

CYPHER Stent: First patient 10 Years



**Replaced in
2011 by newer
stents**





***Success over
In-Stent
Restenosis!!***

The Sirolimus-Eluting Stent (Cypher)

FDA Approval in US: APRIL 2003

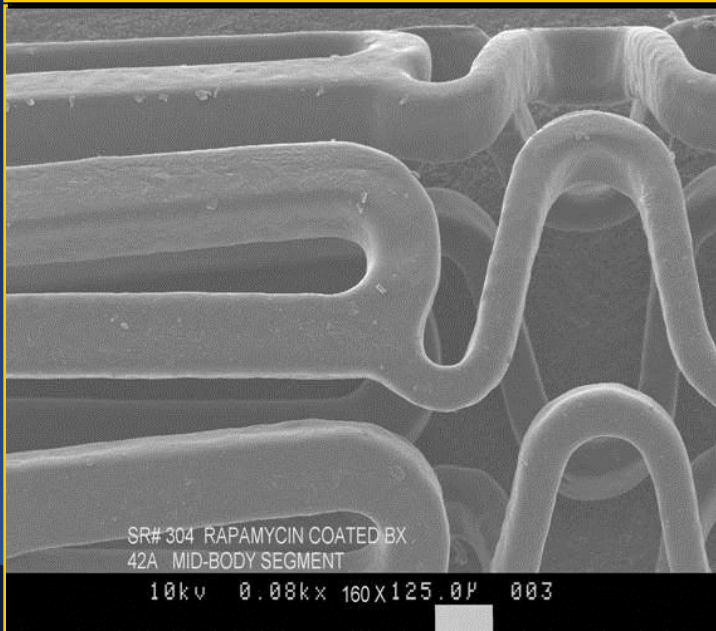
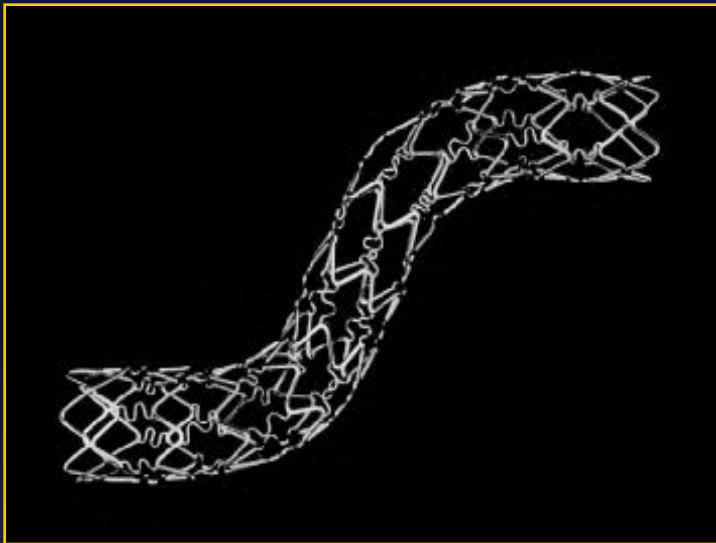
Bx VELOCITY™ Stent

- Stainless steel stent

Drug carrier:

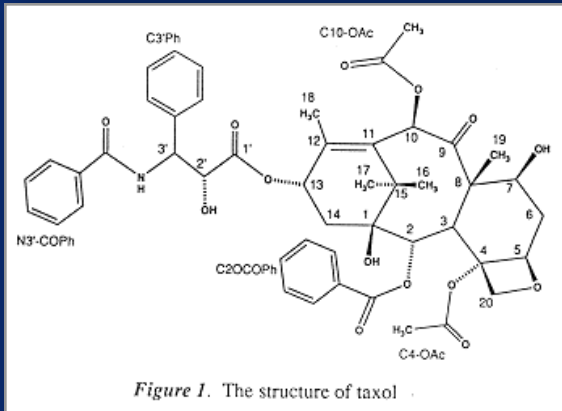
- Blend of 2 polymers
(PEVA + PBMA)

Sirolimus (~ 10um thick)

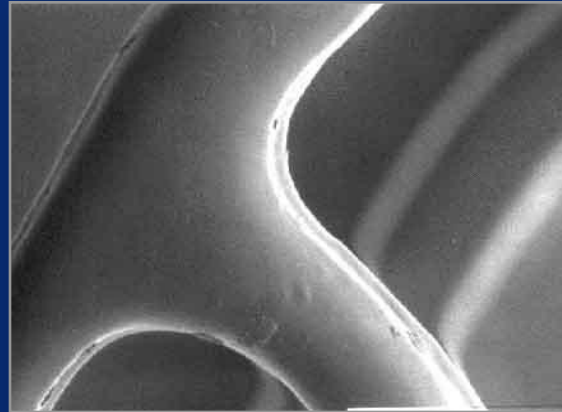


One Year later: TAXUS Stent

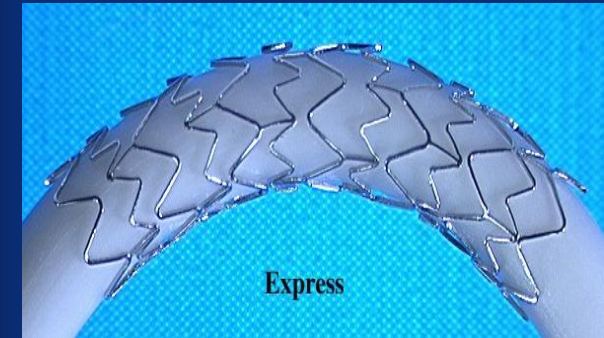
Drug



Polymer



Stent



Paclitaxel

- Binds tubulin
- Stabilizes microtubular deconstruction
- Multi-cellular
- Multi-functional
- Cytostatic at low dose

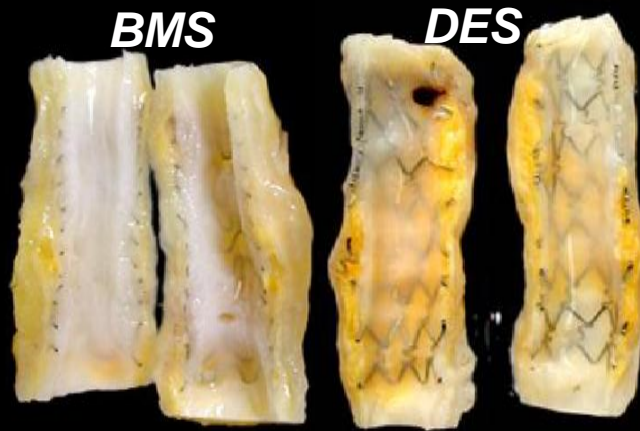
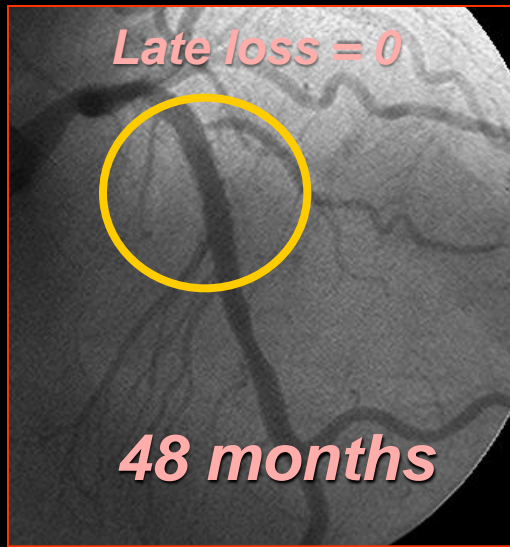
Translute™

- Polyolefin derivative
- Uniform
- Biocompatible
- Elastomeric
- Provides controlled release

Express²

- Stainless Steel
- Maverick balloon system
- Flexible
- Deliverable

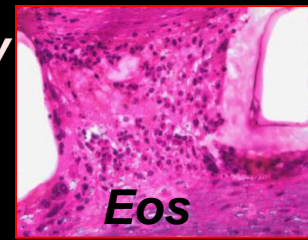
1st Generation DES.... the good, the bad, and the ugly!



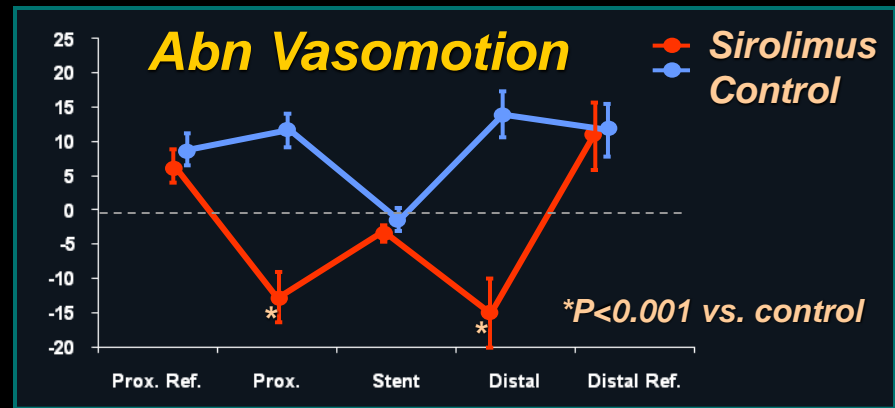
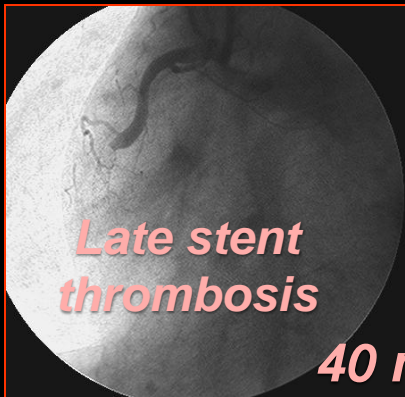
Delayed Healing!



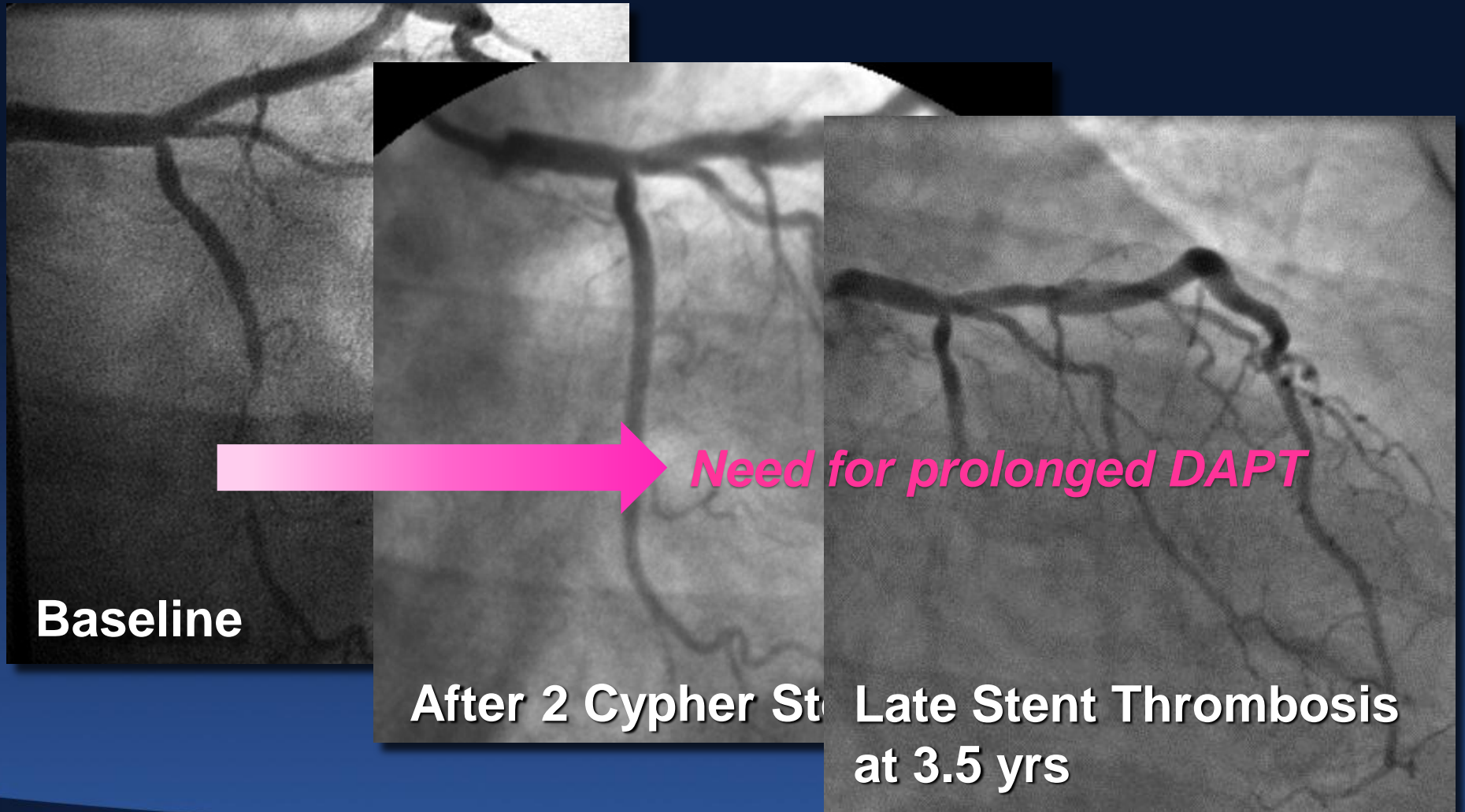
Angioscopy



Inflammation



Late SES Stent Thrombosis



Baseline

After 2 Cypher Stents

**Late Stent Thrombosis
at 3.5 yrs**

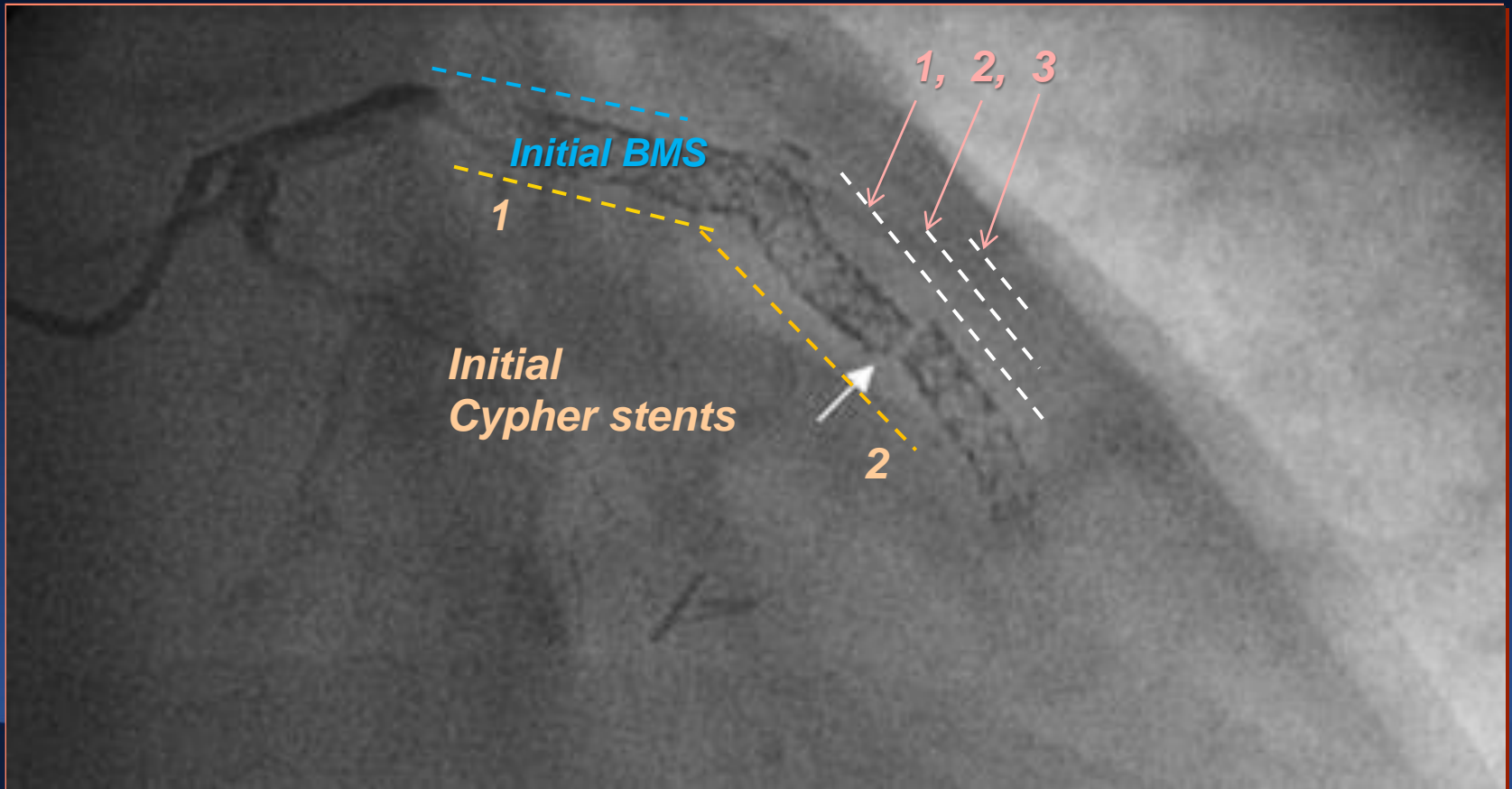
Need for prolonged DAPT

STENT FRACTURE

*59 yr old LIMA to LAD. Graft failed and native LAD stent done in 1997 (initial)
Native LAD stented with 2 Cyphers (1,2)*

