Tratamento do TCE não-protegido. Novas evidências mudaram a prática?

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2017

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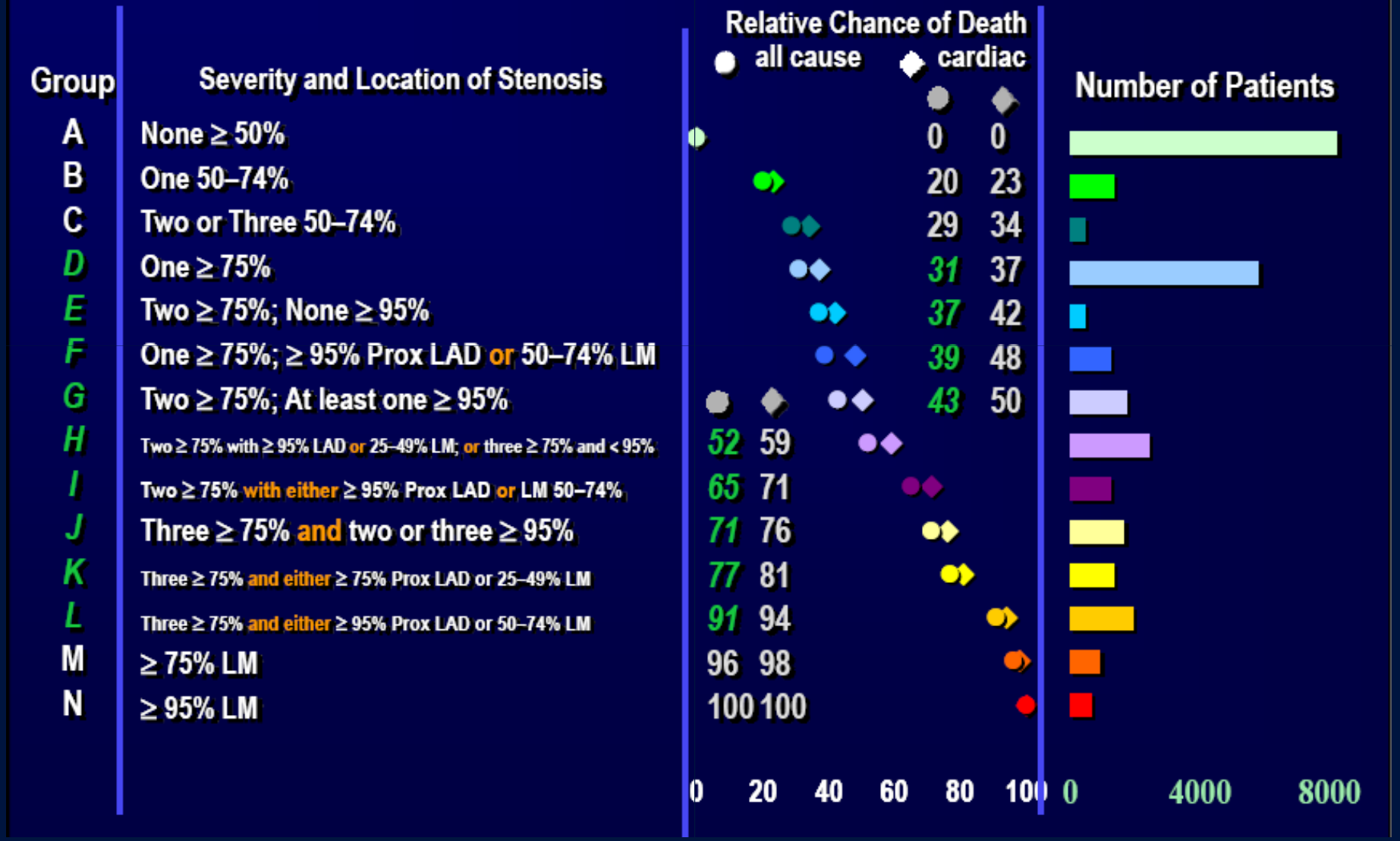
Escola Bahiana De Medicina e Saúde Pública

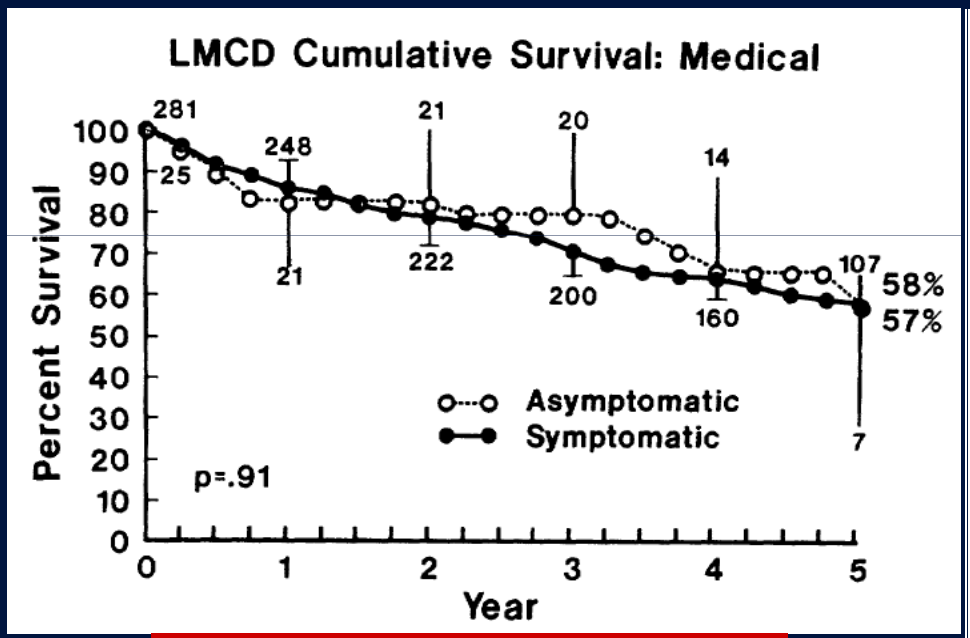
Nenhum conflito de interesse
em relação ao tema

