## Conclusions From Completed Trials in High Risk Carotid Stenting

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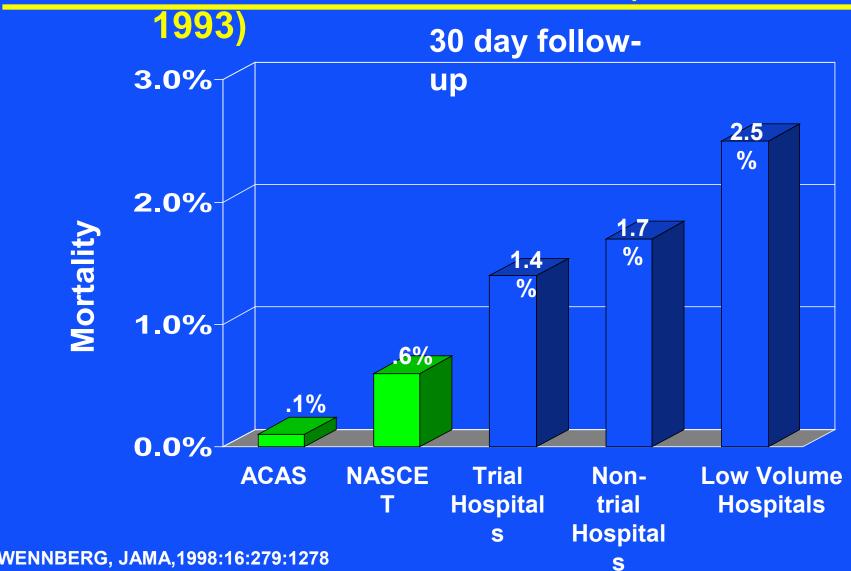
#### Randomized Data

- Carotid Endarterectomy 1954\*
  - 40 years for proof of efficacy
    - 1991 NASCET/ECST
- Carotid Artery Stenting 1994
  - 2001 CAVATAS (angioplasty)
  - 2002 SAPPHIRE
  - 2004 FDA Approval



### CEA Mortality

113,000 Medicare Patients (1992-





### High Risk Features

#### Surgery

- Restenosis
- XRT
- Radical Neck
- CN Palsies
- Cardiac/Pulm
- Pre-OHS
- High/Low Lesions
- Contralateral Occl

#### Elderly

- String Signs
- Thrombus
- Acute Stroke

#### Intervention

- Tortuosity
- Poor Access
- Coag/Platelet
- Severe Ca<sup>++</sup>
- Arch Anatomy



#### High-Risk Patient Trials: Carotid Stenting with Emboli Protection

- Randomized against Surgery
  - SAPPHIRE
- Non-Randomized Registries
  - ARCHER
  - SHELTER / BEACH
  - MAVERICK
  - CABERNET
  - SECURITY



#### US trials in carotid stenting with embolic protection

Name of filter	Manufacturer	Trial (n >3100)	Trial Status
Angioguard	Cordis Endovascular	SAPPHIRE	Completed
Accunet	Guidant	ARCHeR	Completed
Neuroshield	MedNova/Abbott	SECURITY	Completed
FilterWire	Boston Scientific/EPI	BEACH-Wallstent	Completed
FilterWire	Boston Scientific/EPI	CABERNET-Endotex NexStent	Completed
Interceptor	Medtronic	MAVeRIC	Ongoing
Spider	ev3	CREATE	Completed
Accunet	Guidant	CREST	Ongoing
Rubicon	Rubicon	RULE-Carotid	Planned