Subsequent restenosis

- 1. Cypher 3.5 x 33*
- 2. Cypher 3.5 x 13*
- 3. Cypher 3.5 x 8*



ABNORMAL VASOMOTION DUE TO ENDOTHELIAL DYSFUNCTION

American Medical Journal 3 (2): 75-81, 2012

ISSN 1949-0070

© 2012 Science Publications

Coronary Endothelial Dysfunction after Drug-Eluting Stent Implantation

Shigenori Ito

Division of Cardiovascular Medicine,

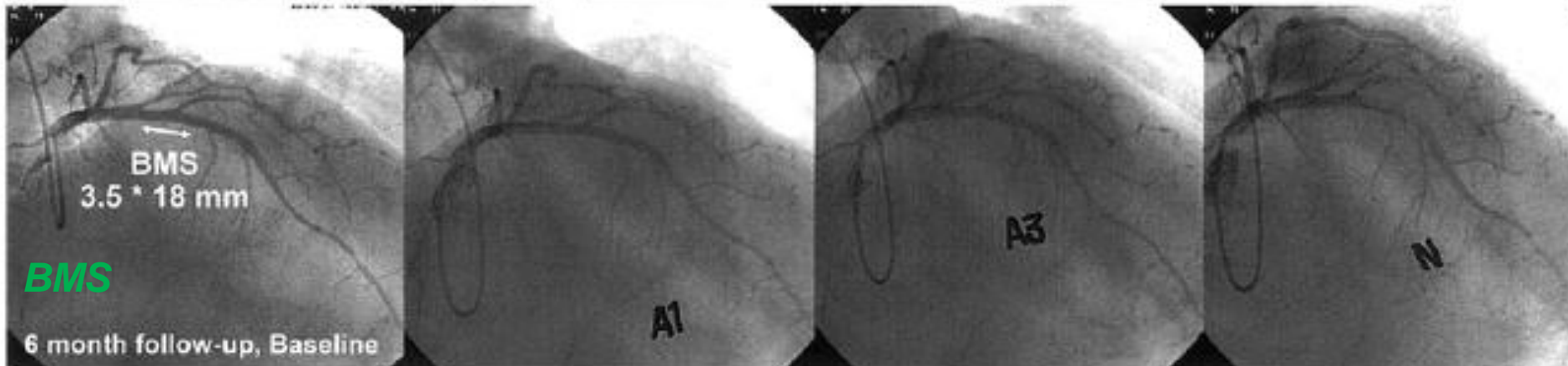
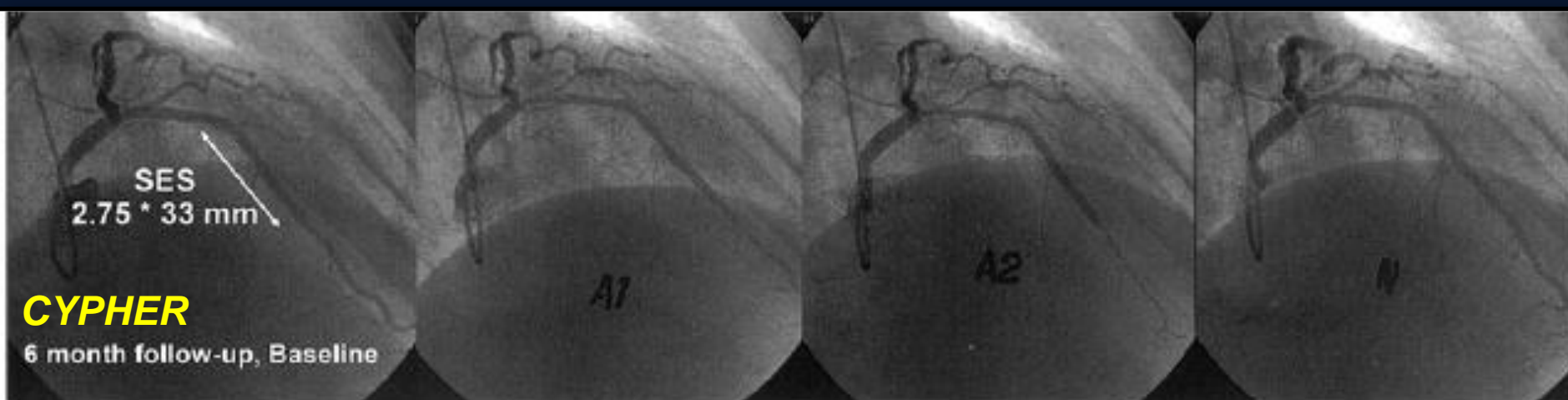
Nagoya City East Medical Center 1-2-23 Wakamizu,
Chikusa-Ku, Nagoya-Shi, Aichi-Ken, 464-857, Japan

STATE-OF-THE-ART PAPER

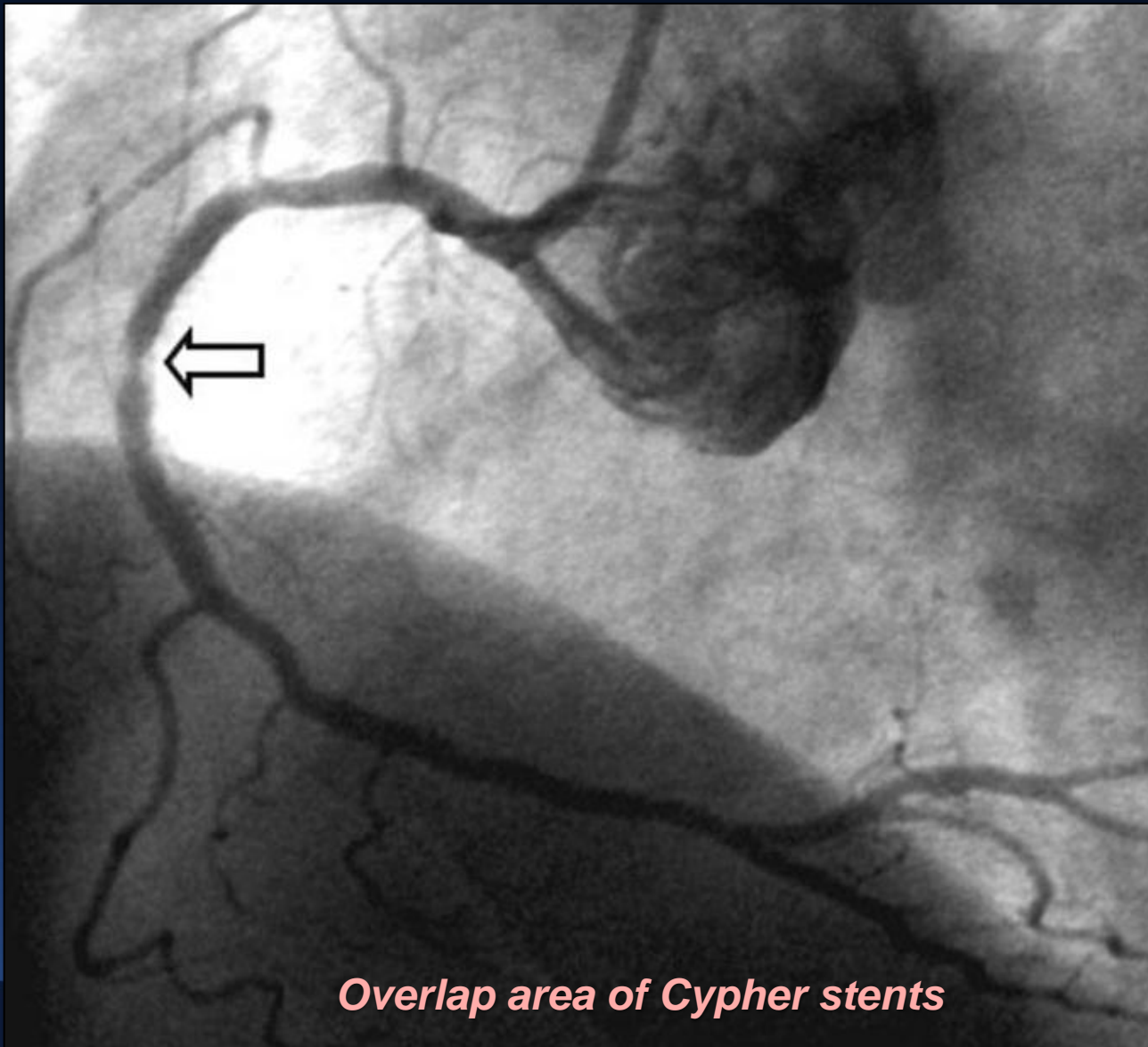
The First-Generation Drug-Eluting Stents and Coronary Endothelial Dysfunction

Lakshmana K. Pendyala, MD,* Xinhua Yin, MD, PhD,† Jinsheng Li, MD, PhD,†
Jack P. Chen, MD,† Nicolas Chronos, MD,† Dongming Hou, MD, PhD†

Louisville, Kentucky; and Atlanta, Georgia



DES RESTENOSIS



GOOGLE VS. MICROSOFT
THE RACE TO REV UP THE SEARCH ENGINE

America's Largest Private Companies
Howard Stern—Is Anyone Listening?
SCORE! Hockey Is Hot Again

NOVEMBER 27, 2006 | WWW.FORBES.COM

Forbes

STENTS
DEFIBRILLATORS
SPINAL DISCS
ARTIFICIAL KNEES

**Are These
As Safe As
You Think**

\$4.99 | CANADA \$6.99

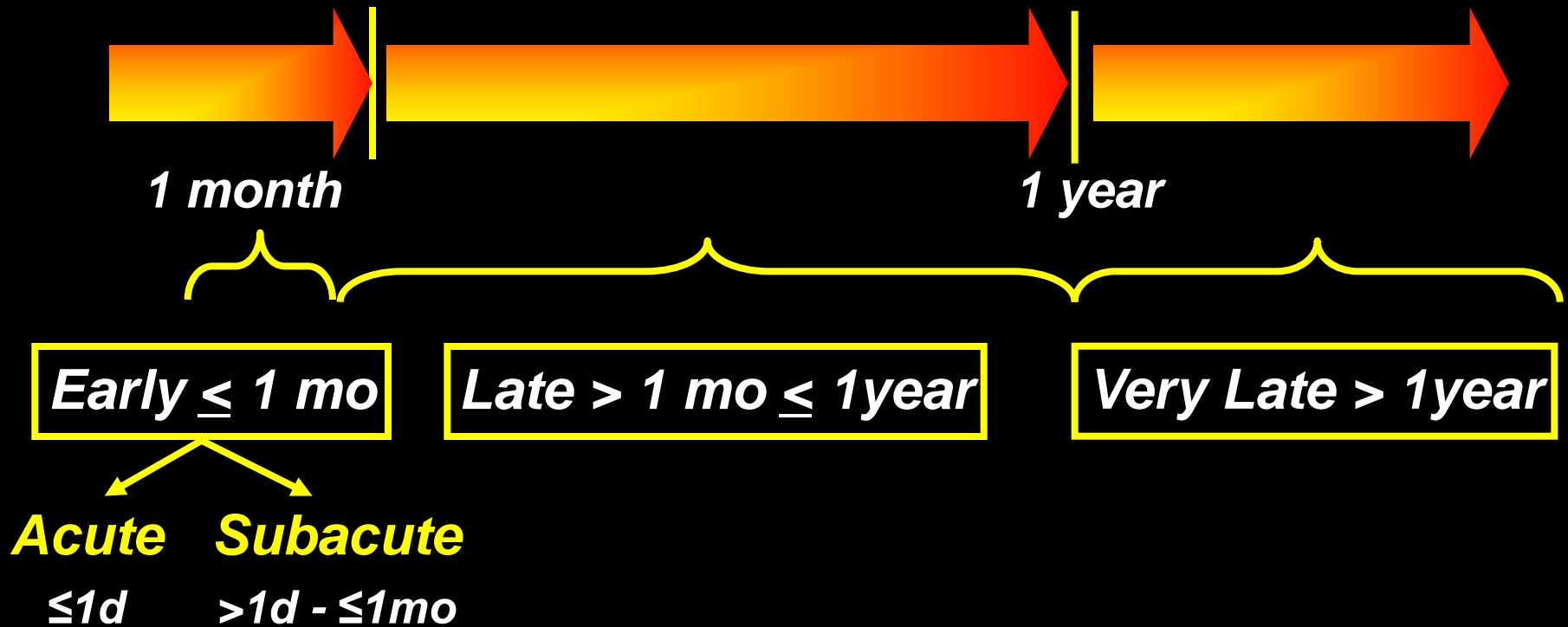


Nov 27, 2006

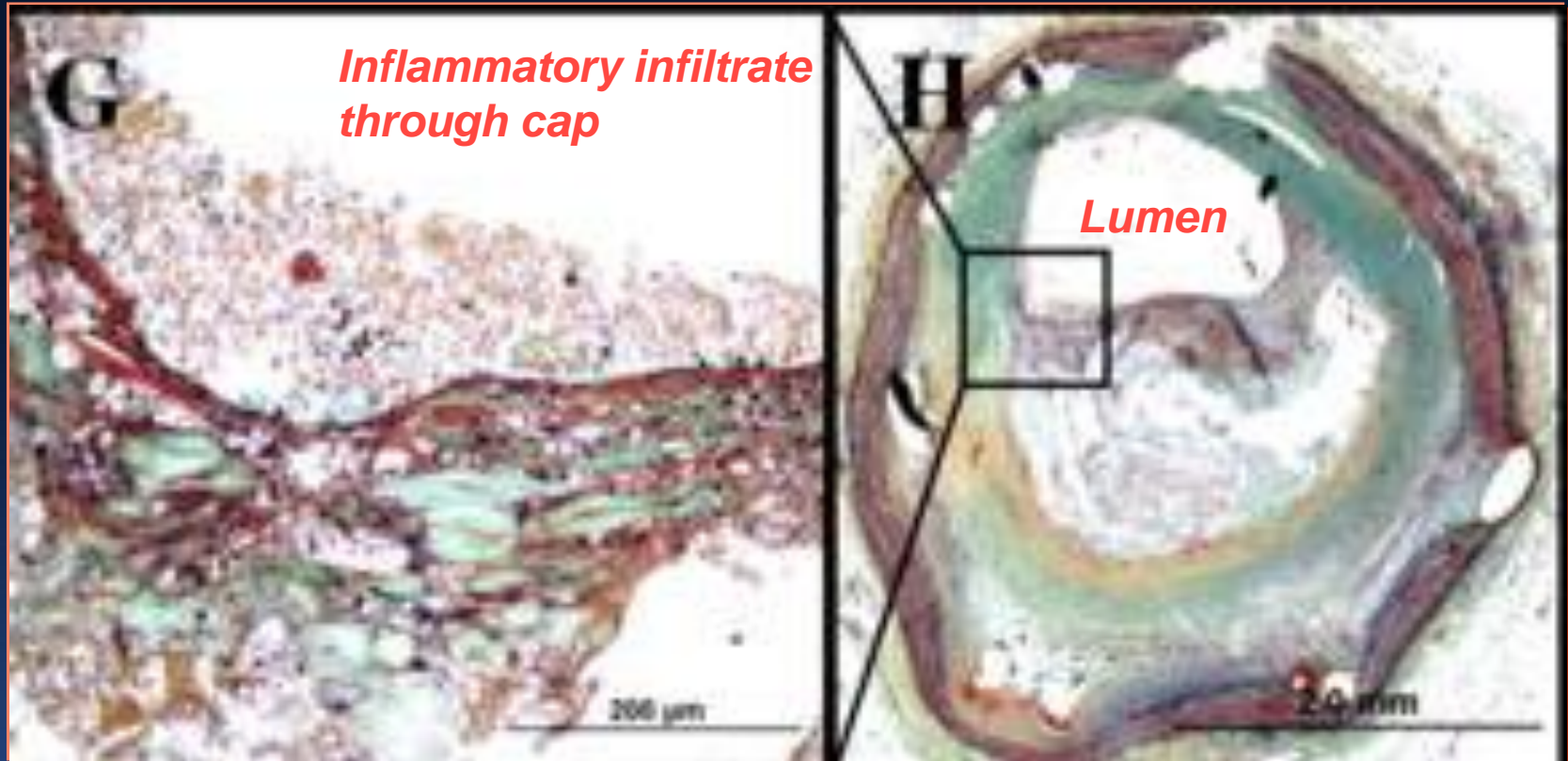
**DES =
“a million
ticking time
bombs”**

