

Biomime

Bulgarian experience and clinical data

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Results from a single-centre, all-comer retrospective registry of the use of BioMime™ coronary stent system.

- The conducted study was a retrospective, non-randomised, single-arm, clinical registry of the performance of the BioMime SES in the treatment of **all-comer patient population** in a single cardiovascular PCI capable institution.
- The objective was to determine the long-term safety, feasibility and efficacy of this stent system in patients indicated for percutaneous coronary intervention (PCI). All patients were treated in a single institution (Multiprofile hospital for active treatment MHAT “Blagoevgrad” AD, Blagoevgrad, Bulgaria).
- Coronary native and graft vessels with reference diameter (RD) 2.25 to 4,5 mm (by visual estimation); with diameter stenosis (DS) of 50% to 100% were treated. The study had approval from the local ethics committee of MHAT “Blagoevgrad” AD.

Design of the registry, follow-up and endpoints

A total number of 262 patients were treated with PCI solely with BioMime stent implantation starting 01/Nov/2011. The end of the Follow-up period was up to 01/Nov/2013. The following variables were analysed:

- Patients' baseline characteristics, including co-morbidities, ejection fraction at admission, type of anti platelet medication.
- Interventional procedure variables (indications for PCI, vessels treated, total number of stents per patient, type of stenting technique, total number of stents evaluated, stent length and diameter, mean deployment pressure).
- Details about the performance of the device were especially sought, e.g. (shaft breakage, balloon rupture, stent fracture, stent loss, stent thrombosis, in-stent restenosis).
- The clinical follow-up included assessment of major adverse cardiovascular events (MACE) **based on patient survival**; target lesion revascularization. The time points at which events were assessed were at the end of the PCI, at hospital discharge, every 3 month at year 1 and then every 6 months.

Patient population and baseline characteristics

- Patients included - 262
- Mean age - 65,4 years (38-87). Males - 141 (53.81%); Females - 121 (46.19%).
- The mean ejection fraction (EF) at admission was 54.1%.

Table 1 - Patients' Baseline characteristics-1

	Absolute number of patients	Percentage
Diabetes Mellitus	120	45.80
Hypertension	228	87.02
Dyslipidemia	224	85.49
Ejection fraction (EF) at admission		
EF<40%	14	5.34
EF-41-49%	48	18.32
EF>50%	200	76.33

PCI procedure

- PCI appropriateness was based on ESC guidelines
- Radial approach 5-7 F was preferred, although switch to femoral was done in isolated cases.
- The target lesions could be pretreated with a regular balloon angioplasty. Direct stenting was allowed. Postdilation was left on operator's discretion.
- BioMime SES device was available in the

Clinical scenario and lesions

- Stable forms of coronary artery disease (SCAD) - in 70 patients (26.72%);
- Unstable angina (UA) / non ST-elevation myocardial infarction (NSTEMI) - in 128 patients (48.85%);
- ST-elevation myocardial infarction (STEMI) - in 64 patients (24.43%).
- Total number of PCI procedures analysed - 294, of which 262 as a first (index) one and 32 staged due to multivessel coronary disease

Vessels treated and lesion subtypes

	Number of lesions	Percentage
Vessels treated		
Left main (LM)	9	2.82
Left Anterior descending (LAD)	160	50.16
Left circumflex (LCx)	92	28.84
Right coronary artery (RCA)	57	17.87
Saphenous venous graft (SVG)	1	0.31
Lesion types		
Chronic total occlusions (CTO)	11	4.62
Bifurcation (provisional 1 stent)	61	25.63
Direct stenting	125	52.52
PCI due to restenosis of BMS	41	17.23

Biomime stent parameters

399 BioMime stents were implanted in 319

arteries. Mean deployment pressure - 17,98 Bar.