## High-Risk Patient Trials: Data to be Presented at TCT

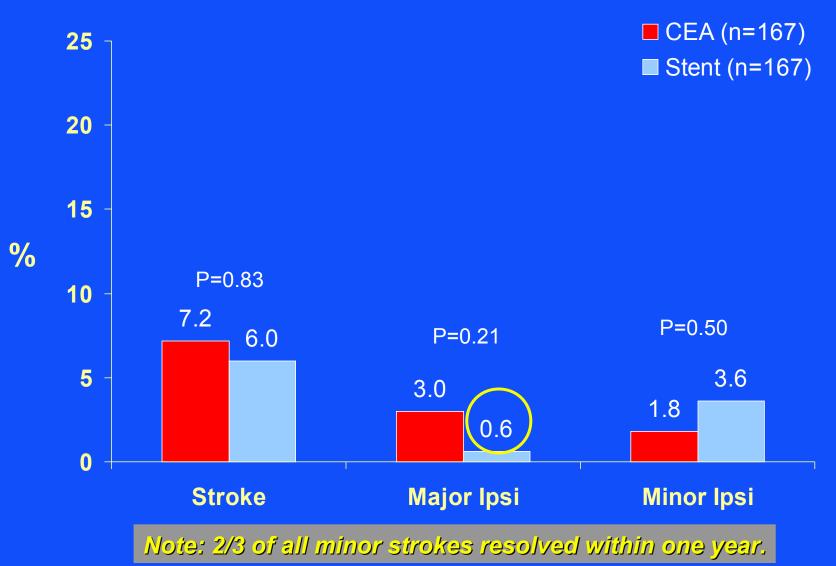
CAPTURE:
 Guidant PMS Study
 Largest, prospective study to date