***Risk of DES thrombosis even
years after implantation***

Stent Thrombosis



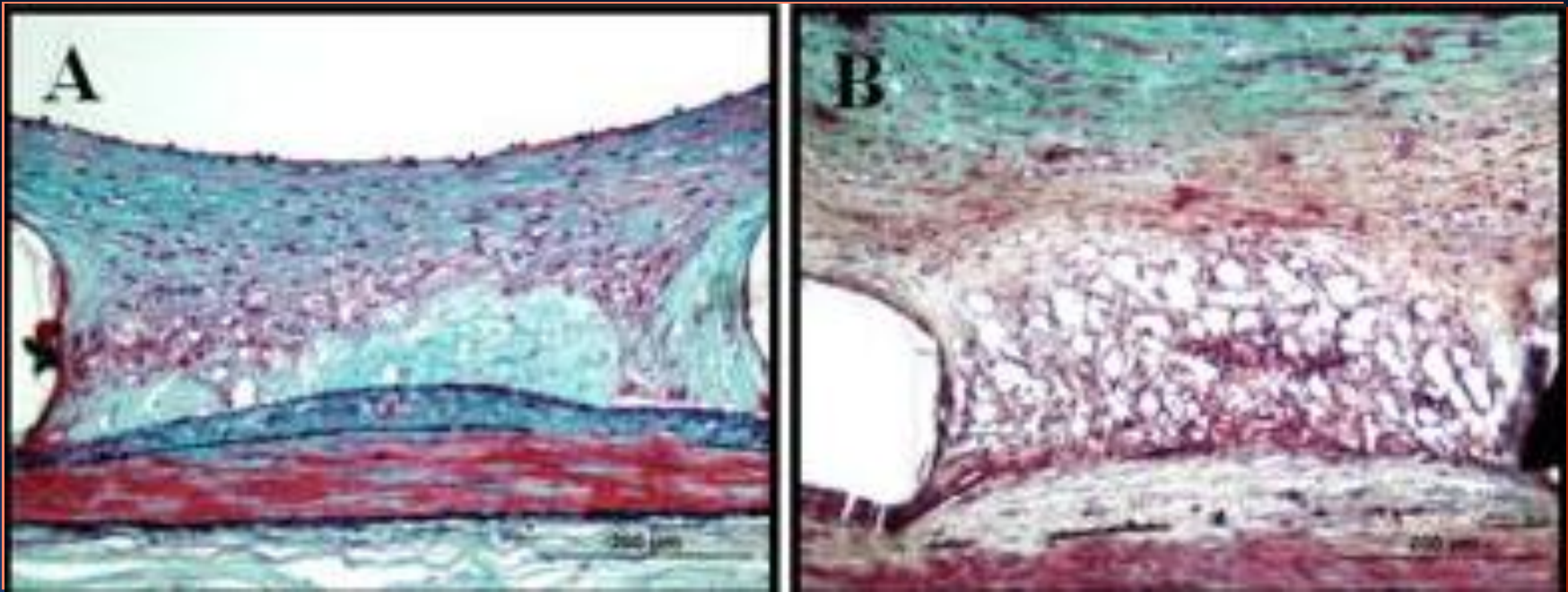
In-stent Neoatherosclerosis



Thin Cap Fibroatheroma 5 yrs after a BMS

Left (Magnified view): Macrophages infiltrating thin fibrous cap

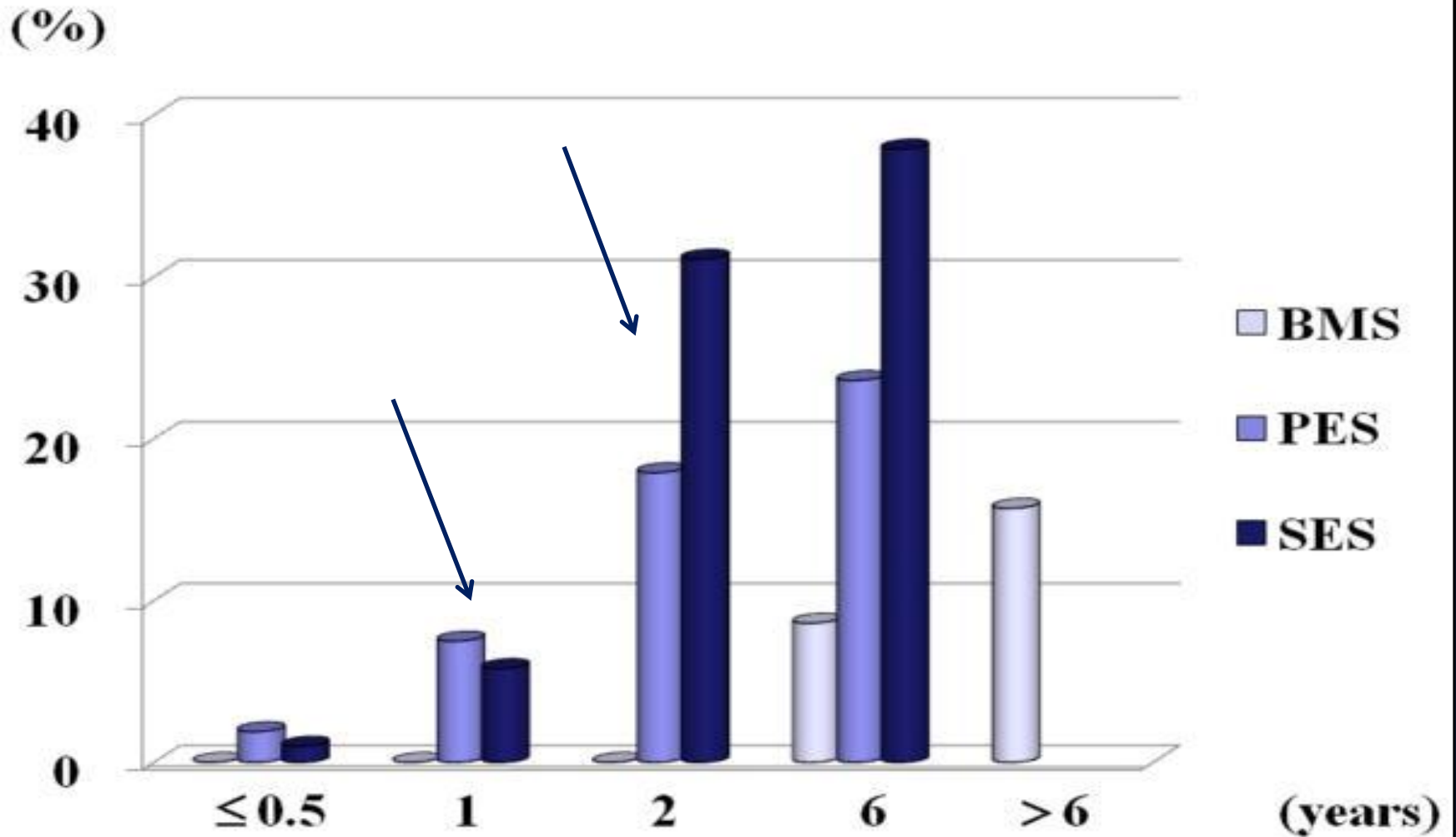
In-stent Neoatherosclerosis



Foamy Macrophages with early necrotic core in a Cypher stent after 13 months

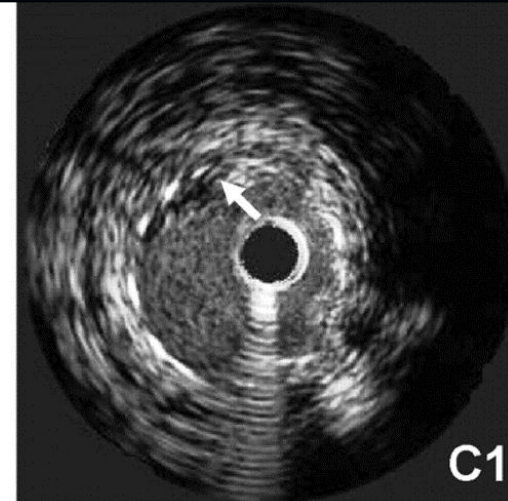
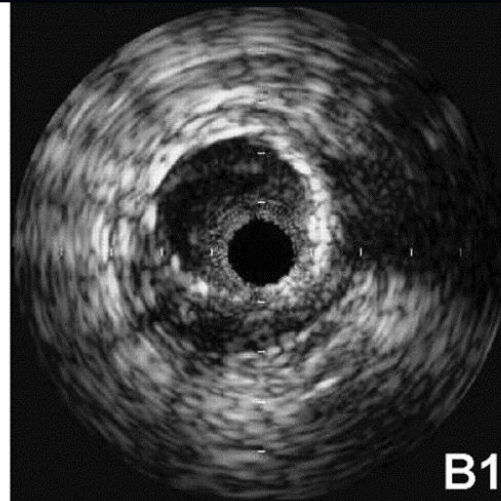
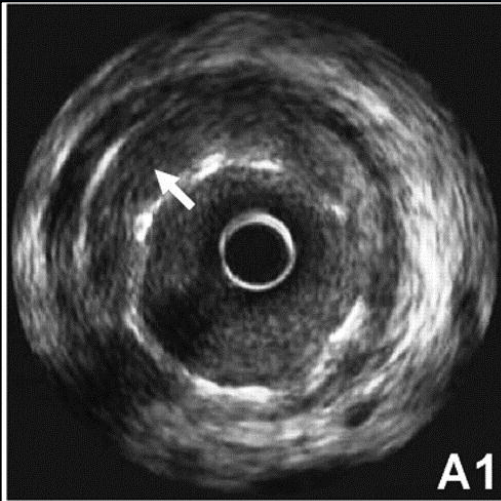
Neointimal Hyperplasia: Earlier in DES

Cumulative Incidence of Atherosclerotic Change

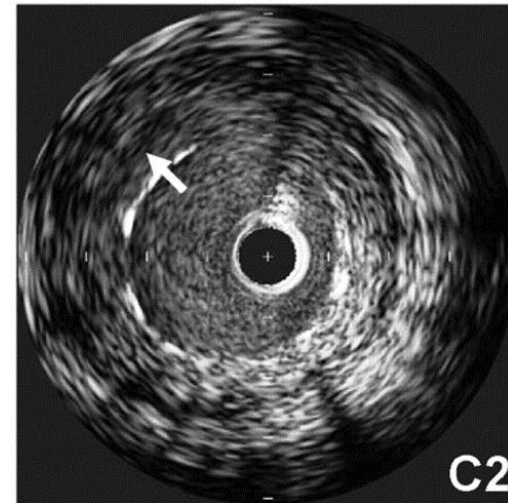
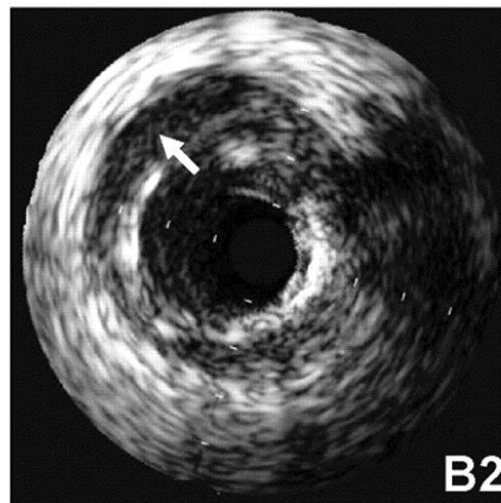
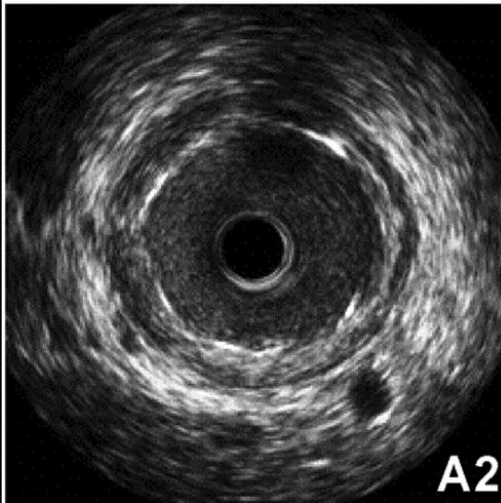


Blood Vessels change overtime: IVUS images of stent malapposition

POST STENTING



FOLLOW UP



IVUS SUBSTUDY OF HORIZONS. Guo N et al. Circulation 2010;122:1077-1084

Current DES in the U.S.

Second Generation stents

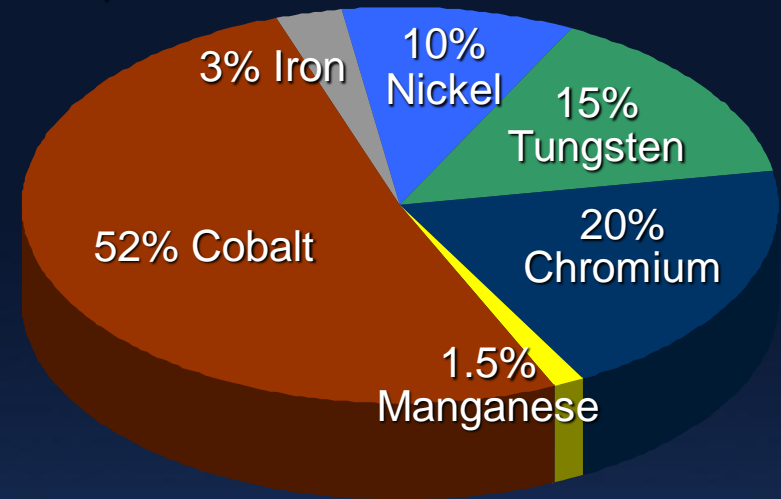
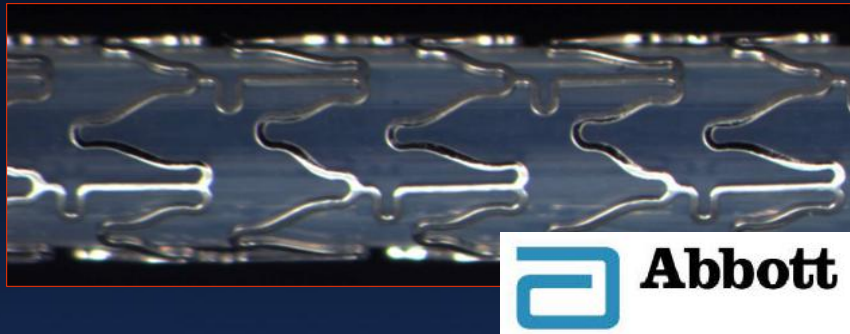
- Promus (Bsc) / Xience (Abbott): 2008
- Promus Element (Bsc): 2011
- Ion (Taxus with a new stent platform)
- Endeavor (2008) / Resolute (2012) (Medtronic)

About 30 DES approved in Europe. About 80% DES used are the above listed. About 20% of market share are “other stents”.