Table 2 - Parameters distribution

	Absolute number of stent implanted	Percent
Stent diameter (mm)		
2.5	77	19.3
2.75	110	27.57
3	110	27.57
3.5	73	18.3
4	22	5.51
4.5	7	1.75
Stent length (mm)		
8	26	6.52
13	49	12.28
16	58	14.54
19	67	16.79
24	63	15.79
29	61	15.28
32	32	8.02
37	31	7.77
40	12	3.01

Diagram 1 - Distribution of stent diameters

Stent and patient follow-up

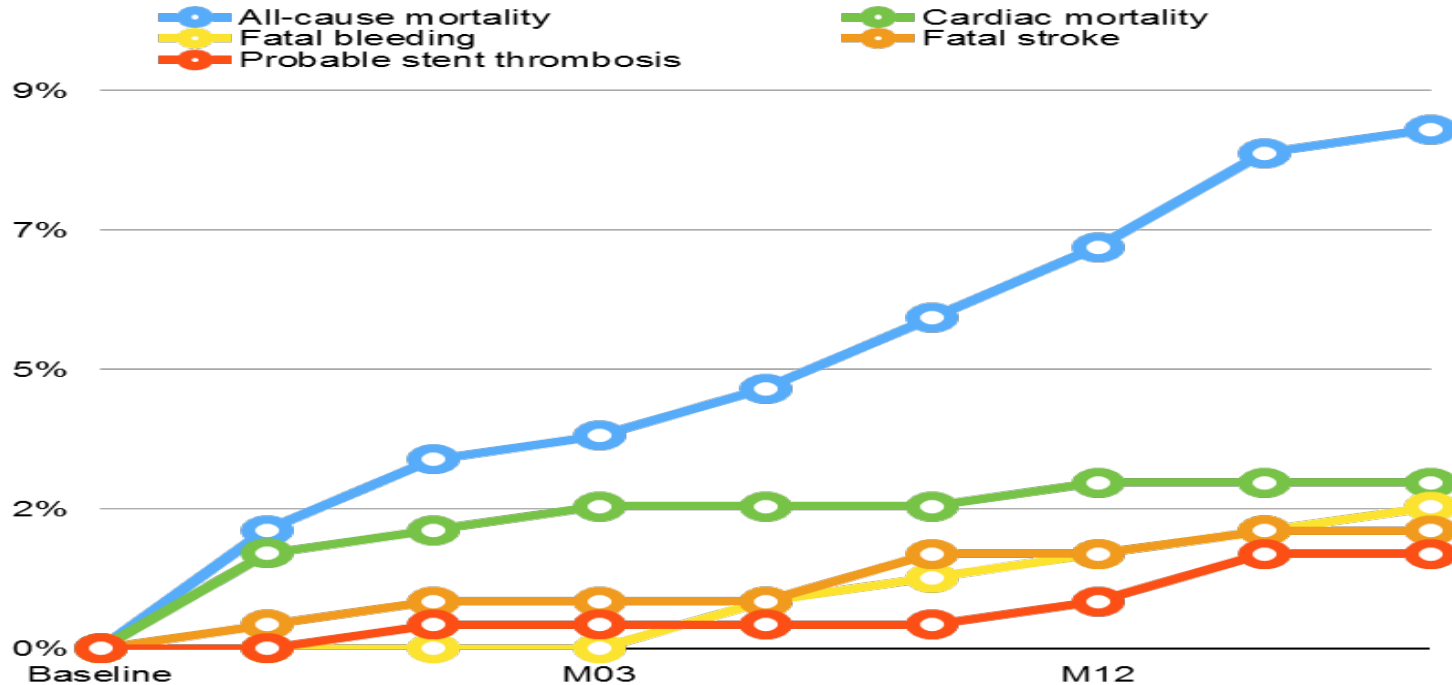
Stent performance: One case of shaft breakage. No cases of balloon rupture, stent fracture, stent migration or loss.

Six patients underwent target vessel revascularization (TLR) - 5 by PCI and 1 by CABG.

- 2 cases presented with definitive stent thrombosis and underwent urgent re-PCI.
- 4 cases presented with in-stent restenosis treated by PCI (balloon angioplasty, paclitaxel-eluting stent) in 3 cases and 1 had successful CABG. The restenosis cases were detected by a recurrence of angina.