SAPPHIRE3 Year Follow-up



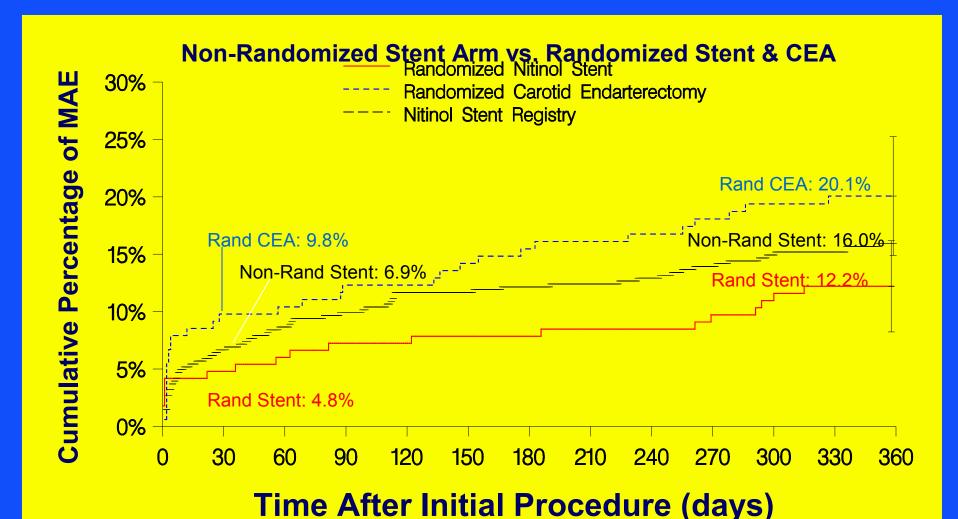
#### SAPPHIRE STUDY: Stroke at 360 Days

Yadav, NEJM,2004



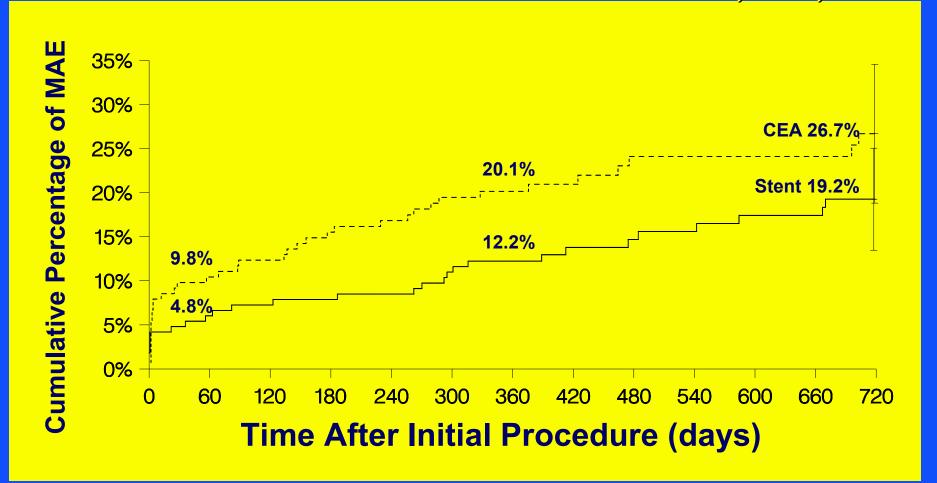


### SAPPHIRE STUDY MAE at 360 Days



#### SAPPHIRE STUIDY

Cumulative % of MAE to 720 Days Randomized Patients – Kaplan Meier Analysis Yadav, NEJM,2004



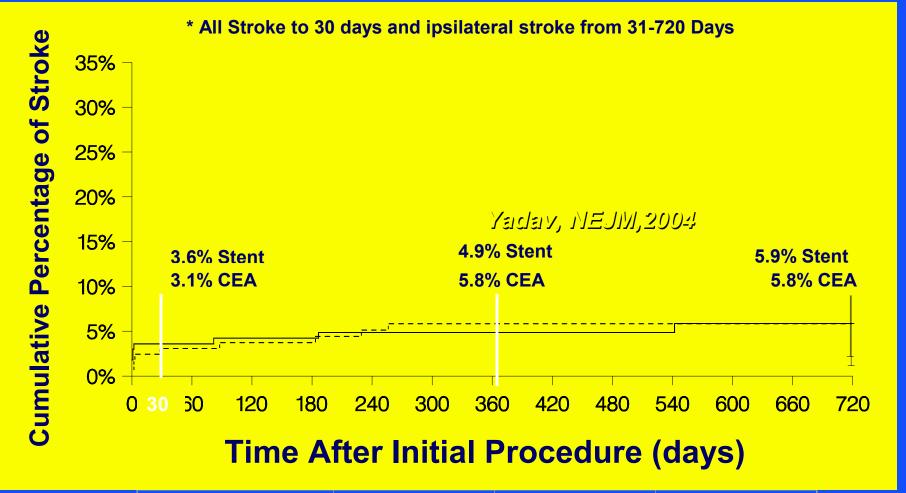
Days:	30	360	720
N at Risk (CEA):	161	125	59
N at Risk (Stent):	163	147	88



#### SAPPHIRE STUDY

Cumulative % of Stroke\* to 720 Days Randomized Patients - Kaplan Meier Analysis

Yadav, NEJM,2004



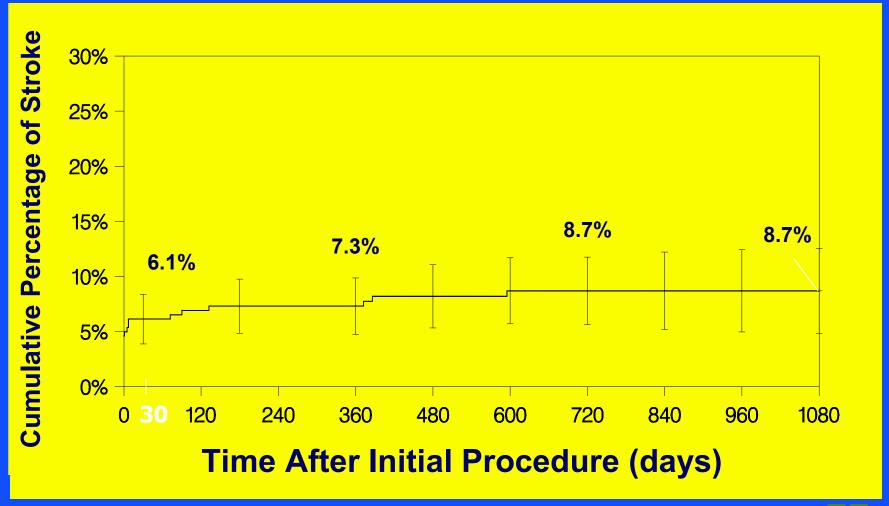
Days:	30	360	720
N at Risk (CEA):	159	130	59
N at Risk (Stent):	162	145	88