TCE: a necessidade de revascularizar

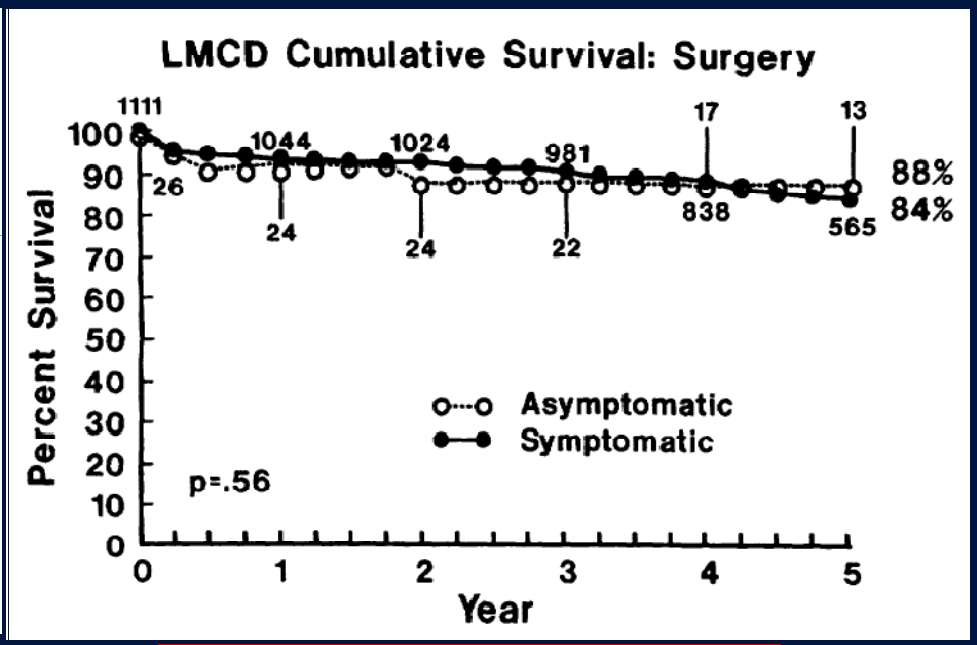
Influence of Severity and Location of Stenosis on Death in 29,082 Patients Catheterized for CAD at Duke Between 1986–2000 and Treated Without Revascularization