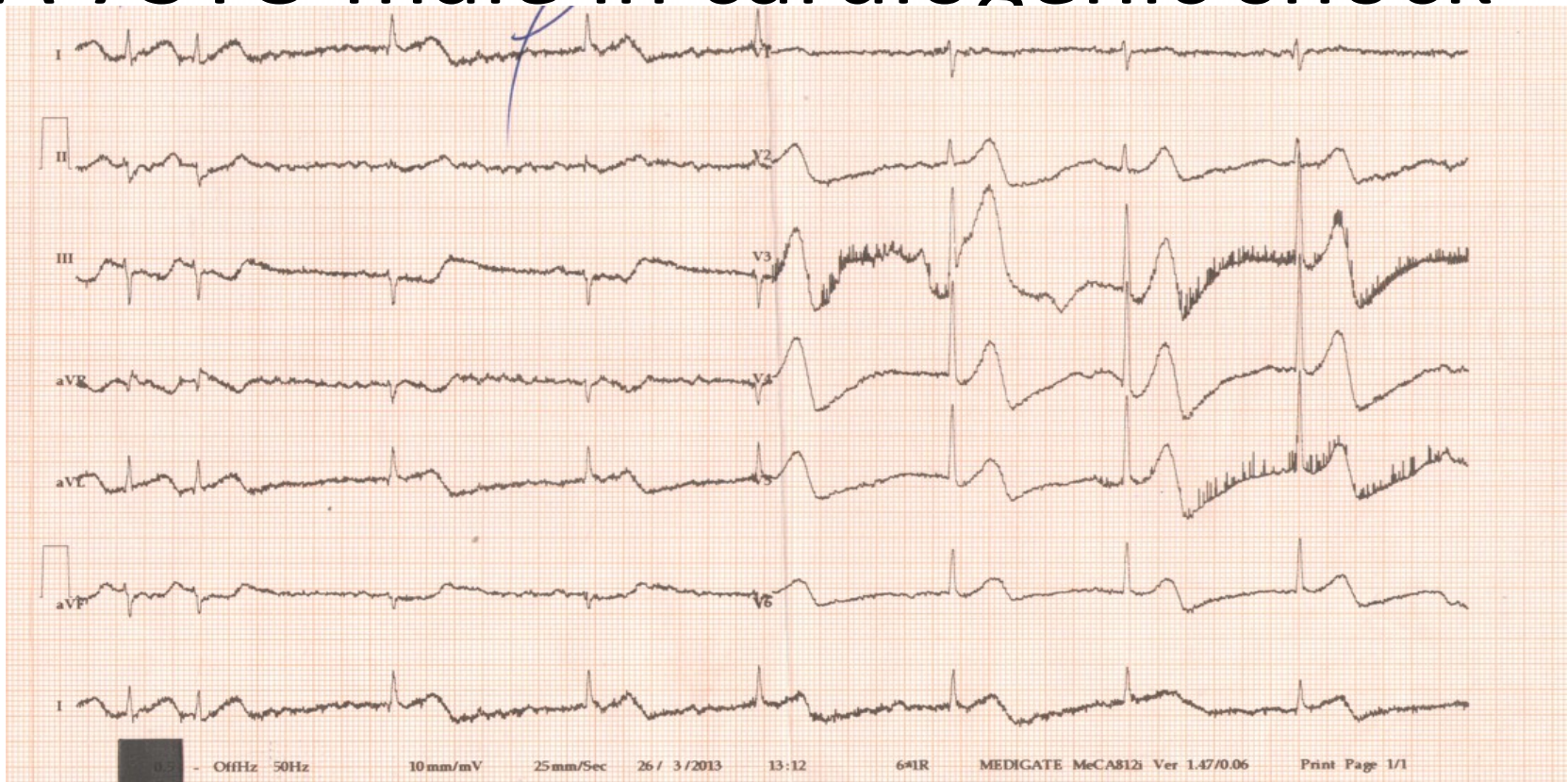
The hard endpoints – survival

	Baseline	In hospital/Periprocedure	M 01	M 03	M 06	M 09	M 12	M 18	M 24
All-cause mortality									
Cardiac mortality	# cases	4	1	1	0	0	1	0	0
Fatal bleeding	# cases	0	0	0	2	1	1	1	1
Fatal stroke	# cases	1	1	0	0	2	0	1	0
Probable stent thrombosis	# cases	0	1	0	0	0	1	2	0
All-cause mortality	0 %	2 %	3 %	3 %	4 %	5 %	6 %	8 %	8 %
Cardiac mortality	0 %	2 %	2 %	2 %	2 %	2 %	3 %	3 %	3 %
Fatal bleeding	0 %	0 %	0 %	0 %	1 %	1 %	2 %	2 %	2 %
Fatal stroke	0 %	0 %	1 %	1 %	1 %	2 %	2 %	2 %	2 %
Probable stent thrombosis	0 %	0 %	0 %	0 %	0 %	0 %	1 %	2 %	2 %



Case presentation

A 73YO male in cardiogenic shock



Diagnosis, noninvasive evaluation and therapeutic strategy

Diagnosis

- CAD. STEMI – anterior. Cardiogenic shock.