#### US FEASIBILITY STUDY

Cumulative Percentage of All Stroke to 30 Days and Ipsilateral Stroke from 31-1080 Days

Yadav, NEJM,2004



Days:	30	 360	720	1080
N at Risk:	247	 218	176	113

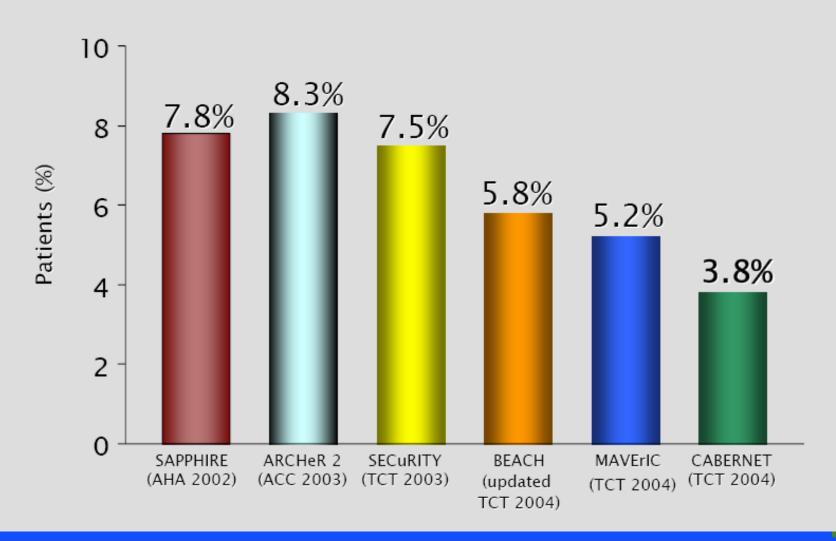


#### High-Risk Patient Trials: Carotid Stenting with Emboli Protection

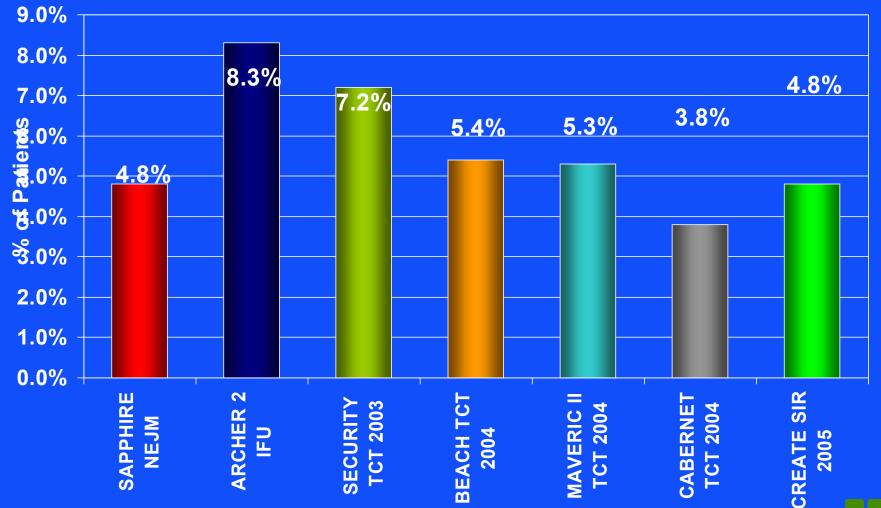
- Difficult to Compare Even 30 Day Results
  - Varying Definitions / Methodologies
  - Inclusion of Device Failures
  - All Stroke Vs Ipsilateral Stroke Vs Procedure Related Stroke
- At 1 year, many do not count death or count only neurological death
- Not Published (except SAPPHIRE)



