

Intravascular Imaging in Complex PCI: How to Optimize

Myeong-Ki Hong, M.D. Ph D

Professor of Medicine Division of Cardiology, Severance Cardiovascular Hospital Yonsei University College of Medicine, Seoul, Korea



Conflict of Interest

• I have nothing to disclose



How the IVUS information influenced the procedure? From ADAPT-DES Study



Witzenbichler B et al. Circulation. 2014;129:463-470



Diffuse long lesion: IVUS-XPL randomized trial

MACE: Cardiac death, MI, or TLR at 1 year



Hong SJ, Hong MK (corresponding author), et al. JAMA 2015;314:2155-63

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Stent optimization is the matter

IVUS-XPL





Optimal PCI according to optimization criteria further improves clinical outcome compared to suboptimal PCI.

Hong et al. JAMA 20215;314:2155-2163 Zhang al. J Am Coll Cardiol 2018;72:3126-3137



IVUS XPL and ULTIMATE Long lesions



Hong SJ, Zhang JJ, Chen SL (corresponding), Hong MK (corresponding). JACC Interv 2022;15:208-216



For long lesion PCI

IVUS-XPL + ULTIMATE



2,577 patients pooled from 2 randomized trials who underwent DES implantation for long coronary lesions.

Patients meeting the IVUS-defined optimization criteria had better clinical outcomes versus those not meeting IVUS-defined optimization criteria.

Hong et al. J Am Coll Cardiol Intv 2022;15:208-216



RENOVATE-COMPLEX-PCI trial

Figure S3. Exploratory Analysis According to Treatment Group and Intravascular Imaging-Guided Optimization Results



Lee. et al. N Eng J Med 2023;388:1668-1679



RENOVATE-COMPLEX-PCI: CTO subgroup



Hong D et al. *Circulation 2023;148:903-905*



Role of IVUS for LM PCI



IVUS-based criteria of stent underexpansion for LM lesion: 1) LM<8.2mm²; 2) POC<7.2mm²; 3) LAD ostium<6.3mm²; 4) LCX ostium<5.0mm² Stent underexpansion was an independent predictor for the occurrence of MACE.

Kang et al. Circ Cardiovasc Interv 2011;4:562-569



Stent optimization and failure

Optimization targets after stent implantation



MSA>5.5mm² (IVUS) and >4.5mm² OCT MSA/average reference lumen > 80% Minimum stent area (absolute)

Stent expansion (relative)

Malapposition

Tissue prolapse

Dissection

Raber L. et al. Eur Heart J 2018;39:3281-3300



Impact of IVUS-guided optimal stent expansion on long-term hard clinical outcomes (IVUS XPL and ULTIMATE)

Long lesions

Primary endpoint: cardiac death, MI or stent thrombosis at 3 years Distribution of patients according to different optimization criteria

MSA >5.5mm²

MSA >5.0mm²

MSA/distal reference lumen area >100% MSA/distal reference lumen area >90% MSA/distal reference lumen area >80% MSA/average reference lumen area >90% MSA/average reference lumen area >80%



Lee YJ, Zhang JJ, Chen SL (corresponding), Hong MK (corresponding). Circ Cardiovasc Interv 2021;14:e011124



Primary endpoint at 3 years

Long lesions



Lee YJ, Zhang JJ, Chen SL (corresponding), Hong MK (corresponding). Circ Cardiovasc Interv 2021;14:e011124

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Lee YJ, Zhang JJ, Chen SL (corresponding), Hong MK (corresponding). Circ Cardiovasc Interv 2022;15:e011366



Conclusion

- The bigger by IVUS, the better
- **DO** intravascular imaging for complex PCI
- **DO** your best to achieve optimal imaging criteria

How to be an intervention master?		
Needs for intracoronary imaging	Non-complex PCI	Complex PCI
Interventionist with experience of imaging	No	Yes
Interventionist without experience of imaging	Yes	Yes
Resident of Cardiology		





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