Registro CASS
Lesão de Tronco CE > 50%

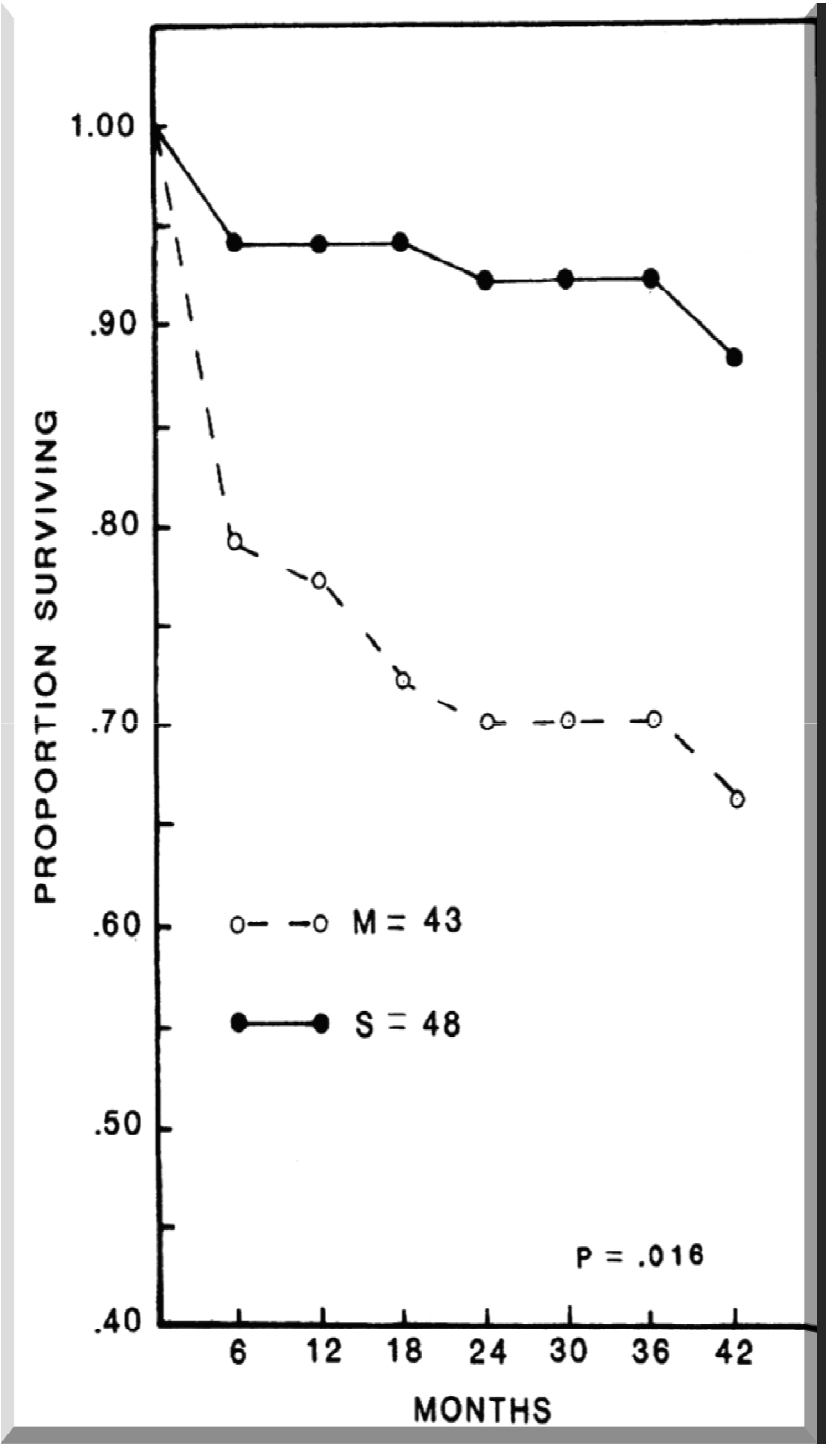


Mortalidade 42% em 5 anos



Mortalidade12% em 5 anos

Circulation 1989;79:1171-1179

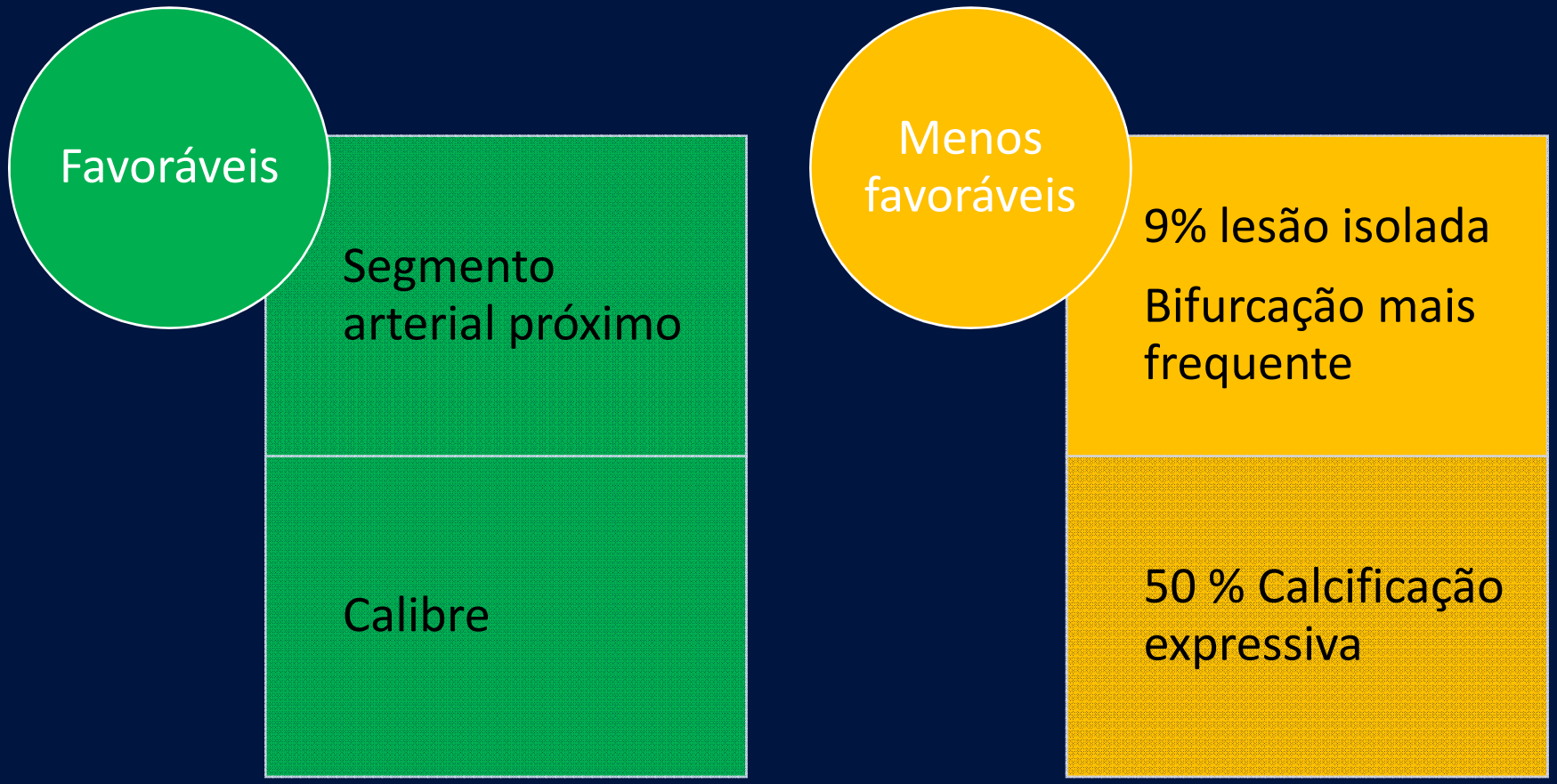


TCE no Estudo do VA

Takaro tT et al. Survival in Subgroups of Patients with Left Main Coronary Artery Disease Veterans Administration Cooperative Study of Surgery for Coronary Arterial Occlusive Disease Circ. 1982

TCE
IPC x Cirurgia

Considerações sobre IPC em TCE



Prevalence of unfavorable angiographic characteristics for percutaneous intervention in patients with unprotected left main coronary artery disease. Catheter Cardiovasc Interv 2006;68:357– 62.