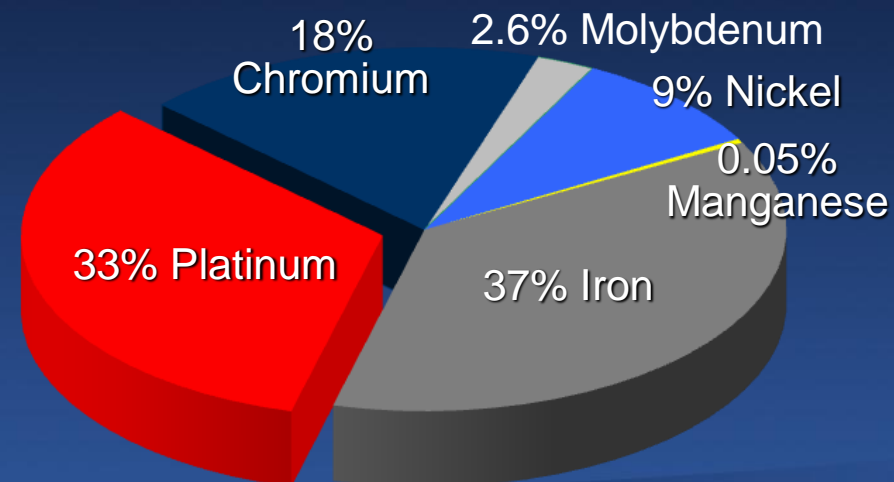
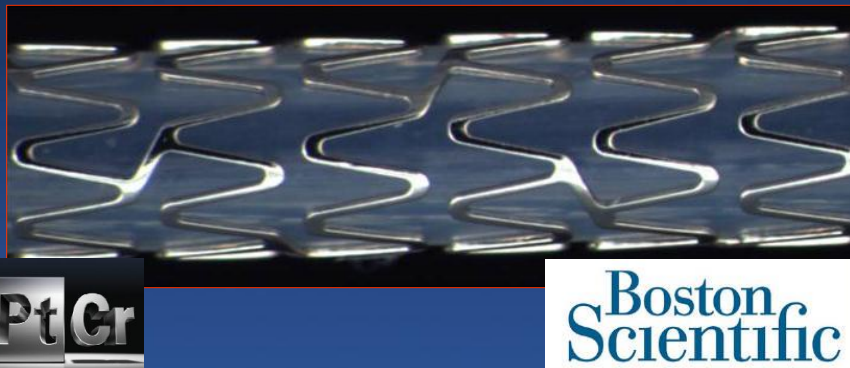
Everolimus-Eluting Stents: New standard

Polymer: PBMA & PVDF-HFP (7 μ m thickness)

XIENCE V (CoCr-EES)



PROMUS Element (PtCr-EES)

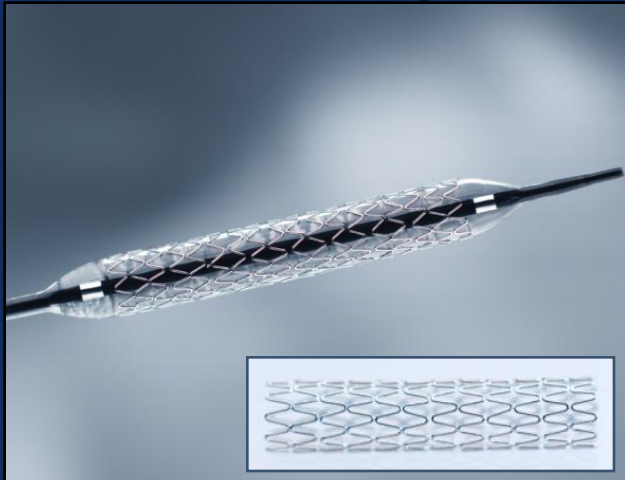


PBMA=poly (n-butyl methacrylate) (primer layer);
PVDF-HFP=poly (vinylidene fluoride-co-hexafluoropropylene) (drug matrix layer)

Stone GW et al. JACC 2011; 57:1700-8

Endeavor DES System

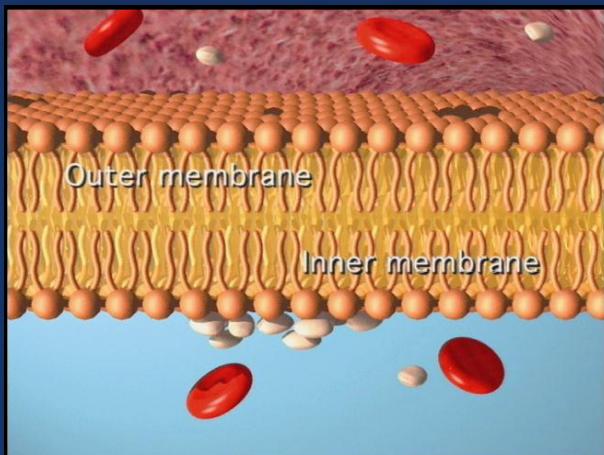
Driver Cobalt Alloy Stent



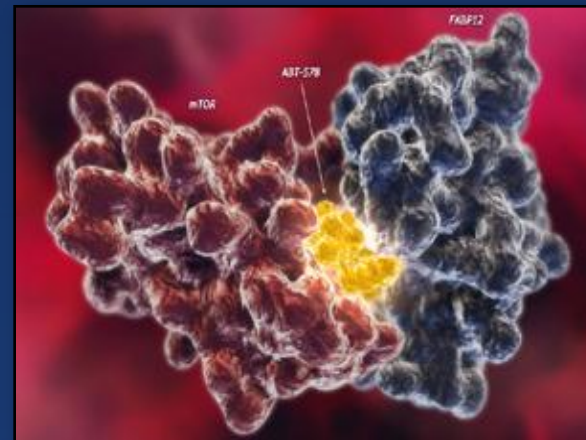
Stent Delivery System



PC Carrier



Drug: Zotarolimus



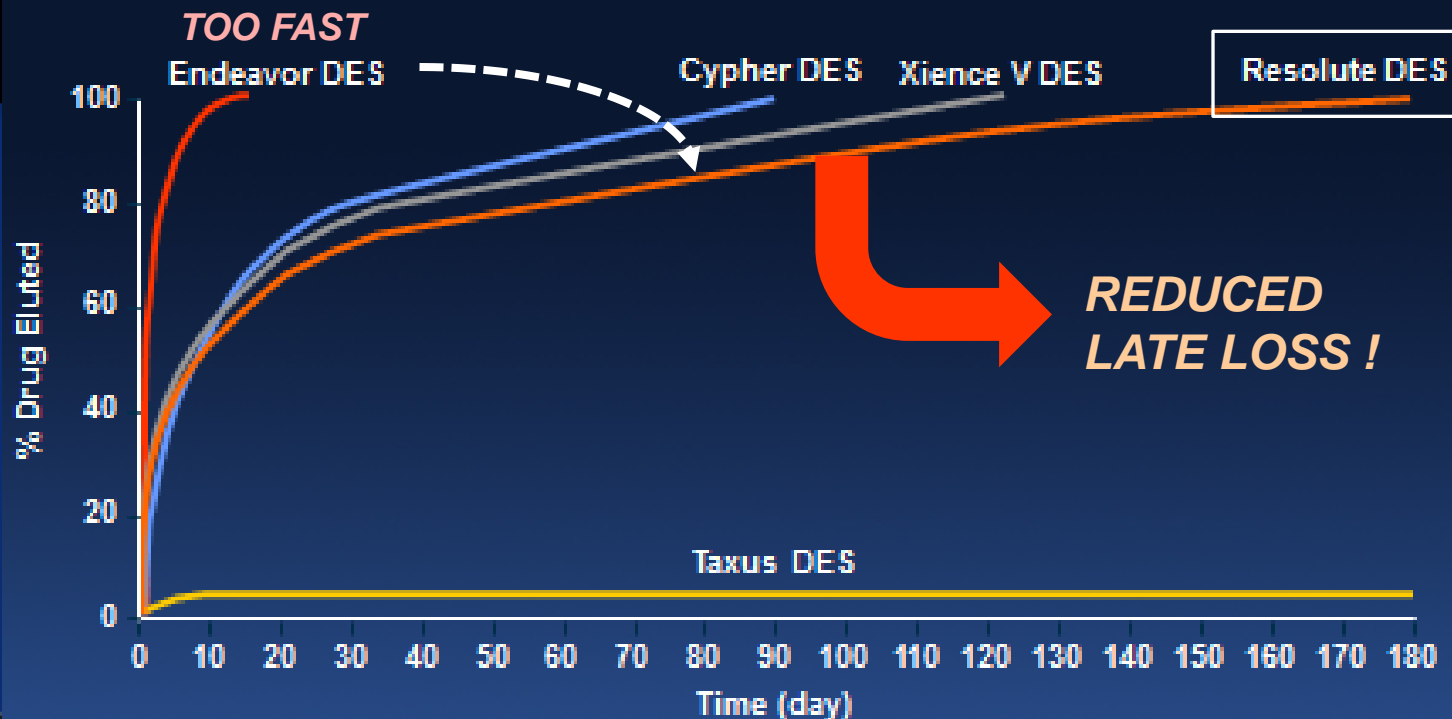
Resolute DES System

Integrity Cobalt Alloy Stent

Stent Delivery System

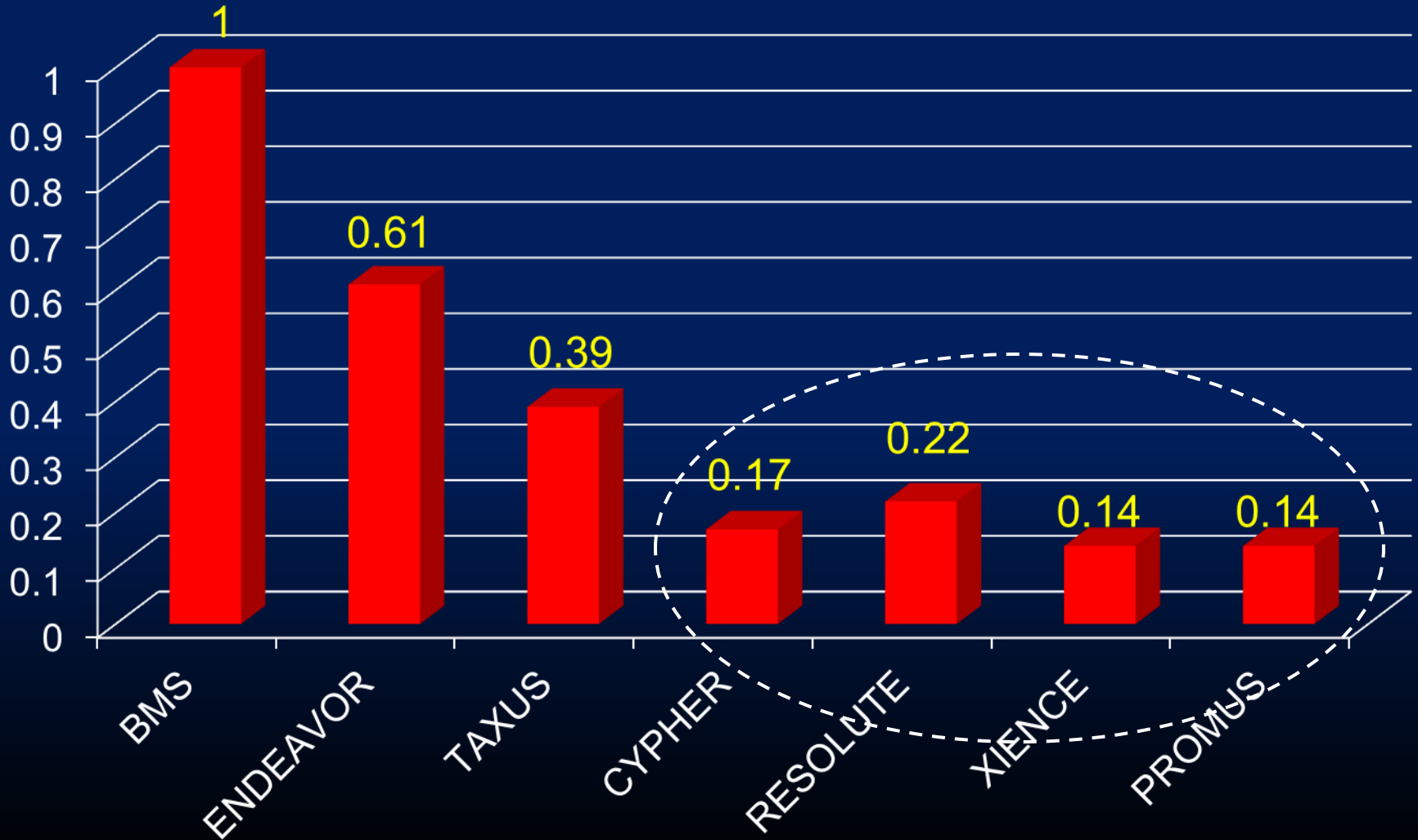
Drug Elution

Comparison to 180 days



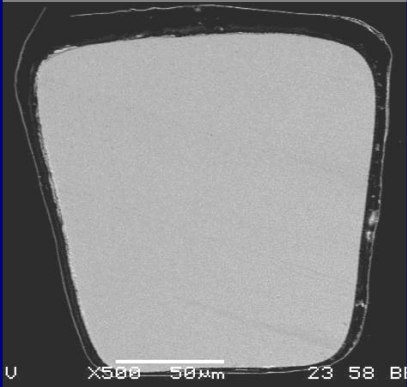
Late Loss* (mm) at 8-9 months

In-stent late loss



DES Strut and Polymer Thickness

CYPHER[®]



Strut Thickness:

140 μm

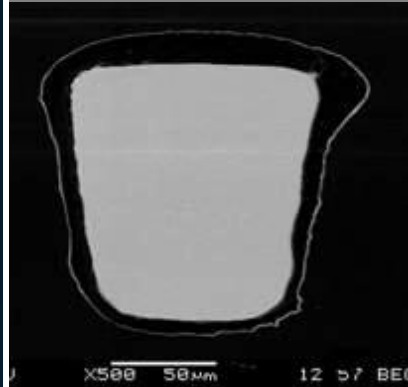
Polymer Thickness:

12.6 μm

Total:

165.2 μm

TAXUS[®]



Strut Thickness:

132 μm

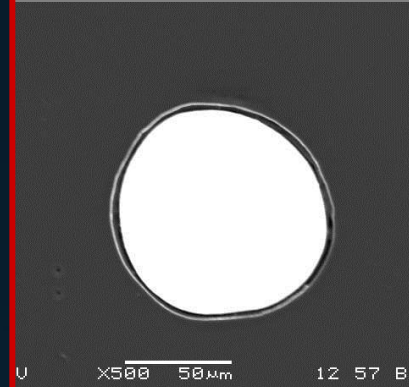
Polymer Thickness:

16 μm

Total:

164 μm

ENDEAVOR[™]



Strut Thickness:

91 μm

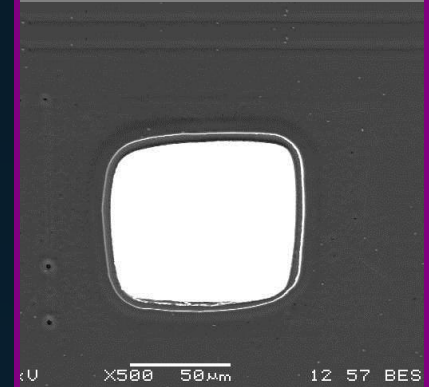
Polymer Thickness:

5.3 μm

Total:

101.6 μm

XIENCE[™] V



Strut Thickness:

81 μm

Polymer Thickness:

7.8 μm

Total:

96.6 μm

3.0 mm diameter stents, 500x magnification

***NOT ALL DRUG ELUTING
STENTS ARE THE SAME !***

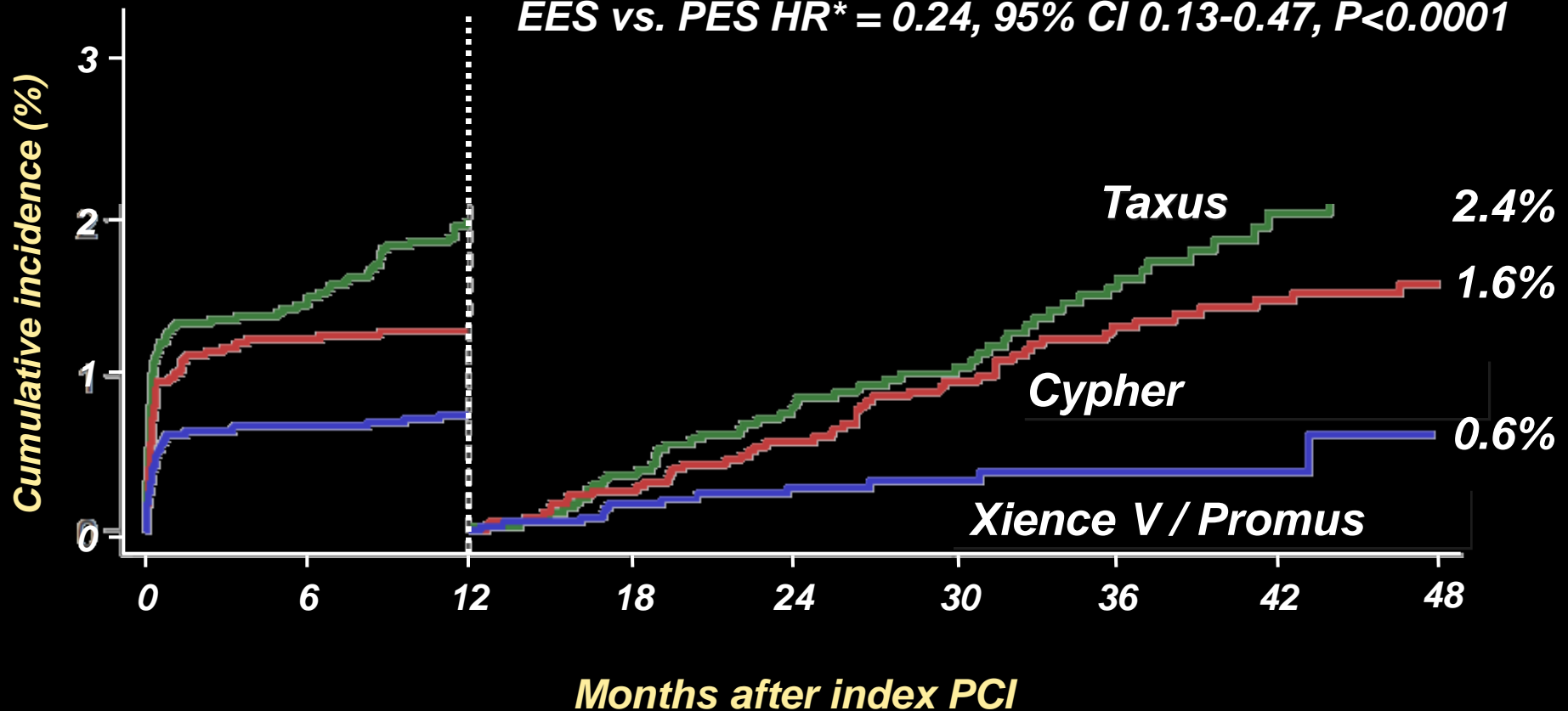
STENT THROMBOSIS: Landmark analysis

Bern Rotterdam (n=12,339 pts)

ARC DEFINITE ST

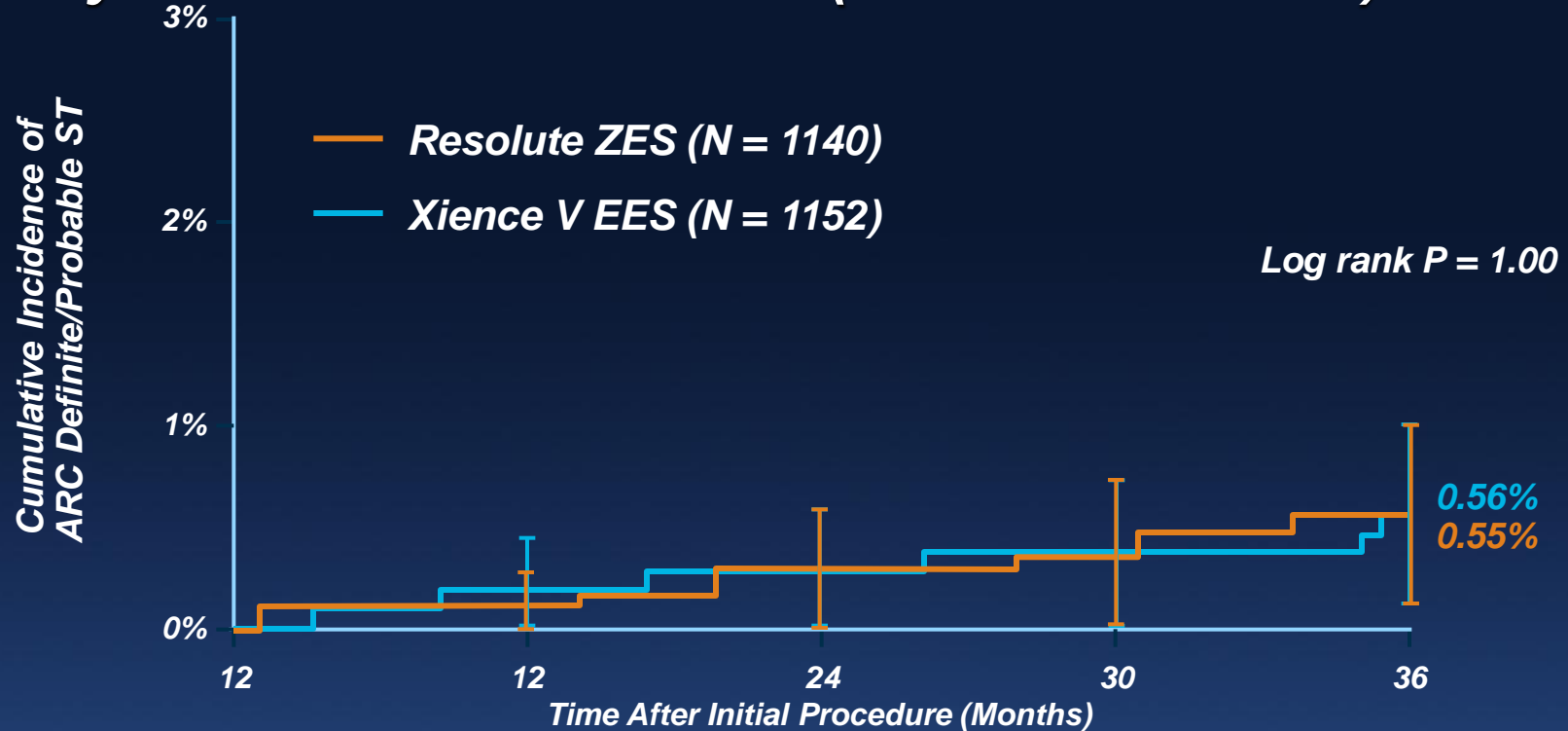
EES vs. SES HR* = 0.33, 95% CI 0.15 – 0.72, P=0.006

EES vs. PES HR* = 0.24, 95% CI 0.13-0.47, P<0.0001



RESOLUTE All Comers Randomized Trial

Very Late Stent Thrombosis (Definite/Probable) 1-3 Years



Patients at Risk			
Resolute ZES	1140	1108	1081
CI%	0.00	0.27	0.55
Xience- ES	1152	1107	1083
CI%	0.00	0.27	0.56

%DAPT	12mths	24mths	36mths
Resolute ZES	84.4	18.4	13.8
Xience EES	83.5	18.3	13.4

TAKE HOME MESSAGES

Late Stent Thrombosis is a phenomenon of first generation DES (Cypher and Taxus). Evidence suggest safety of second generation DES (Xience, Promus Element and Resolute)

In fact, Xience has gained approval in Europe for 3 months of DAPT

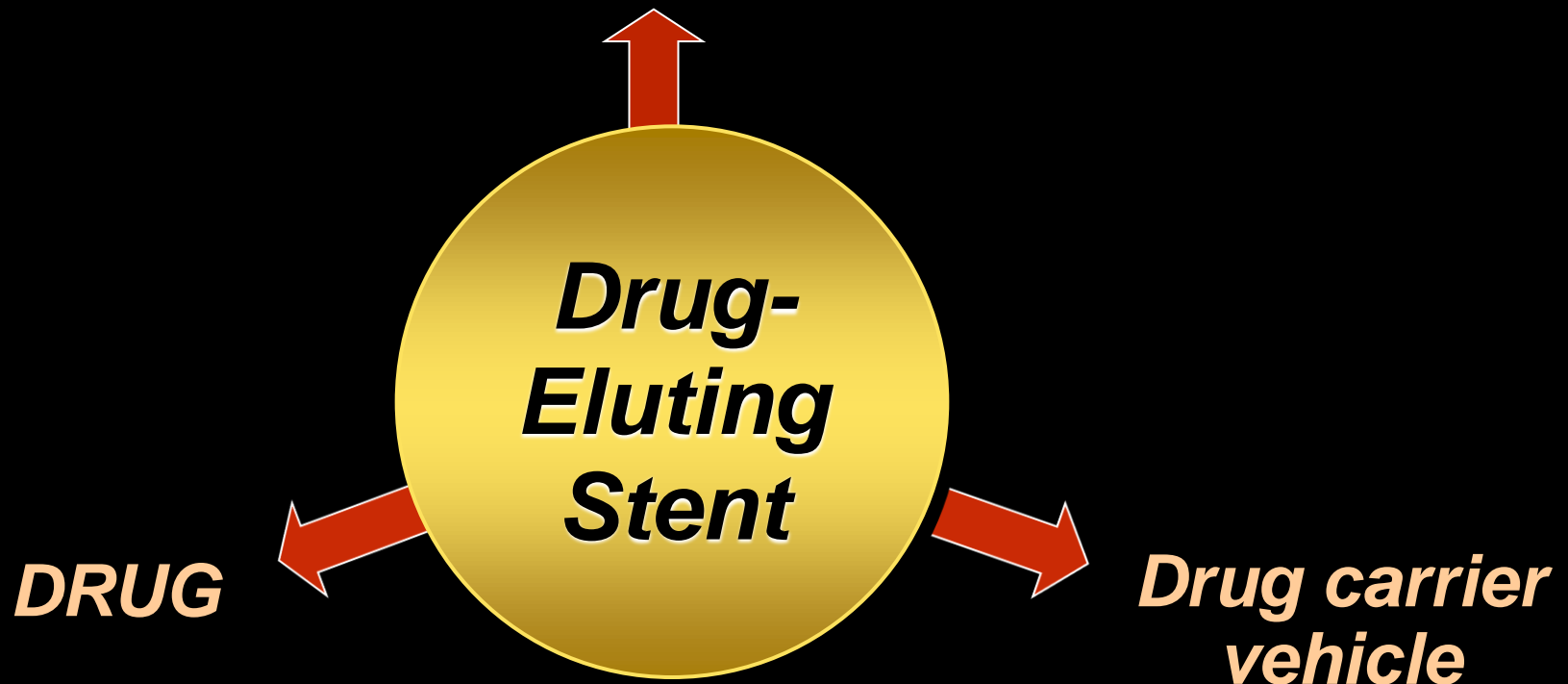
Reason: More biocompatible durable polymers:

- Fluoropolymers (Xience and Promus)
- Phosphorylcholine / BioLinx (Endeavor / Resolute)

Drug-Eluting Stents

WHICH NEEDS TO GO AND WHICH NEEDS TO STAY?

Stent design and delivery system



Polymer (drug carrier) has to go !

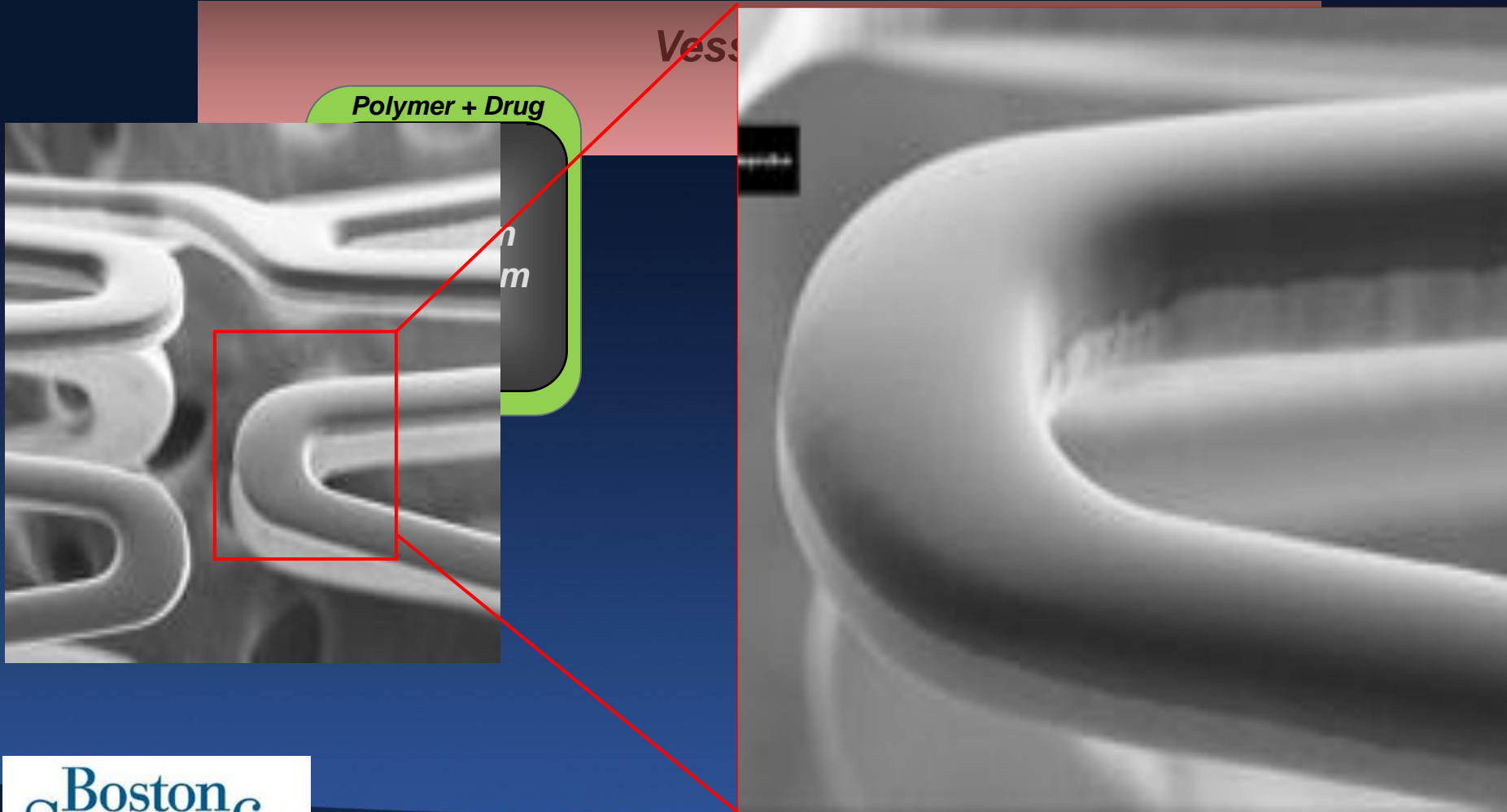
- *Bioabsorbable Polymers:*
 - *Synergy*
 - *BioMatrix*
 - *Excella*
 - *Inspiron*
 - *EPC Combo*
- *Polymer-Free:*
 - *Drug-filled stent*
 - *BioFreedom*
 - *Translumina*
 - *Vestasyn*
- *Special coatings*

