Stepwise OCT bifurcation guidance: Final result, how perfect should it be?

Juan Luis Gutiérrez-Chico, MD, PhD, FESC, FACC
Klinikum der Ludwig-Maximilian Universität, München, DE

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Ideal stenting technique

- Induce flow disturbances
  - Proaggregant
- Interfere healing
  - WA > NASB > ISA
  - ISA size matters (>400 µm)

Avoid ISA

Jailing SB?

Gutiérrez-Chico, Circulation 2011
Gutiérrez-Chico, Circ Cardiovasc Interv 2012
Ideal stenting technique

- **Double drug dose:**
  - Delayed healing

- **Double metal-to-artery ratio:**
  - Hyperplasia

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**Avoid multiple metallic layers**

Tissue coverage and neointimal hyperplasia in overlap versus nonoverlap segments of drug-eluting stents 9 to 13 months after implantation: In vivo assessment with optical coherence tomography

Juan Luis Gutiérrez-Chico, MD, PhD, FESC, FACC, a Lorenz Rébec, MD, b Evelyn Bejar, MD, PhD, FESC, a, Takayuki Okamura, MD, PhD, Carlo di Mario, MD, PhD, FESC, FACC, a, Gerrit-Anne van St, MSc, PhD, a, Stephan Windcker, MD, PhD, FESC, a, and Patrick W. Serruy, MD, PhD, FESC, FACC a Rotterdam The Netherlands, Bern, Switzerland and London, United Kingdom.

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Gutiérrez-Chico et al. Am Heart J 2013
Ideal stenting technique

Bifurcation stenting

Complete scaffolding

Avoid damage of overoptimization

Preserve SB patency

Avoid ISA

Jailing SB?

Avoid multiple metallic layers

Preserve SB patency
Stepwise PCI guidance

- 2D-angiographic guidance:
  - Keep it simple

- OCT-guidance?
  - Room for complex techniques?

- Can OCT improve PCI outcome?
  - Specific protocols for each technique?
  - Limit the number of iterations?
  - Feasible for routine bifurcational PCI?
Let the discussion start!