Variações Anatômicas do TCE

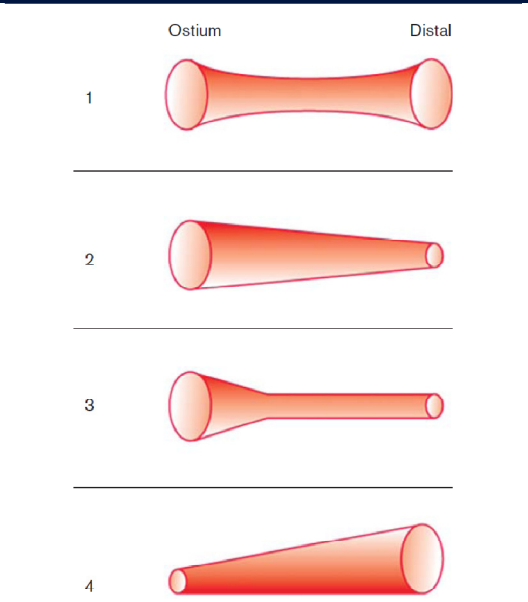
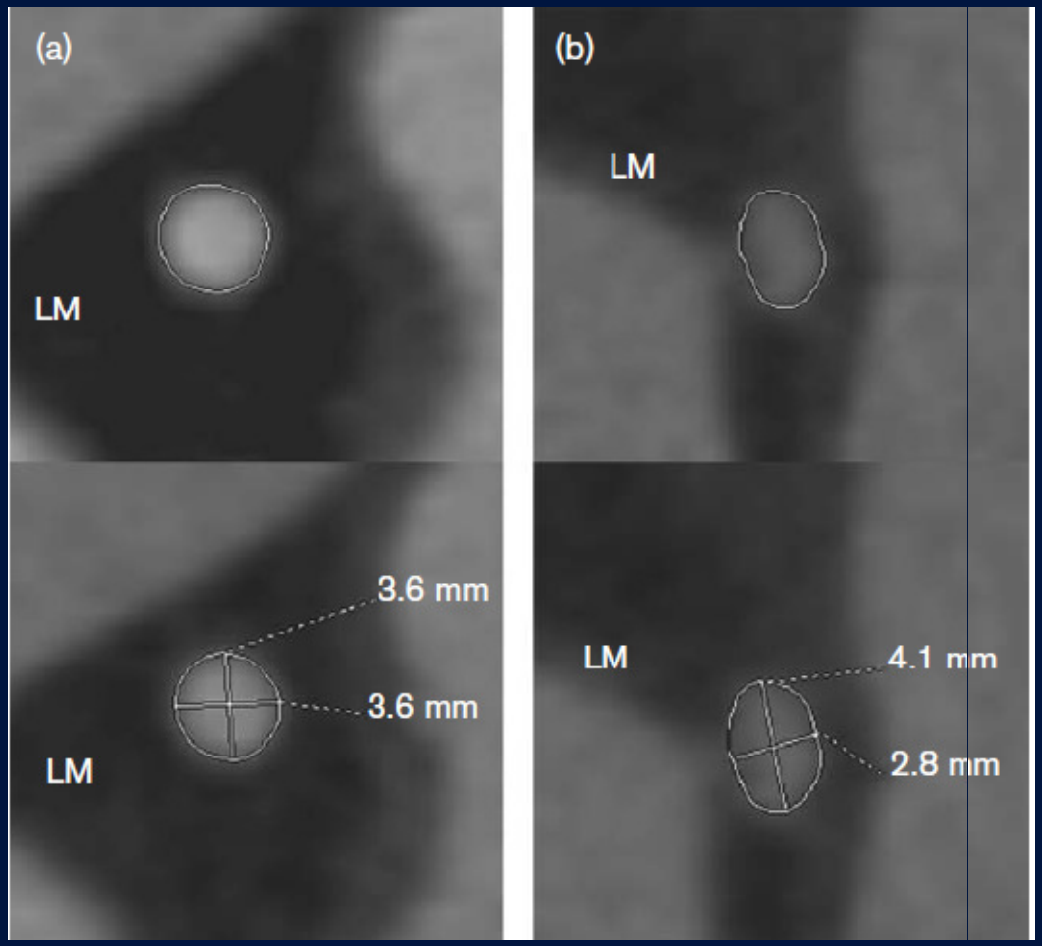