Drug-Eluting Technology Evolution

Current DES
Conformal Biostable Polymer

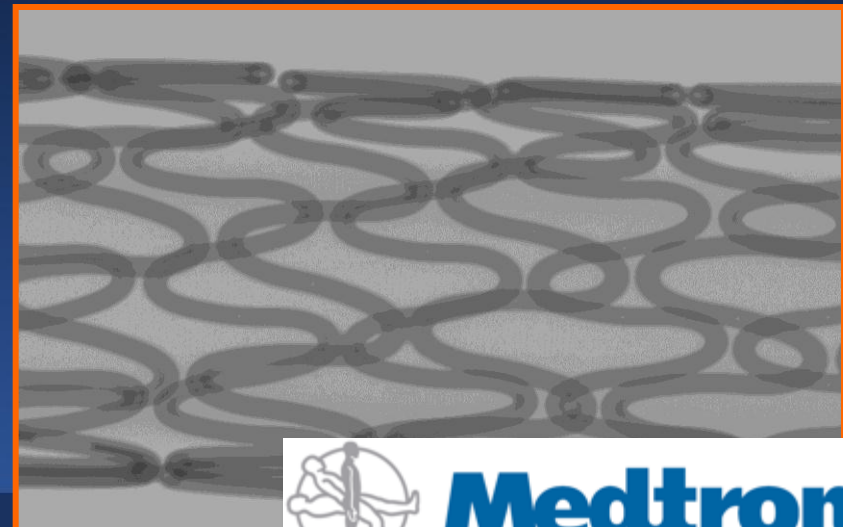
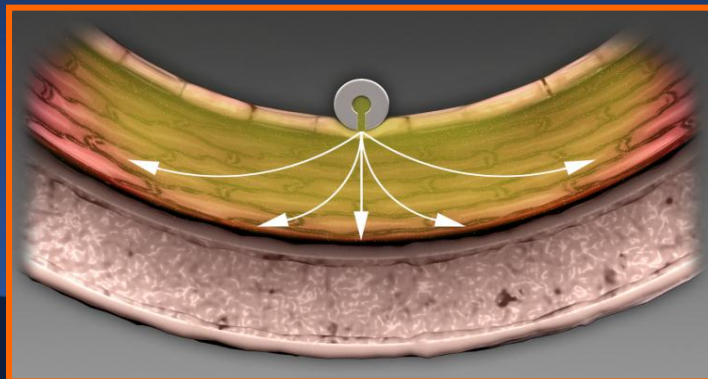
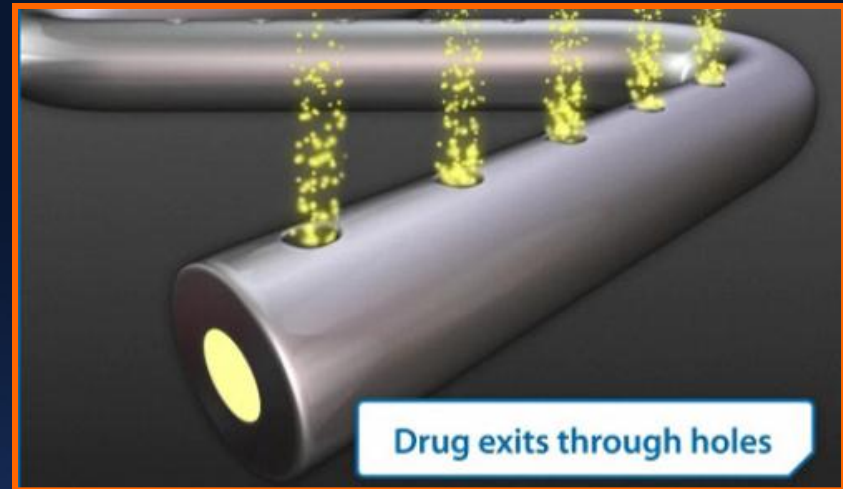
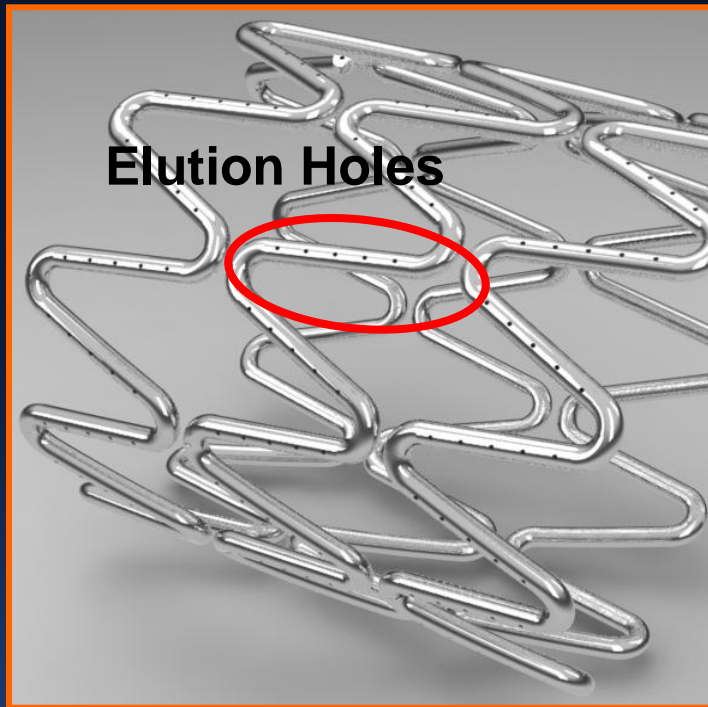


SYNERGY™ DES
Abluminal Bioabsorbable Polymer



Drug elution controlled by diffusion

Drug Filled Stent without polymer



***Bioabsorbable Vascular
Scaffolds (BVS)*:
New Scientific Breakthrough***

****Def. Temporary vascular stent, termed “scaffold” due to its being based on a temporary bioresorbable platform.***

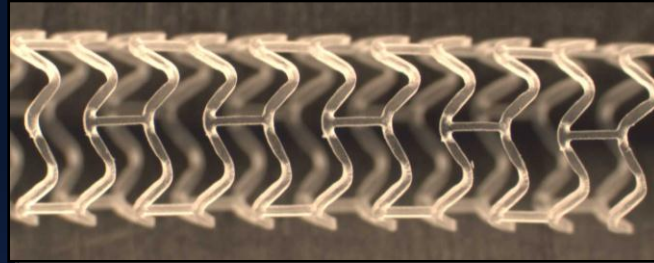
Fully Bioresorbable Stents (Scaffolds)

Igaki-Tamai



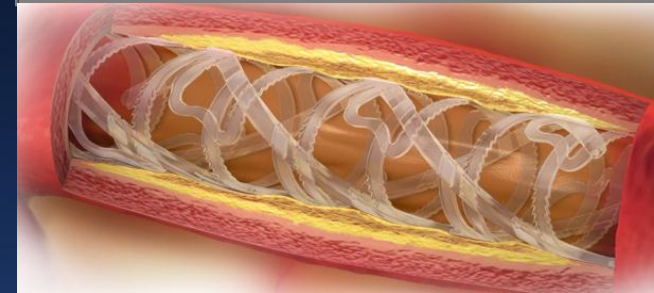
PLA

BVS



PLA (everolimus coat)

REVA



Iodinated tyrosine-polycarbonate (with PTX)

BTI



PAE-salicylate (with sirolimus)

Biotronik



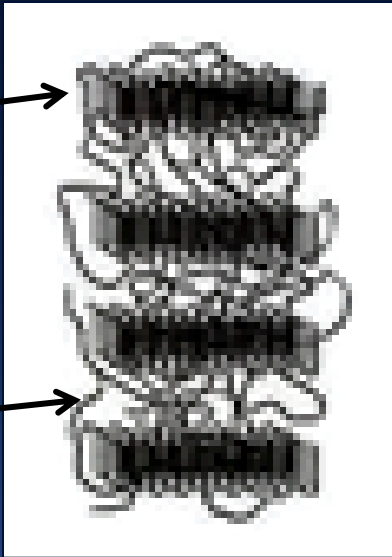
Magnesium

PLLA = Poly (L-lactide)

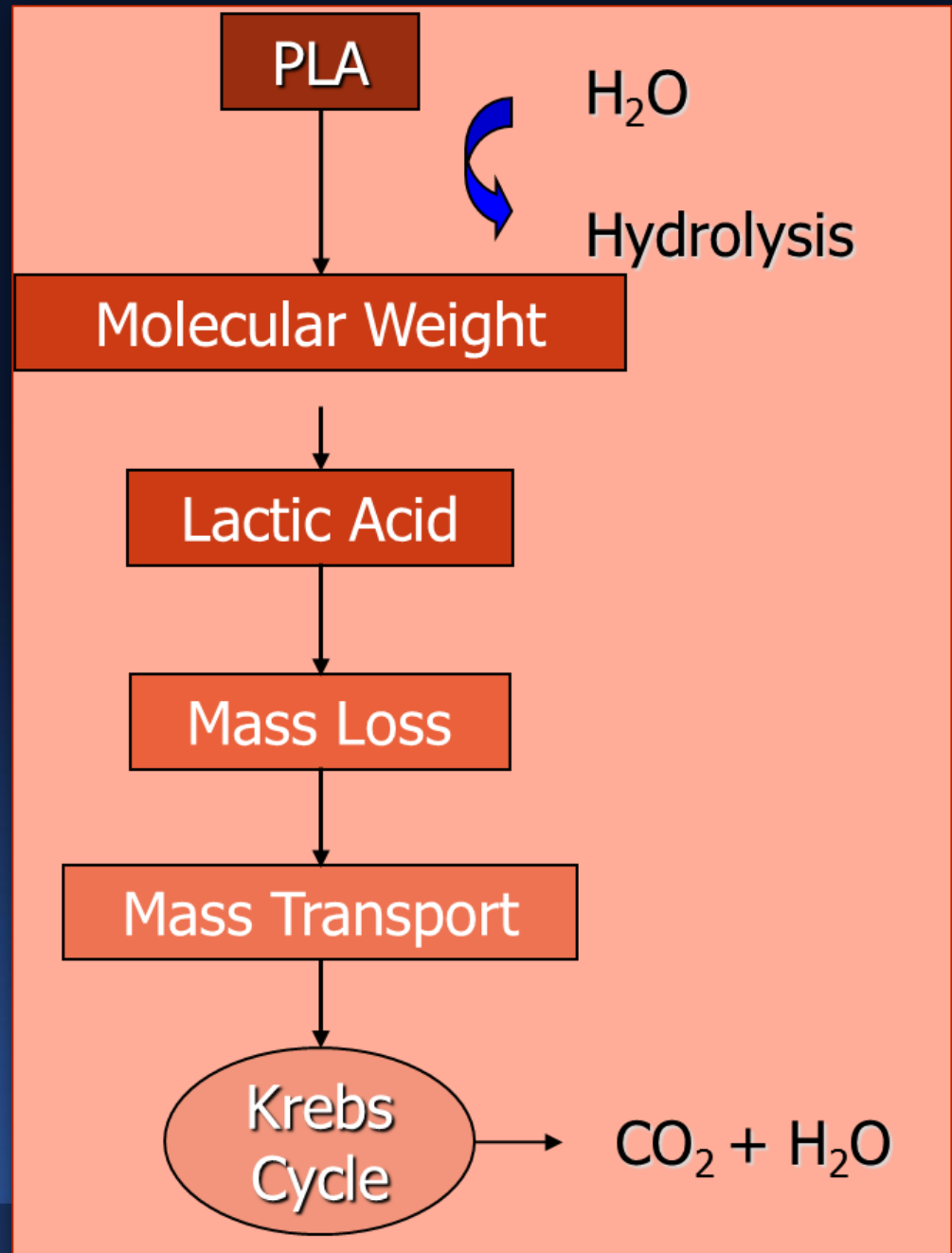
PLLA is used in numerous clinical items, such as resorbable sutures, soft tissue implants, orthopedic implants, and dialysis media.