### 30-Day Composite Endpoint in U.S. Carotid Stenting Registries 2002-2004

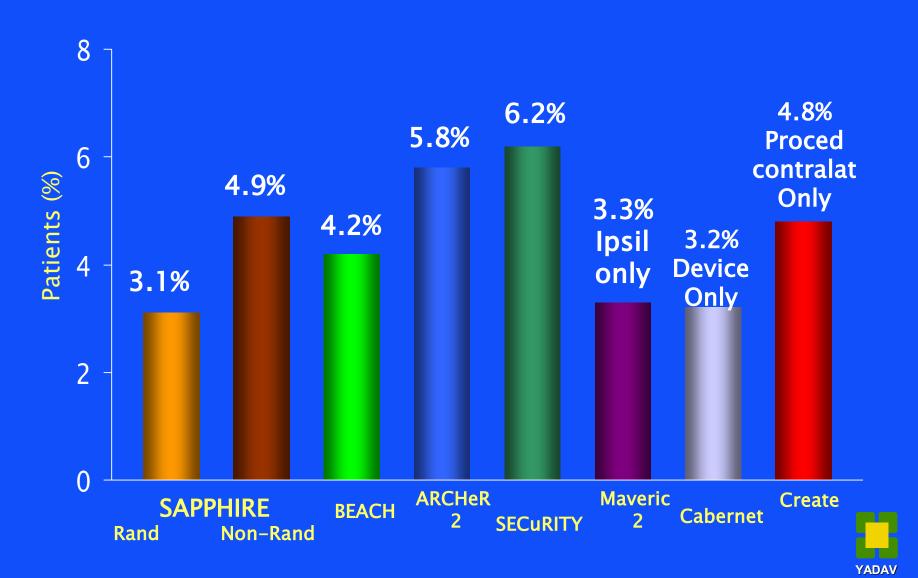


# 30 Day MAE-Composite Endpoint in High Risk Carotid Stenting Trials

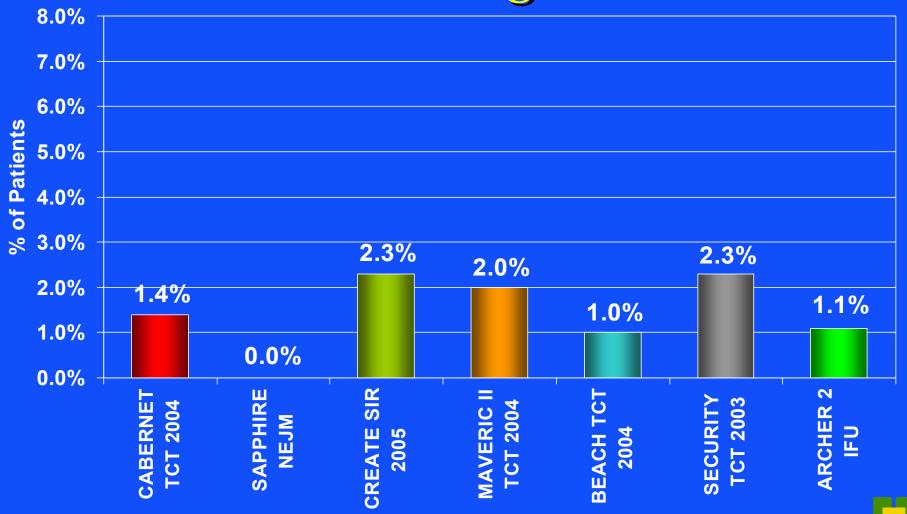




#### 30-Day Risk of Stroke in High Risk Carotid Stenting Trials

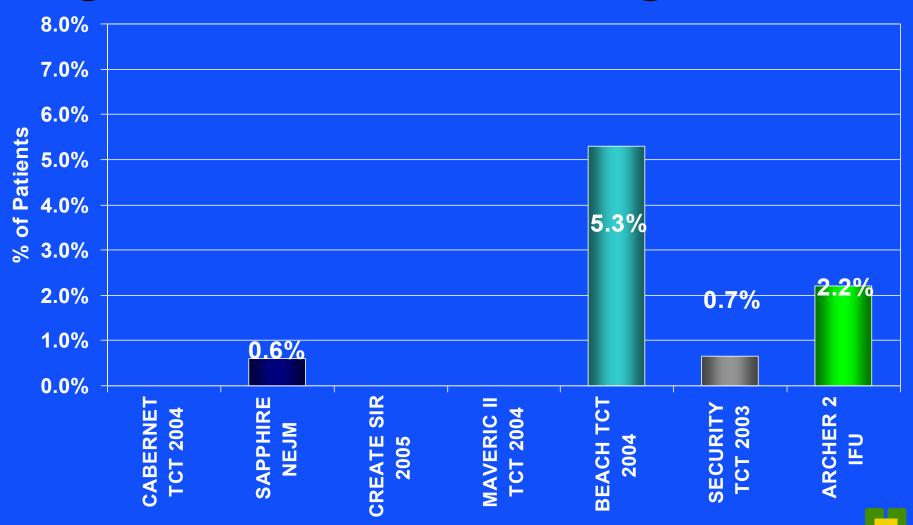


### 30 Day Risk of Major Stroke in High Risk Carotid Stenting Trials





## 1 year clinically driven TLR in High Risk Carotid Stenting Trials



**YADAV** 

#### Carotid stenting with cerebral protection: Pooled analysis of perioperative outcomes Yadav, Balzer, Beyssen, Cleveland, Cremonesi, Daoud

- 32 studies of CEA, Stenting
- 30 Day Stroke/Death and Stroke/MI/Death

Cea

• PCAS

UPCAS

3369 pts

**1222** pts

1638 pts



## Carotid stenting with cerebral protection: Pooled analysis of 30 Day perioperative outcomes Yadav, Balzer, Beyssen, Cleveland, Cremonesi, Daoud

TX	# Pts	Sx Pts (%)	S/D (%)	S/D/MI(%)
CE A	2 260	1 052 (62.9)	97 (0 6)	64 (2.9)
CEA	3,369	1,253 (62.8)	87 (2.6)	64 (2.8)
PCAS	1,222	656 (46.3)	33 (2.7)	25 (2.6)