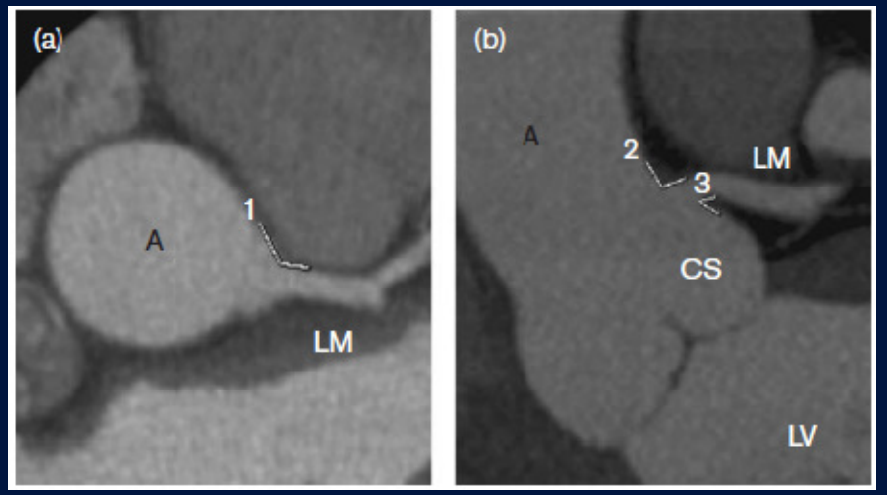
Diagram showing the various anatomical configurations of the left main coronary artery (LMCA) in normal participants (types 1–4).

LMCA	Men ($n=53$) Diameter (mm)	Men ($n=53$) Area (mm^2)	Women ($n=17$) Diameter (mm)	Women ($n=17$) Area (mm^2)	*P* value
Ostium		20.1 (±7)		15.7 (±6)	0.03
Largest	5.4 (±1)		4.8 (±1)		
Smallest	4.3 (±0.9)		4 (±0.8)		
Midportion		14.2 (±5)		10.7 (±6)	0.02
Largest	4.3 (±0.9)		3.6 (±0.9)		
Smallest	3.9 (±0.7)		3.4 (±0.8)		
Distal		15 (±5)		11 (±2)	0.001
Largest	4.5 (±0.8)		4 (±0.4)		
Smallest	4 (±0.7)		3.3 (±0.4)		

Zeina AR et al.Dimensions and anatomic variations of left main coronary artery in normal population: multidetector computed tomography assessment. Coronary Artery Disease 2007, 18:477–482

