Meril

Cardiovascular

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EVermine50 EES Retrospective Real-world Study

Procedural safety and outcome of ultrathin strut stents (<60 µm) in the management of very long coronary artery stenosis (>30 mm)

Evermine50 EES Retrospective Real-world Study design

RETROSPECTIVE, OBSERVATIONAL STUDY

- Between December 2017 to November 2019, this study enrolled 156 all-comers patients who were implanted with Evermine50 EES and Tetrilimus stents in a tertiary care non-governmental teaching institution.
- Inclusion Criteria: Patients having ACS, CSA had critical coronary artery stenosis (>70% by conventional angiogram) with a lesion length of 30 mm or more
- Patients (mean age: 61.2 ± 0.4 years; 73% male) who received Evermine50, included:
 - DM- 48%
 - HTN- 56%

- ACS- 63%Dyslipidemia- 51%
- Primary Endpoints: Immediate procedural success was defined by successful deliverability and placement of the stents with good angiographic lumen diameter (<30% stenosis post stenting) without any death, MI, ST or TLR during hospital stay
- Additional Endpoints: MACE (cardiac death, MI and CD-TLR) and ST at 30 days

PRIMARY ENDPOINT

Evermine50 EES demonstrated 92.3% Procedural Success



EES = Evermine eluting stent, ACS = Acute Coronary Syndrome, CSA = Chronic stable angina, DM = Diabetic mellitus, HTN = Hypertension, MI = Myocardial Infarction, ST = Stent thrombosis, TLR = Target lesion revascularization, MACE = Major adverse cardiovascular events infarction, CD- TLR = Clinical driven target lesion revascularization

Clinical Outcomes

COMPARISON OF OUTCOMES IN BETWEEN TWO DIFFERENT STENT TYPES:





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Patra S, et al. Am. J. Cardiovasc., 2020;10(3):182.