Crystalline lamellae

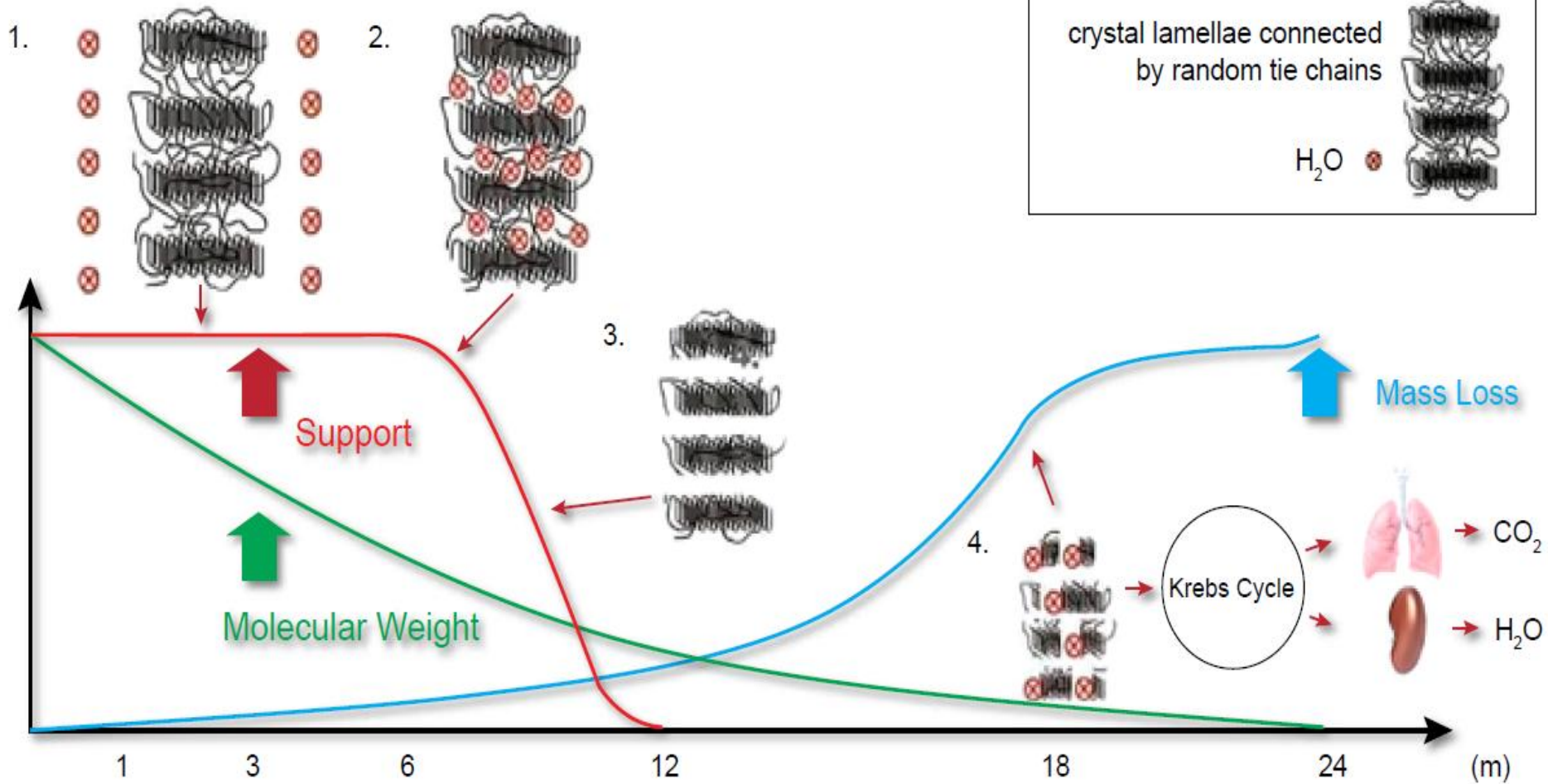
Interconnected with amorphous chains



PLLA DEGRADATION PATHWAY



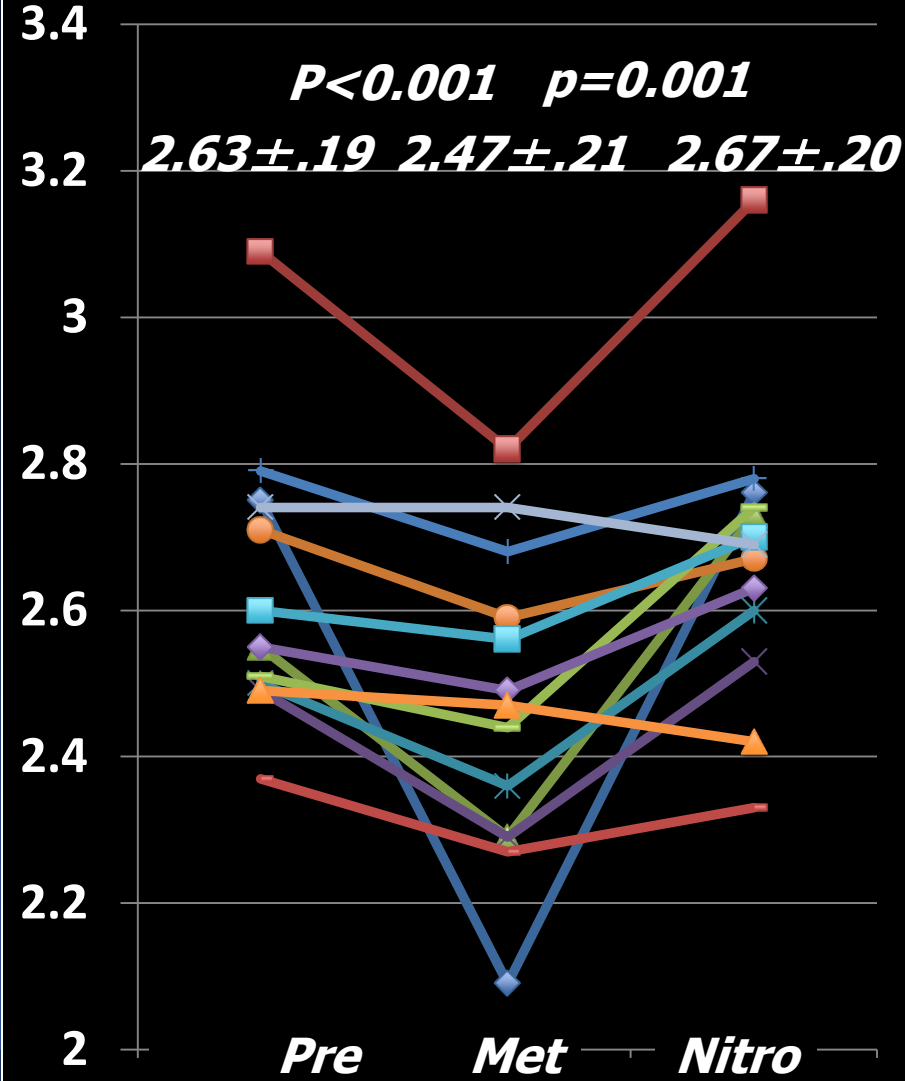
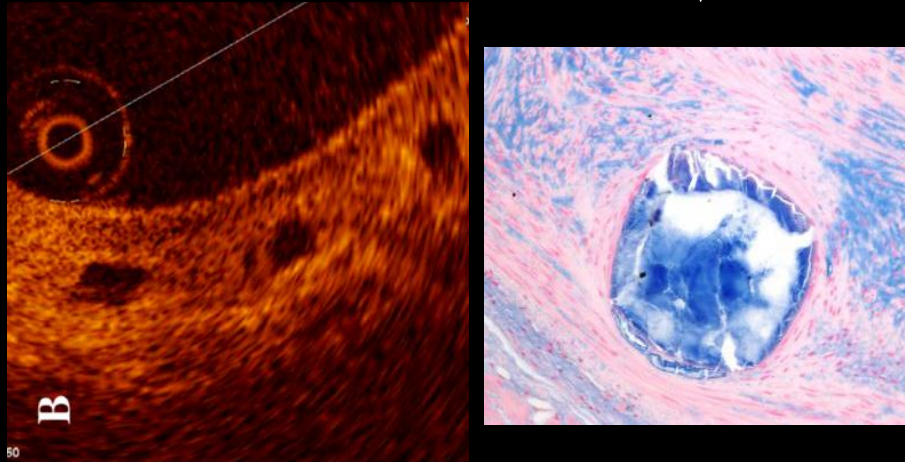
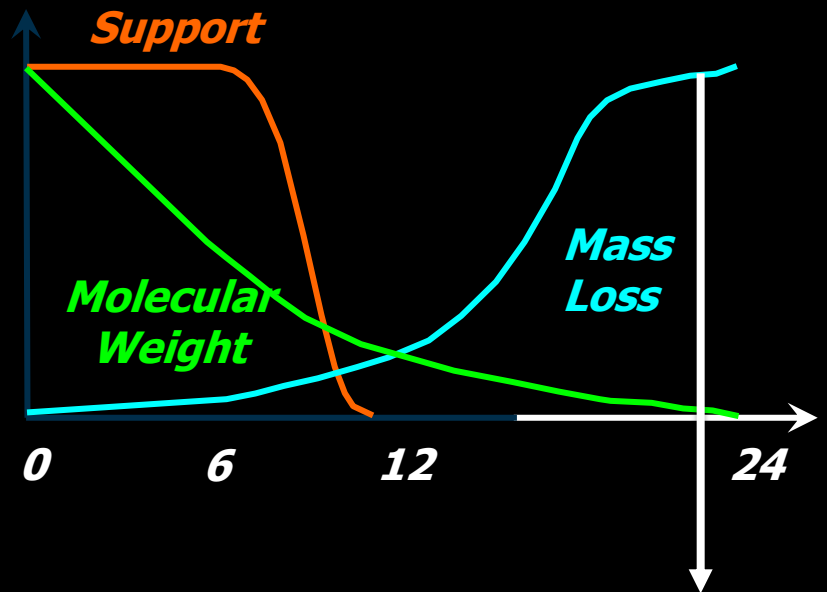
BVS Degradation



Mechanical integrity has disappeared by 12 months.

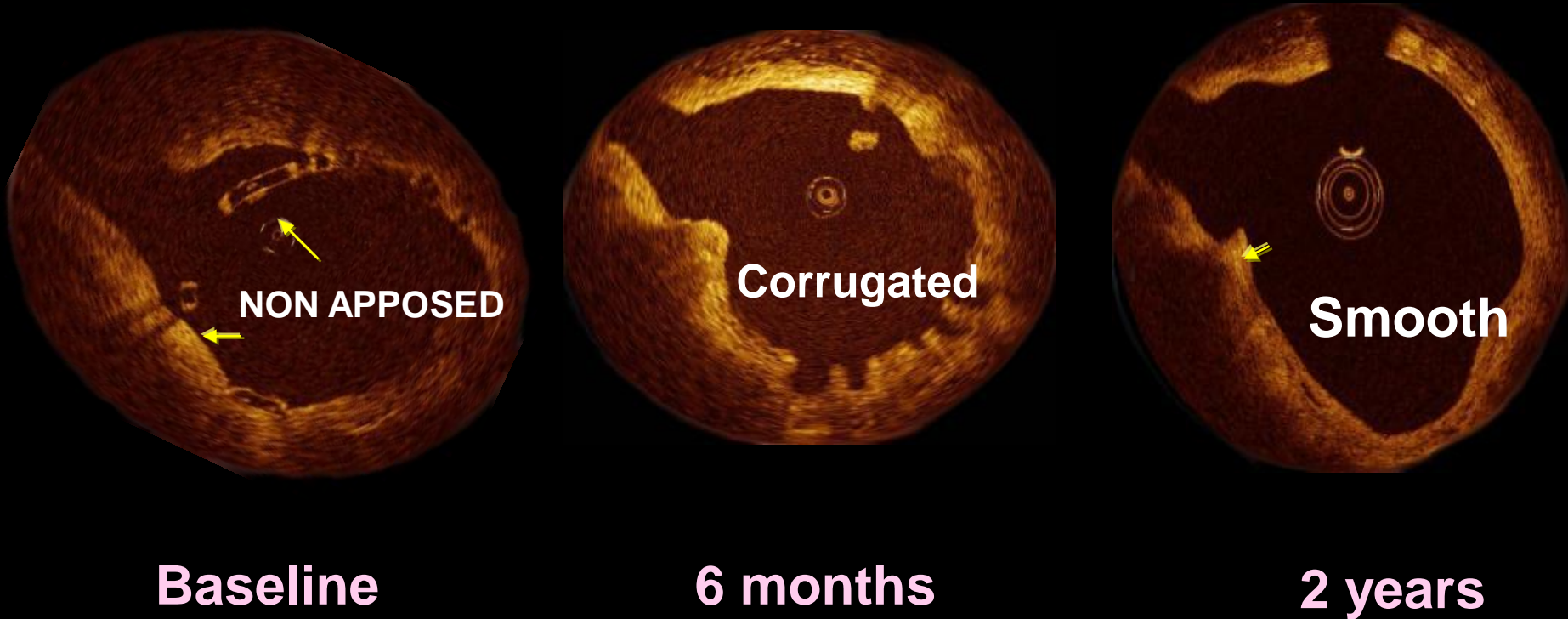
Restoration of vasomotion at 12 MONTHS

Ergonovine (n=13 patients)



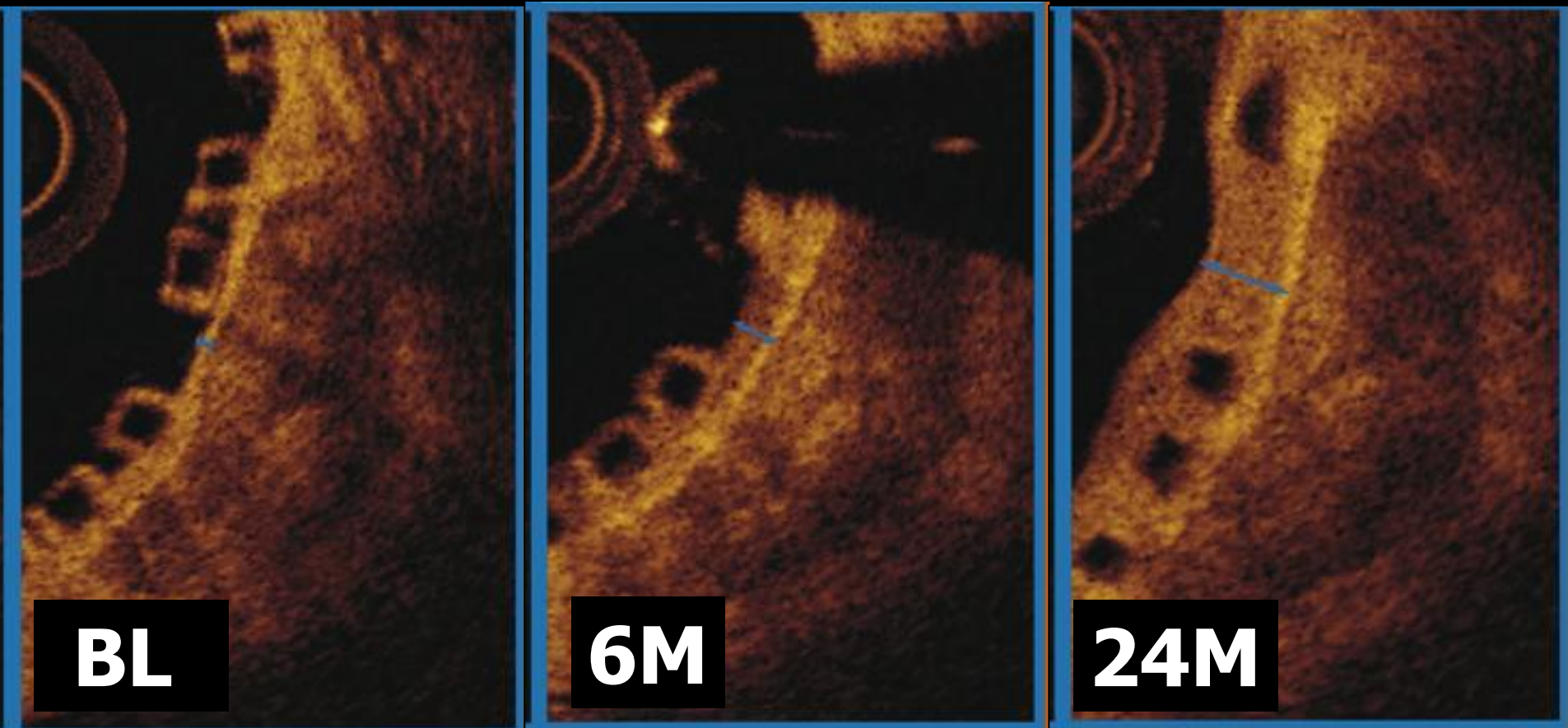
Serruys et al JACC 2011

Bioresorption is a real phenomenon



Scaffold healing results in plaque coverage: Can capping plaques prevent future Myocardial Infarctions?

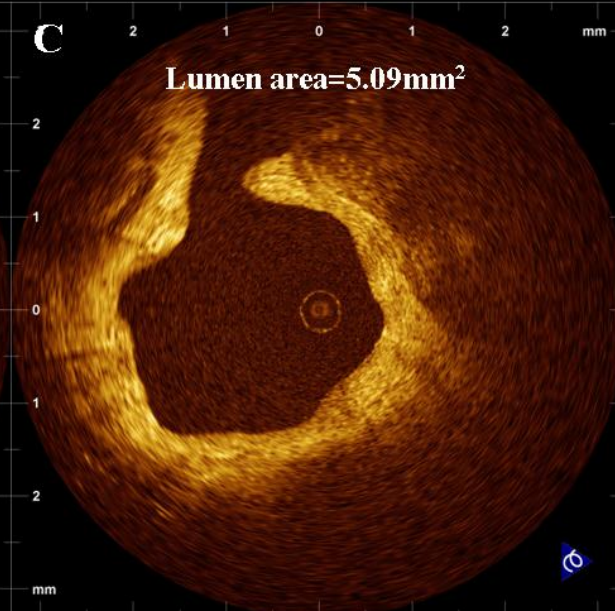
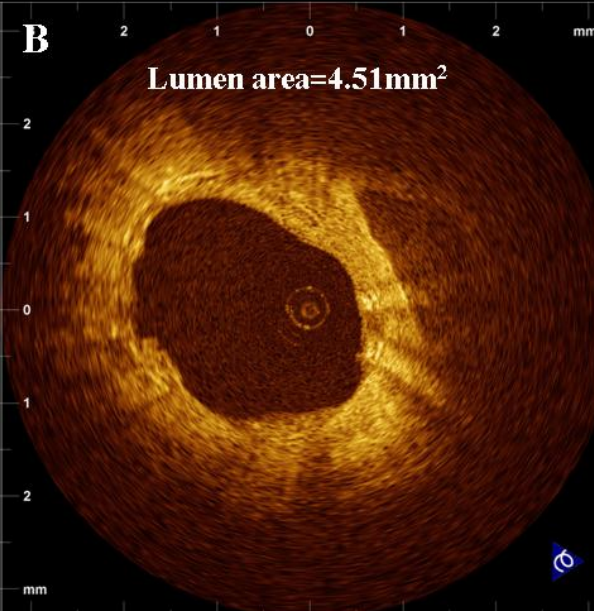
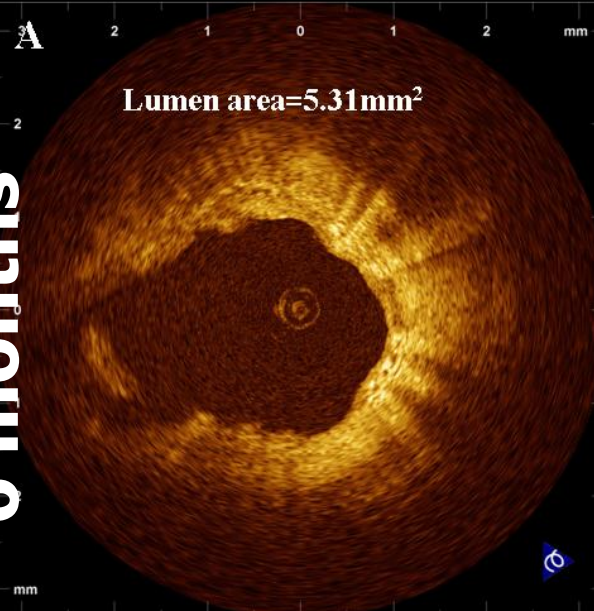
Progressive sealing and shielding of calcified plaque



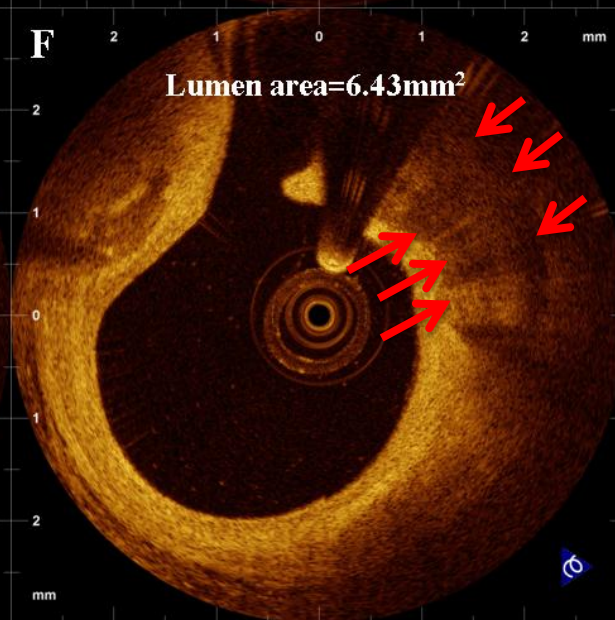
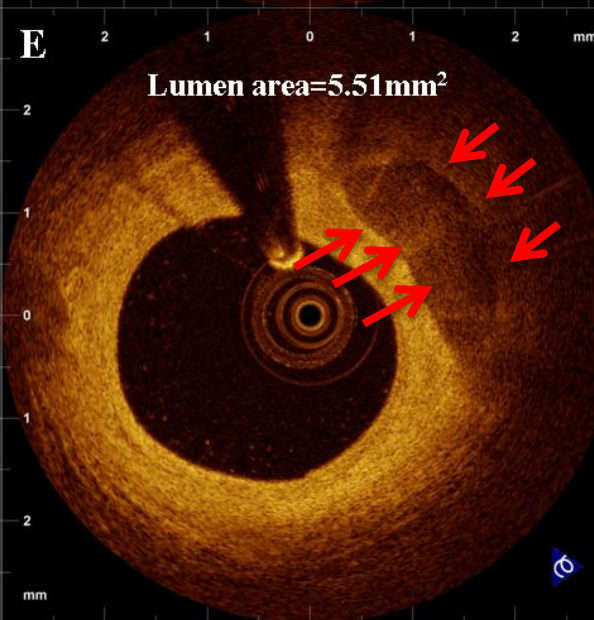
Magnified images at BL, 6M and 2Y, using the radio-opaque markers as a landmark.