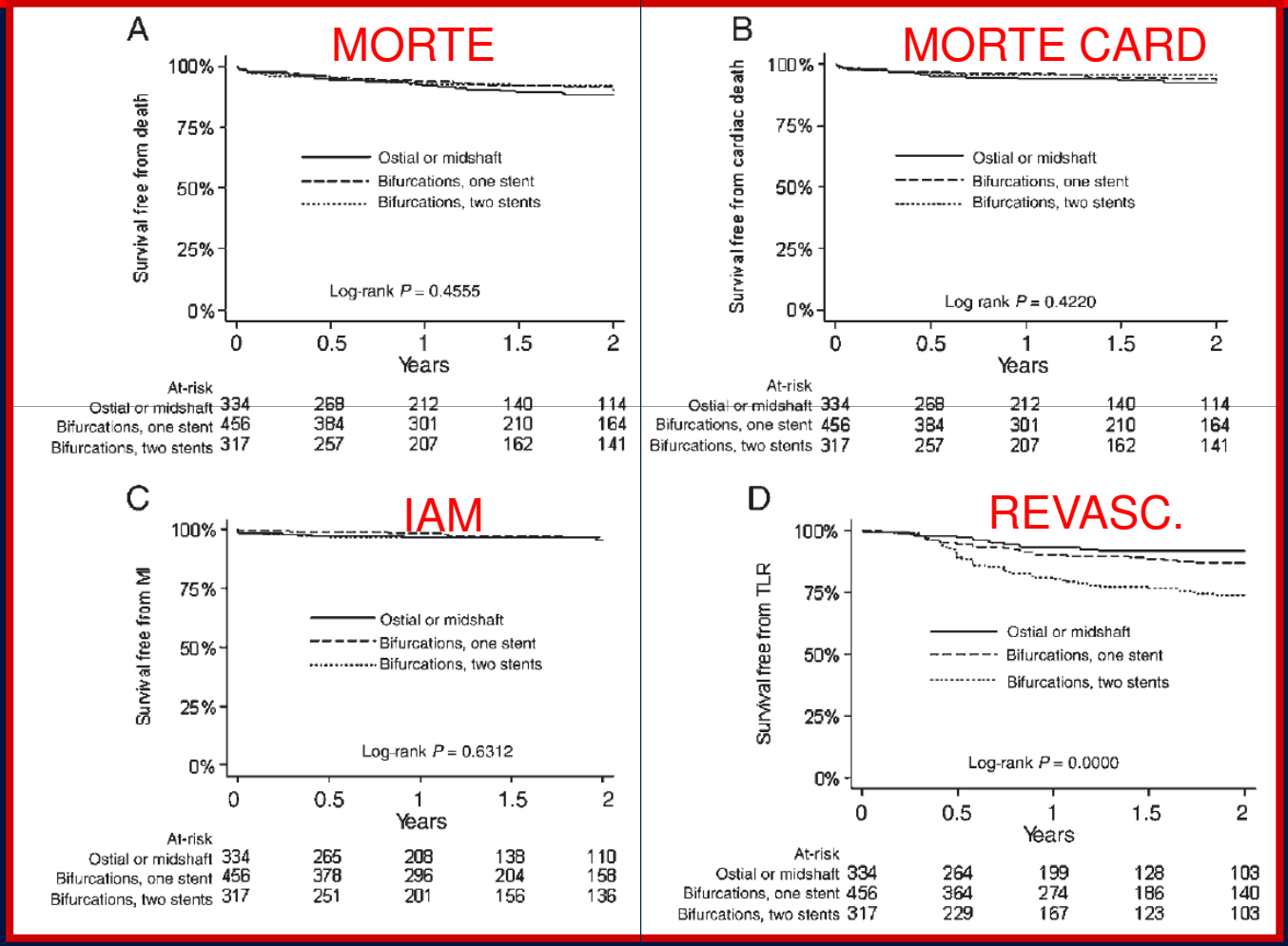
Variações Anatômicas do TCE





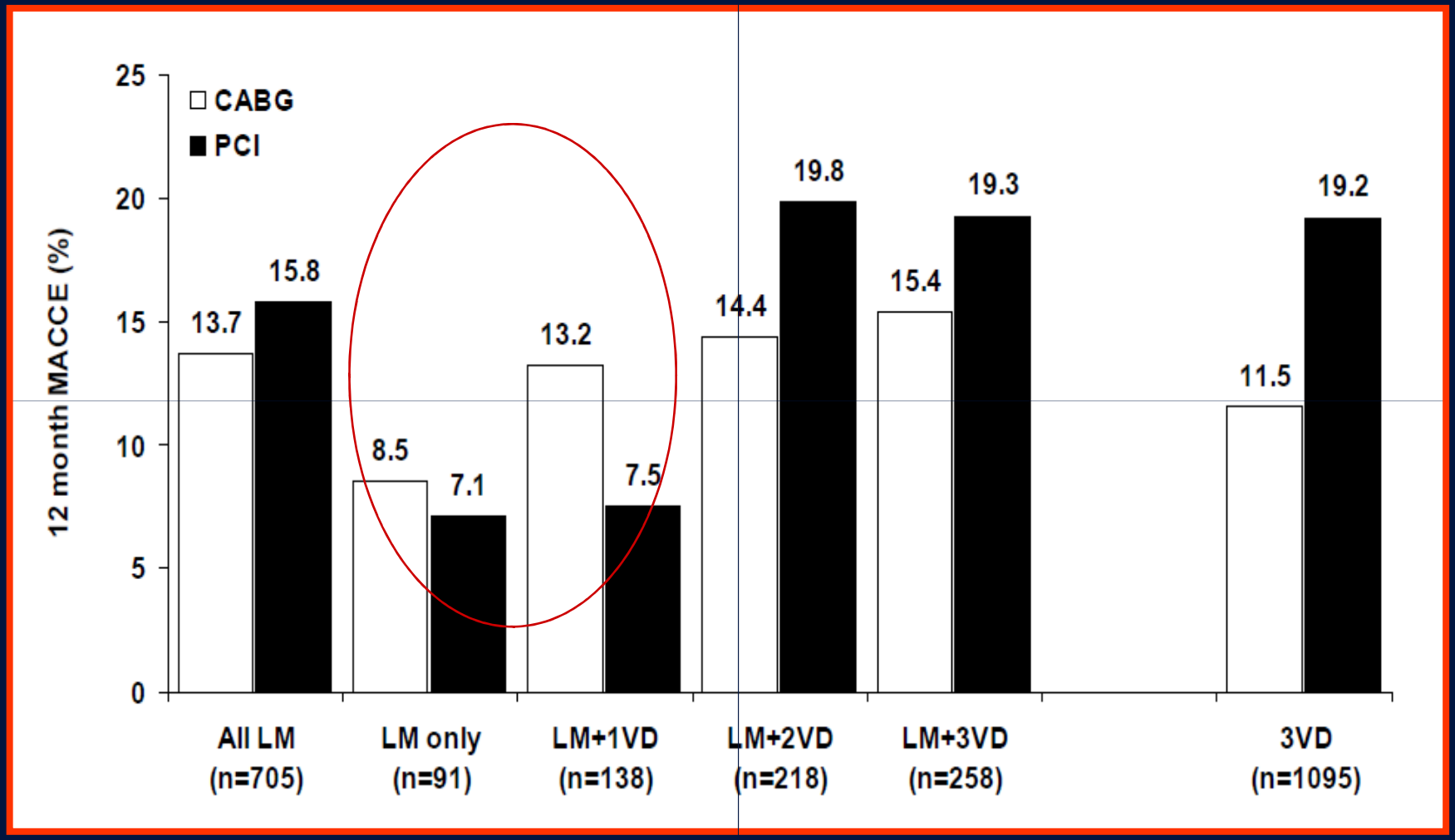
Zeina AR et al.Dimensions and anatomic variations of left main coronary artery in normal population: multidetector computed tomography assessment. Coronary Artery Disease 2007, 18:477–482