Initial lab evaluation

- eGFR – 59,9ml/min/1,73m²; Hb – 124g/l; CK, CK-MB – still negative

Therapeutic strategy

- Immediate loading with antiplatelets and anticoagulants - Brilique – 180mg, ASA – 250mg, Heparin 5000 IU bolus
- Hemodynamic stabilization – Dopamin 5mcg/kg/min,

CAG – Proximal thrombosis of LAD, no significant stenoses of Cx and RCA



Invasive strategy

TA of LAD and D1. Decision for stenting of LM

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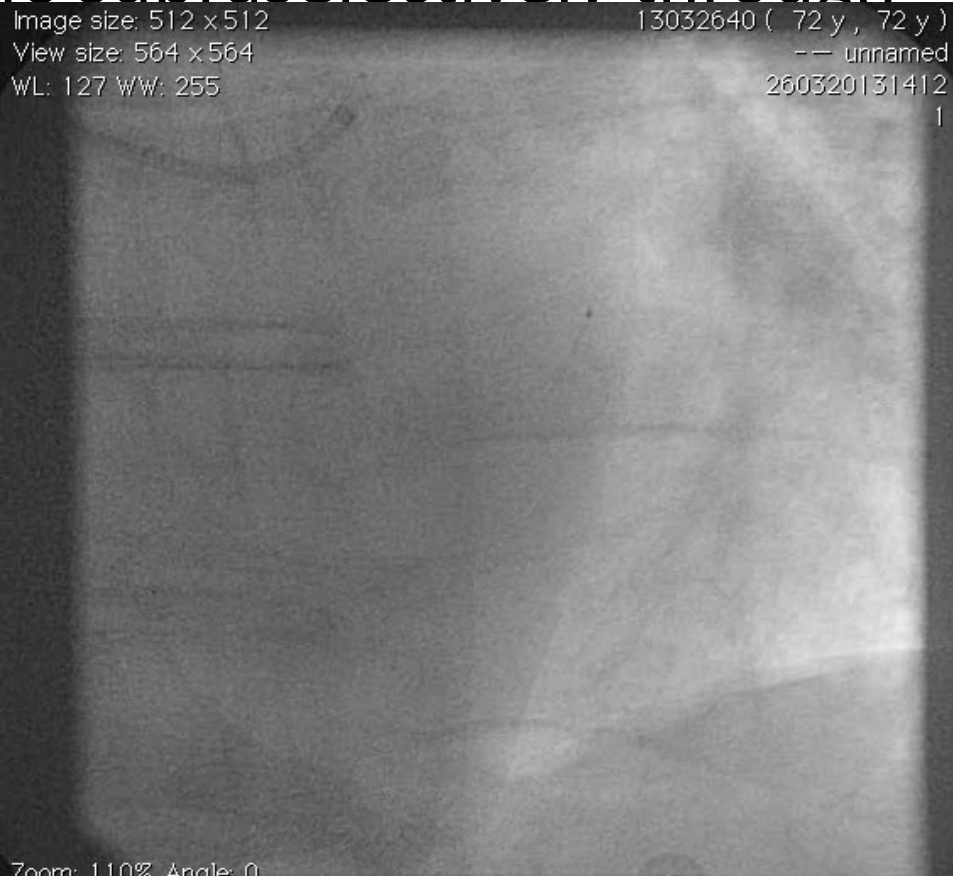
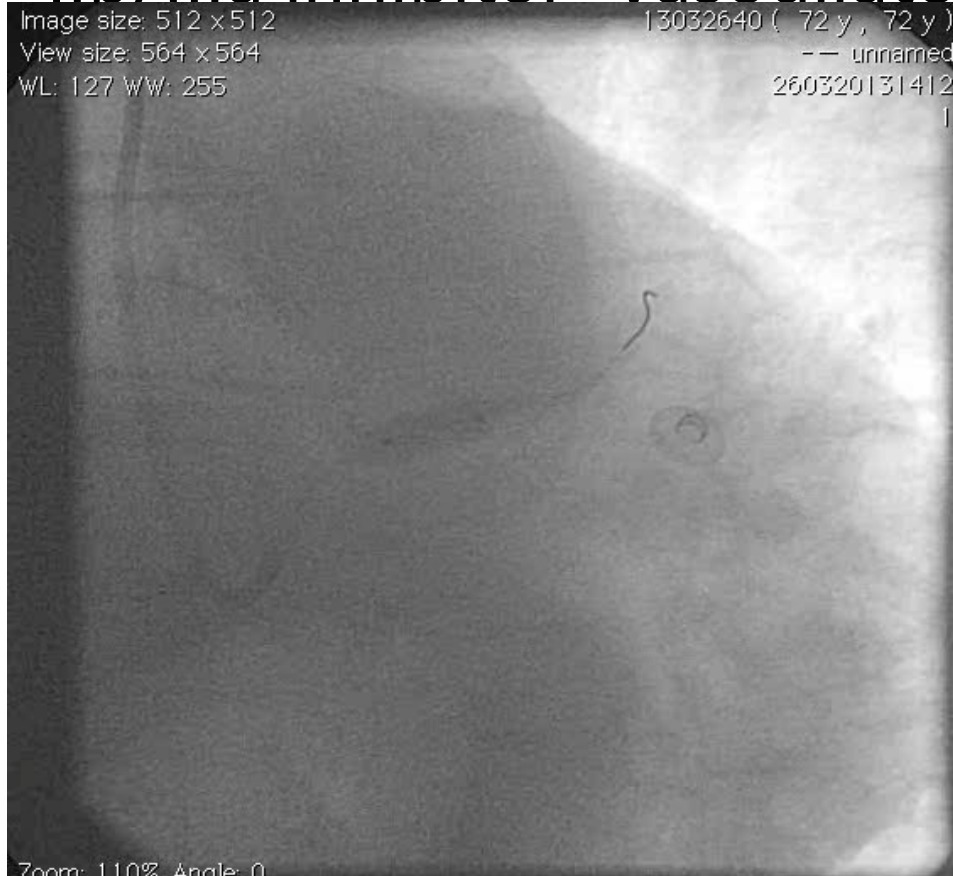
Invasive strategy (2)