**Not only the BVS can cap the plaque...
late lumen enlargement is observed!!!**

6 months



60 months



Bioabsorbable Vascular Scaffolds

Revascularization

- *Provides transient mechanical support needed: 3-6 months*
- *Drug delivery that modulates healing*

Vessel Restoration

- *Normal vessel physiology is restored: Vasomotion, pulsatility and shear forces*

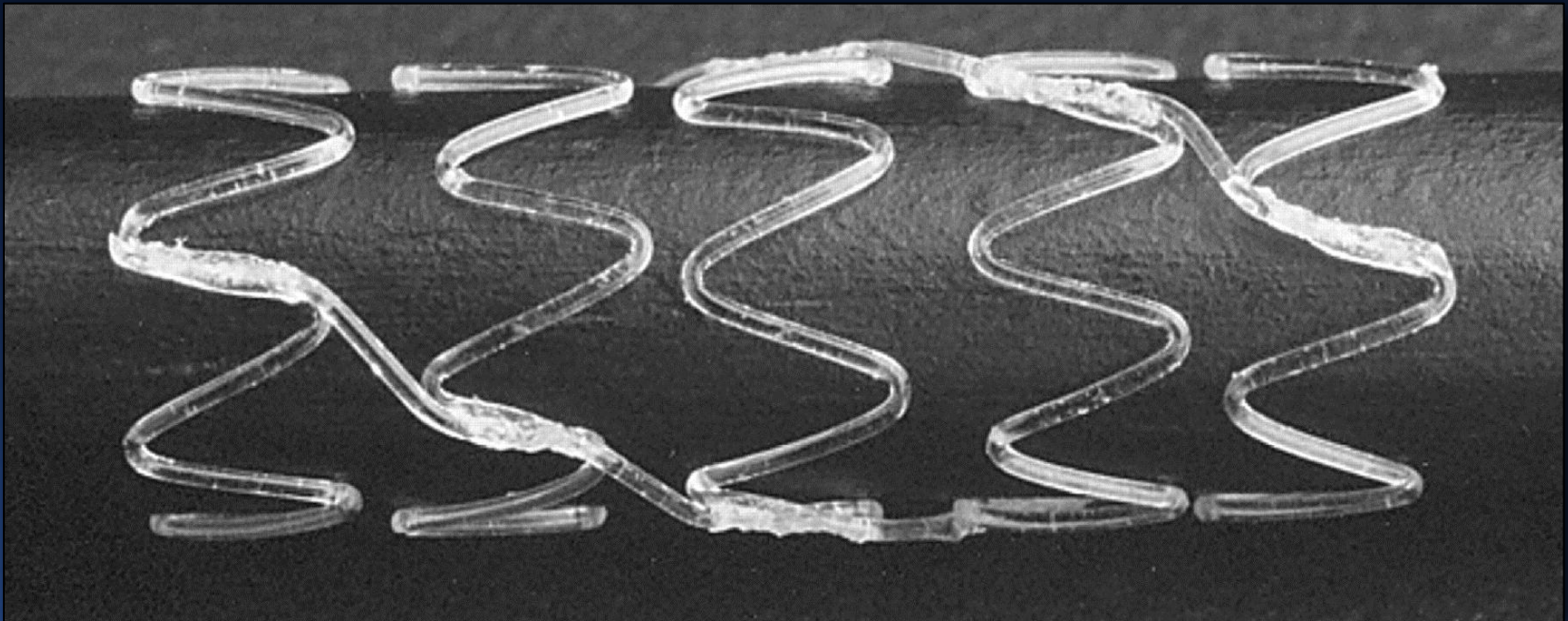
Resorption

- *Gradual fading of stent without major inflammatory changes.*
- *Lumen dimensions are preserved or enlarge. Smooth endothelial surface is restored.*

Igaki-Tamai bioabsorbable stent

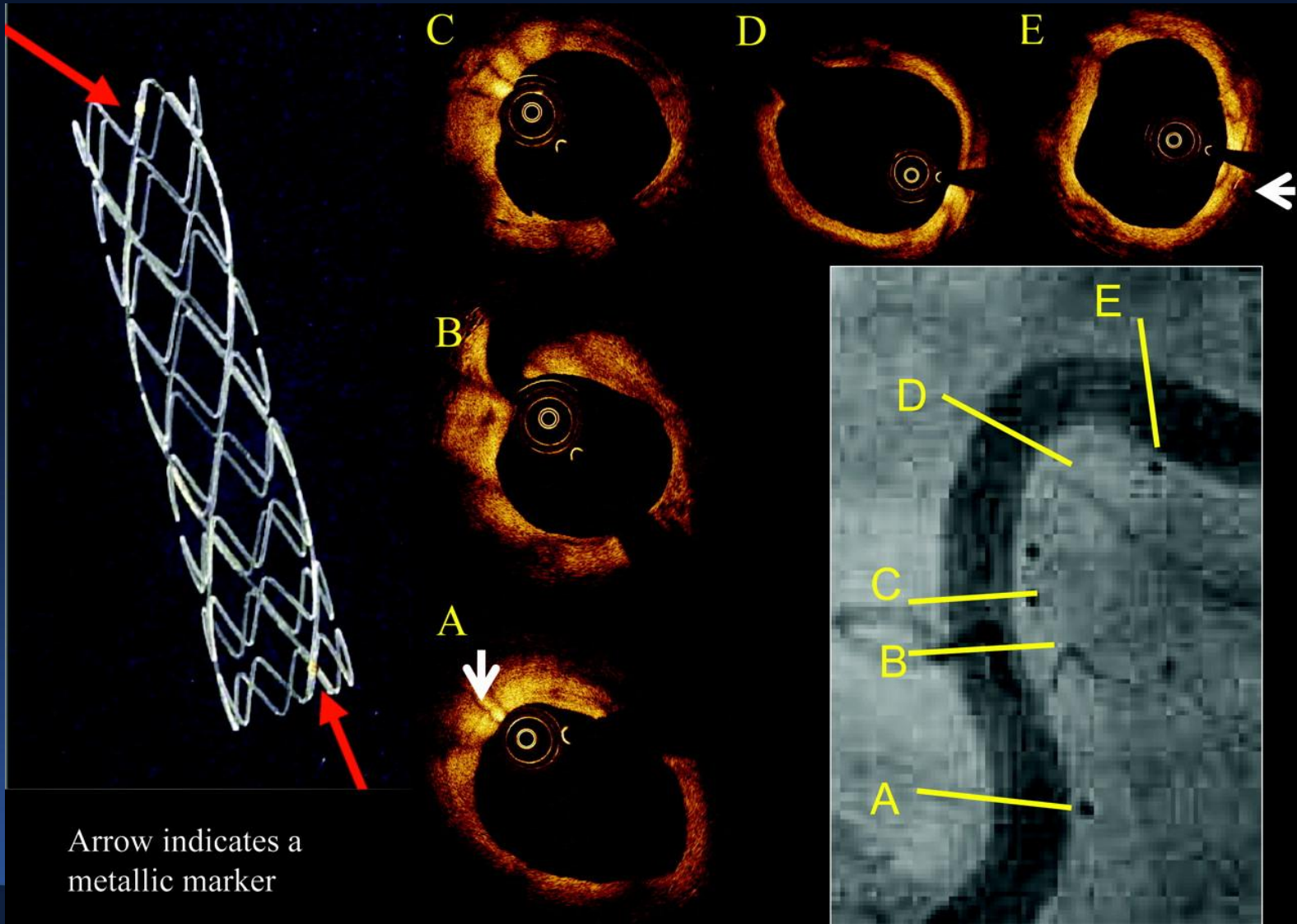
Non-drug eluting

*First BVS implanted in human
in 2000 (50 pts)*

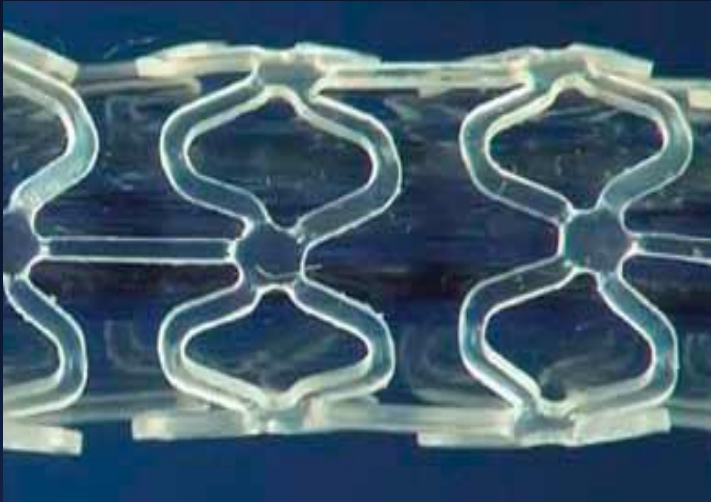


Igaki-Tamai PLLA stent

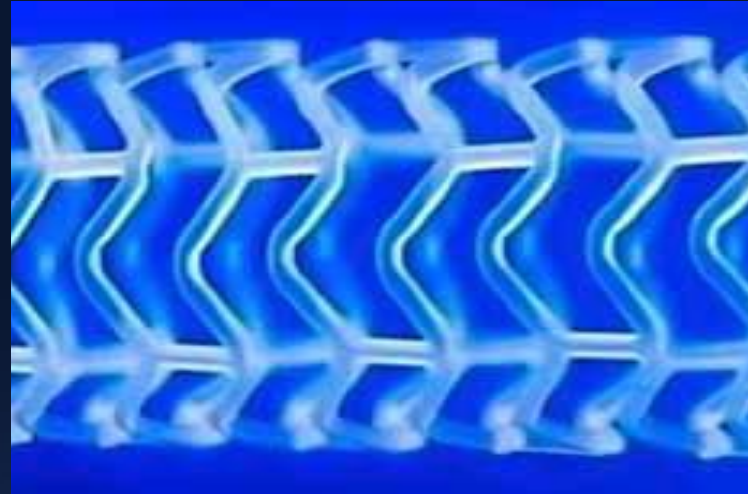
10 yr OCT images



Everolimus eluting BVS (Abbott)



**SEM Gen 1.0 Cohort A
clinical trial (2yr FU)**

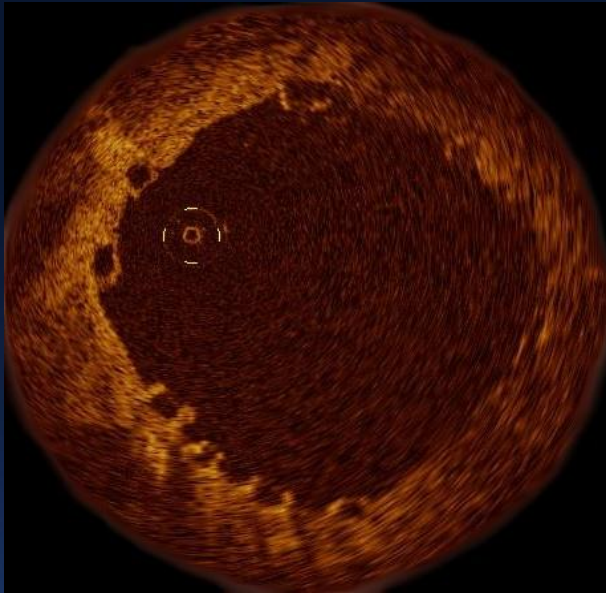


**SEM Gen 1.1 Cohort B
clinical trial (ongoing)**

- **More uniform support and drug application**
- **More radial strength and longer duration of support**
- **Storage room temp instead of refrigeration**
- **Delivery performance similar to metallic stent. Design like a Multi-Link stent**
- **Strut thickness 150 u and platinum markers at ends**

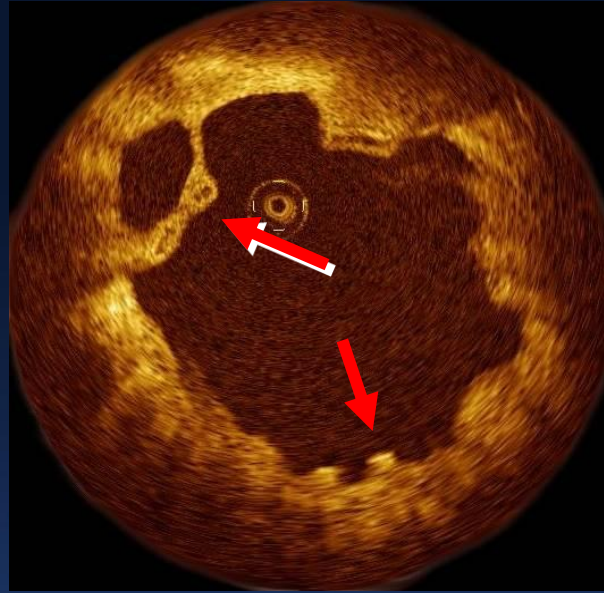
Absorb Trial: OCT Results

Post-stenting



Complete strut apposition

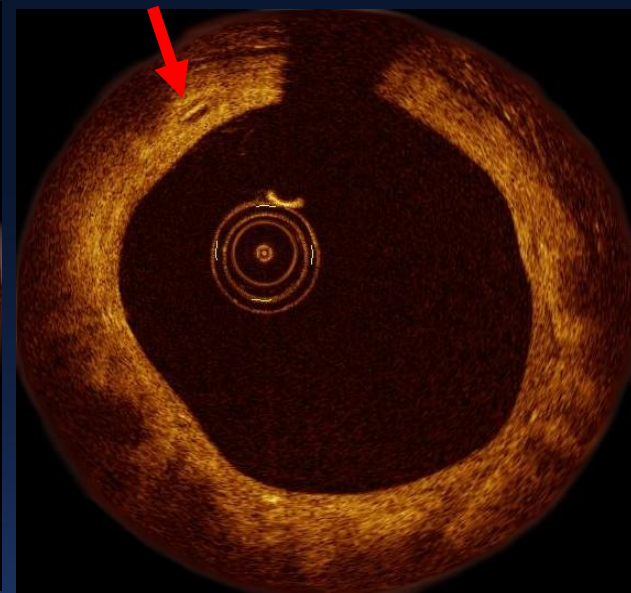
6-month



Late acquired incomplete stent apposition with tissue bridges between the struts

Corrugated endolumen

24-month



Smooth endoluminal lining

Struts largely disappeared although remnant just visible (arrow)

Drug-Eluting Balloons

**SeQuent[®] Please
Paccocath[®] Technology – B. Braun**



DIOR[®] - EuroCor



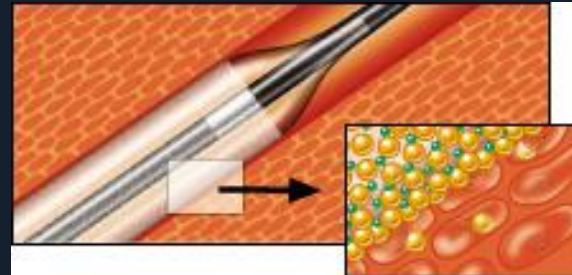
**Cricket[™]
Mercator**



**Genie[™]
Acrostak**



**In.Pact
Invatec**



Elutax[®] - Aachen Resonance



**ClearWay[™]
Atrium**



CONCLUSIONS

- Stents are the standard of care in PCI
- DES eliminated restenosis in most patients
- First generation stents (Cypher and Taxus) are associated with LST / VLST, ED, SF, and accelerated neoatherosclerosis.
- Second generation stents (Xience, Promus and Resolute) have resolved some of these safety issues (and should not carry the stigma of first generation stents)
- Further safety with new DES designs (absorbable polymers or no polymers)
- BVS is the next frontier
- The delivery of drugs (DEB) and “scaffolding” arteries will become more common than “stenting” arteries

Thank you !