IPC em TCE
Influência do tipo de lesão



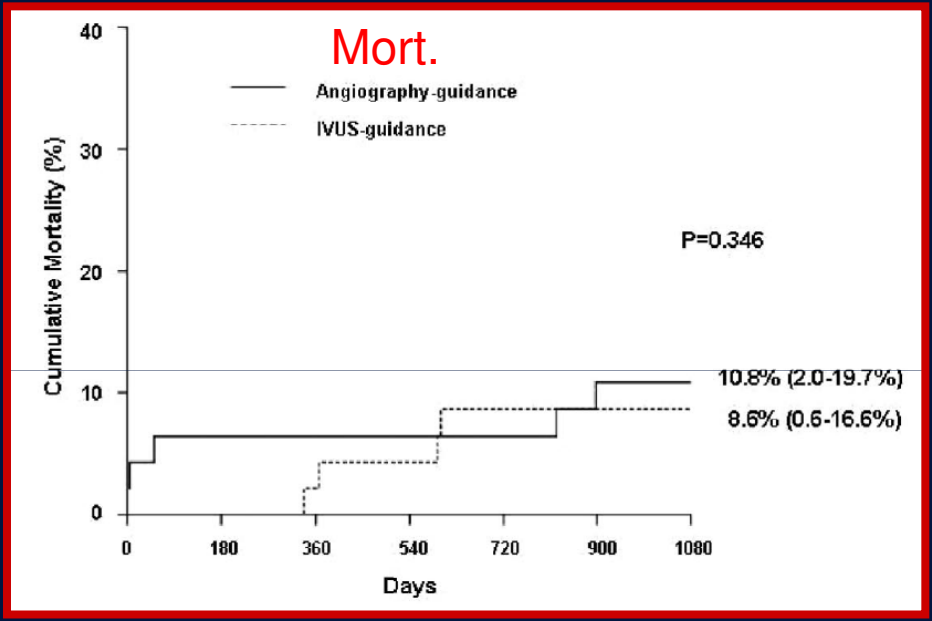
Ostial and midshaft lesions vs. bifurcation lesions in 1111 patients with unprotected left main coronary artery stenosis treated with drug-eluting stents: results of the survey from the Italian Society of Invasive Cardiology. European Heart Journal (2009) 30, 2087–2094

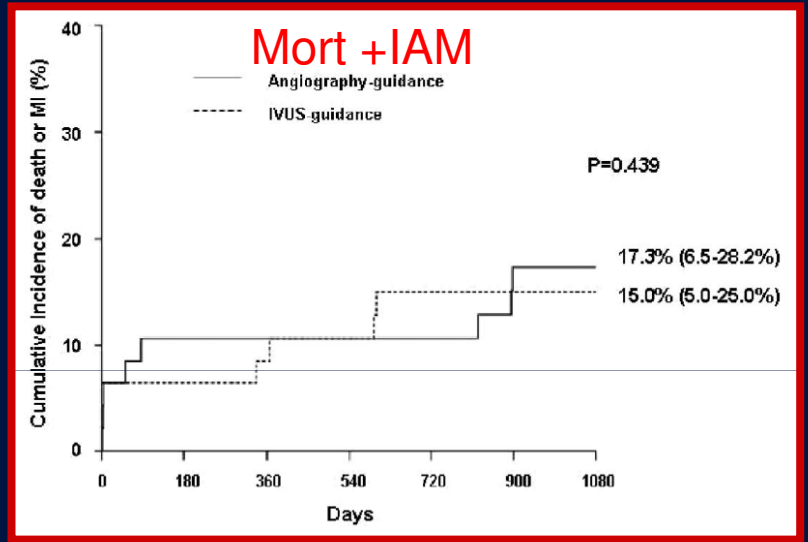
SYNTAX Trial: TCE

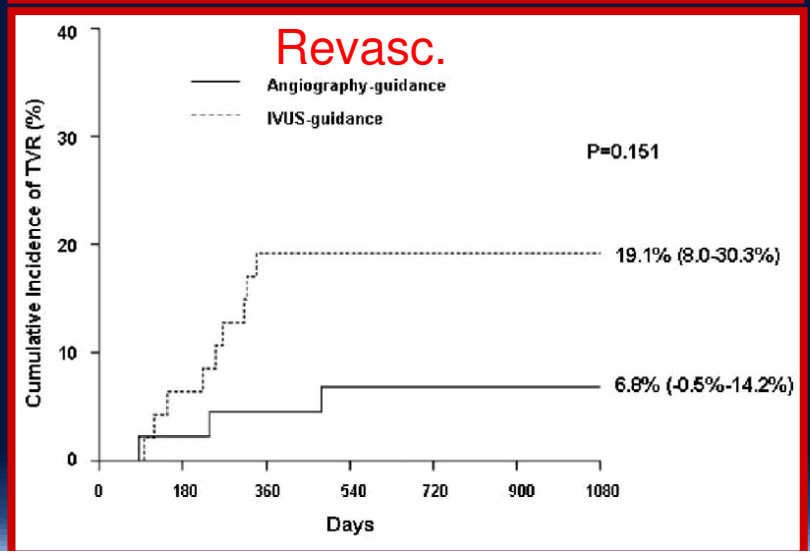


Serruys PW et al. ***NEJM.*** 2009;360:961-72.