Implantation of Biomime 4,5x29mm in LM



POT in LM

after which No-Reflow in LAD – treated with local
IIb/IIIa inhibitor+Vasodilators suprasedlectively through



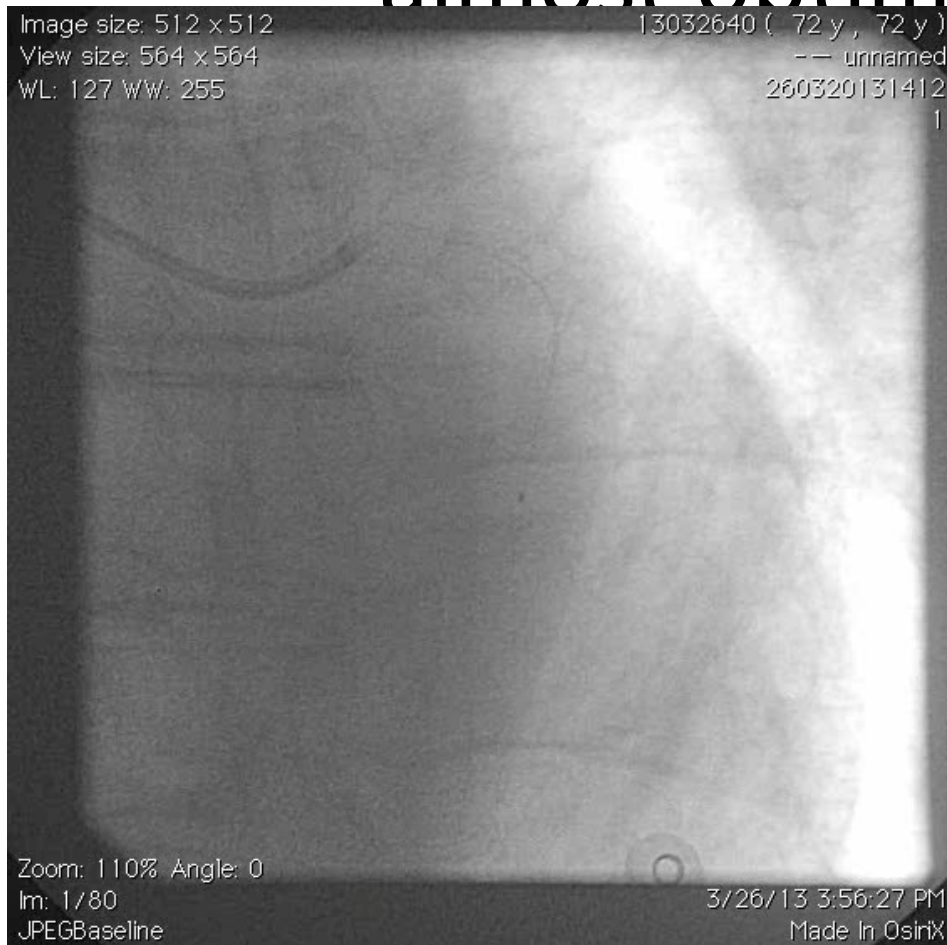
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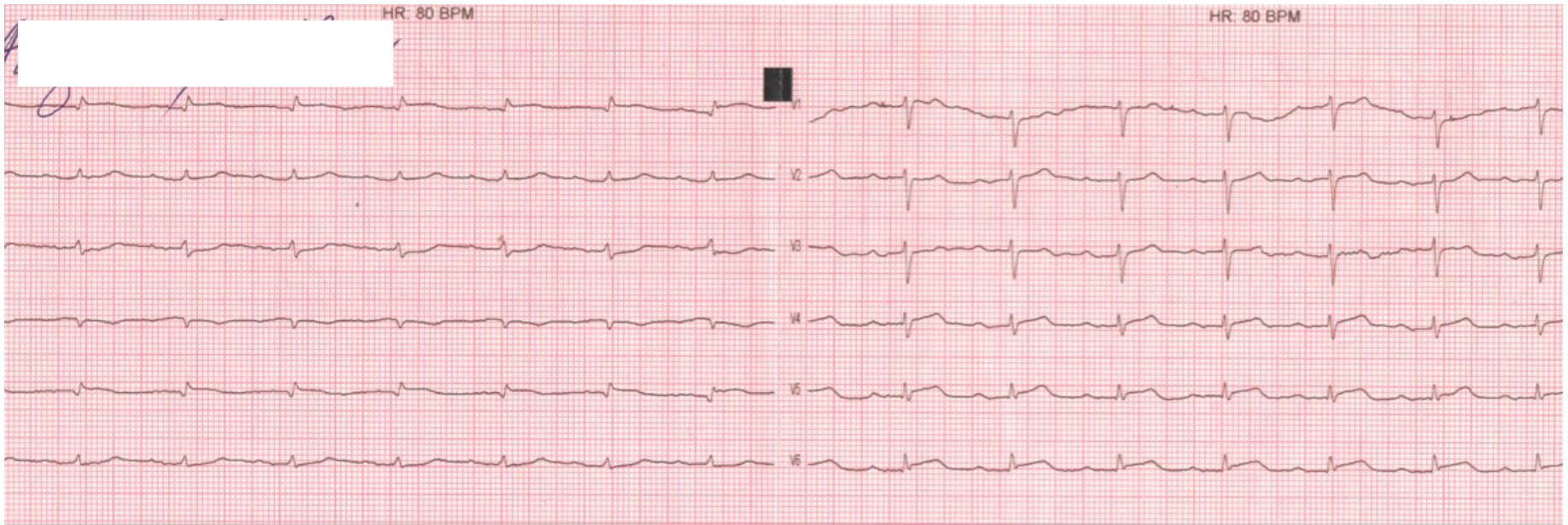
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Optimal final angiographic result with almost optimal flow in LAD



Postprocedure period

- Impressive ECG resolution after PPCI.
- Cardiac echo with LVEF – 35%.
- Peak of CK/MB – 3920/176 IU/L.



6Month angiographic follow-up Optimal result of PCI. LVEF-56%



Thank you for your attention