Incidence of in-stent restenosis over 13 years - a study based on a national registry

G. Abreu1, . In Name Of Researchers Of The National Register Of Interventional Cardiology2, C. Braga1, C. Arante1, J. Martins1, C. Rodrigues1, P. Azevedo1, M. Alvarezes Pereira1, J. Costa1, J. Marques1.

(1) Hospital de Braga, Cardiology, Braga, Portugal (2) Portuguese Society of Cardiology, Portuguese Association of Interventional Cardiology, Lisbon, Portugal.

BACKGROUND

- In-stent restenosis (ISR) is one drawback of coronary angioplasty with stent implantation.
- Although the current use of stents has reduced the rate of restenosis, neointimal still persists, therefore it has not been completely eliminated.

PURPOSE

We investigated the incidence of in-stent restenosis, its clinical presentation and treatment from a national registry.

METHODS

- From all patients (pts) undergoing percutaneous coronary intervention (PCI) inserted in national registry from 2002 to 2014, we selected those who had previous history of PCI (n=15326)

RESULTS

- ISR was defined as diameter stenosis ≥ 50% in stent segment, being selected the interventions in which, at least, 1 IRS lesion was treated.

n=3069

- 2002-2003 (group 1, n=179, 5.8%) – Bare metal stent era
- 2004-2008 (group 2, n=816, 26.6%) – 1st generation DES era
- 2009-2014 (group 3, n=2074, 67.6%) – 2nd generation DES era.

- For each group we compared clinical features and treatment

CONCLUSIONS

- In spite of increasing in risk profile of patients over time, it was observed a reduction of incidence of in-stent restenosis and also for multiple in-stent restenosis lesions.
- An increasing number of interventions avoiding second stent implantation, was observed.
- It’s retrospective study, based on a national registry with inherent bias of filling/missing data.

The authors have nothing to declare.