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1008-172 Bifurcation Lesions: Two Stents vs. One Stent Immediate and Follow-Up Results

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Background: In the treatment of bifurcation lesions, limited information is available if stent placement into the side branch provides any advantage over a simpler strategy of stenting the parent vessel and balloon angioplasty of the side branch.

Methods: A total of 92 patients with true bifurcation lesions (defined as a 50% stenosis in both the parent vessel and the contiguous side branch) were treated with two strategies: stenting both vessels (bilateral group B, n = 53) or stenting the parent vessel and balloon angioplasty of the side branch (single group S, n = 39). Paired angiograms were analyzed by quantitative angiography, and clinical follow-up was obtained.

Results:

	Bilateral	Single	p-value
Post procedure %DS			
parent vessel	6.7 ± 9.9%	7.6 ± 12.1%	NS
side branch	7.4 ± 10.9%	23.4 ± 18.7%	<0.0001
Procedural success	91%	95%	NS
In-hospital MACE	9.4%	0%	<0.05
Angiographic restenosis of			
any branch	56%	52%	NS
both vessels	22%	24%	
the parent vessel	11%	14%	
the side branch	22%	14%	
6 M total MACE	43%	33%	NS

%DS, percent diameter stenosis; MACE, major adverse cardiac events = death, myocardial infarction, coronary artery bypass grafting or repeat percutaneous procedure.

Conclusion: For the treatment of true bifurcation lesions, a complex strategy of stenting both vessels provided no advantage in terms of procedural success or late outcome.