UPCAS	1,638	723 (55.9)	88 (5.4)	77 (6.1)
ALL	6,229	2,636 (57.7)	208 (3.3)	166 (3.7)



# Carotid stenting with cerebral protection: Pooled analysis of 30 Day perioperative outcomes Yadav, Balzer, Beyssen, Cleveland, Cremonesi, Daoud

Treatments	Symptomatic patients [95% CI]	30-day stroke-death [95% CI]	30-day stroke-MI-death [95% CI]
Endarterectomy	62.78%	2.58%	2.81%
	[61.15%; 64.41%]	[2.05% ; 3.12%]	[2.25%; 3.37%]
Protected stenting	46.32%	2.70%	2.64%
	[43.52%; 49.11%]	[1.79% ; 3.61%]	[1.74%; 3.54%]
Unprotected stenting	55.86%	5.37%	6.11%
	[53.46%; 58.27%]	[4.28%; 6.46%]	[4.95% ; 7.27%]
Protected stenting versus Endarterectomy		p-value >.82	p-value >.78
Protected stenting versus Unprotected stenting		p-value <.00045	p-value <.00012

#### Conclusions

- One randomized study and many registries completed
- SAPPHIRE: superiority of protected stenting
- Paucity of publications
- Variable endpoints / definitions
- No evidence of definite improvement in results
- Meta-analysis indicates need for protection and equivalent results to CEA