USIC x Angiografia em TCE
Stents convencionais



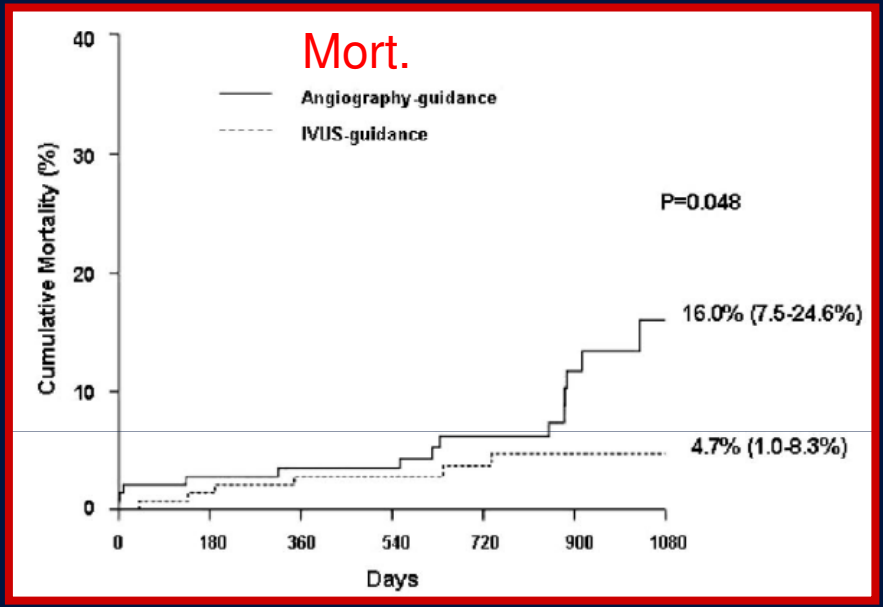


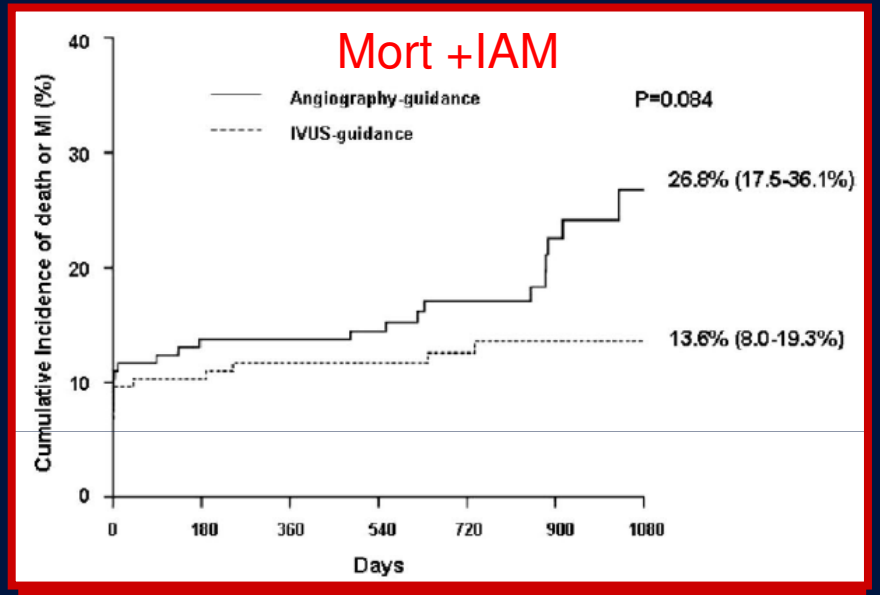


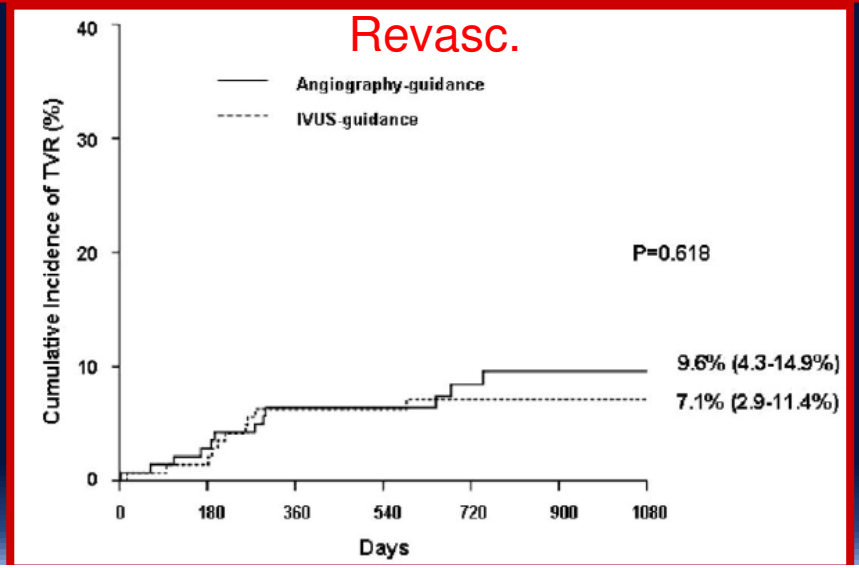
Metodologia= Escore de propensão
47p x 47p

Seung-Jung P et al.Impact of Intravascular Ultrasound Guidance on Long-Term Mortality In Stenting for Unprotected Left Main Coronary Artery Stenosis. Circulation: Cardiovascular Interventions 2009;2:167-177

USIC x Angiografia em TCE Stents farmacológicos







Metodologia= Escore de propensão
145p x 145p

Seung-Jung P et al.Impact of Intravascular Ultrasound Guidance on Long-Term Mortality In Stenting for Unprotected Left Main Coronary Artery Stenosis. Circulation: Cardiovascular Interventions 2009;2:167-177

EXCEL
IPC x Cirurgia em TCE

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Everolimus-Eluting Stents or Bypass Surgery for Left Main Coronary Artery Disease

G.W. Stone, J.F. Sabik, P.W. Serruys, C.A. Simonton, P. Généreux, J. Puskas, D.E. Kandzari, M.-C. Morice, N. Lembo, W.M. Brown III, D.P. Taggart, A. Banning, B. Merkely, F. Horkay, P.W. Boonstra, A.J. van Boven, I. Ungi, G. Bogáts, S. Mansour, N. Noiseux, M. Sabaté, J. Pomar, M. Hickey, A. Gershlick, P. Buszman, A. Bochenek, E. Schampaert, P. Pagé, O. Dressler, I. Kosmidou, R. Mehran, S.J. Pocock, and A.P. Kappetein, for the EXCEL Trial Investigators*

N Engl J Med 2016;375:2223-35

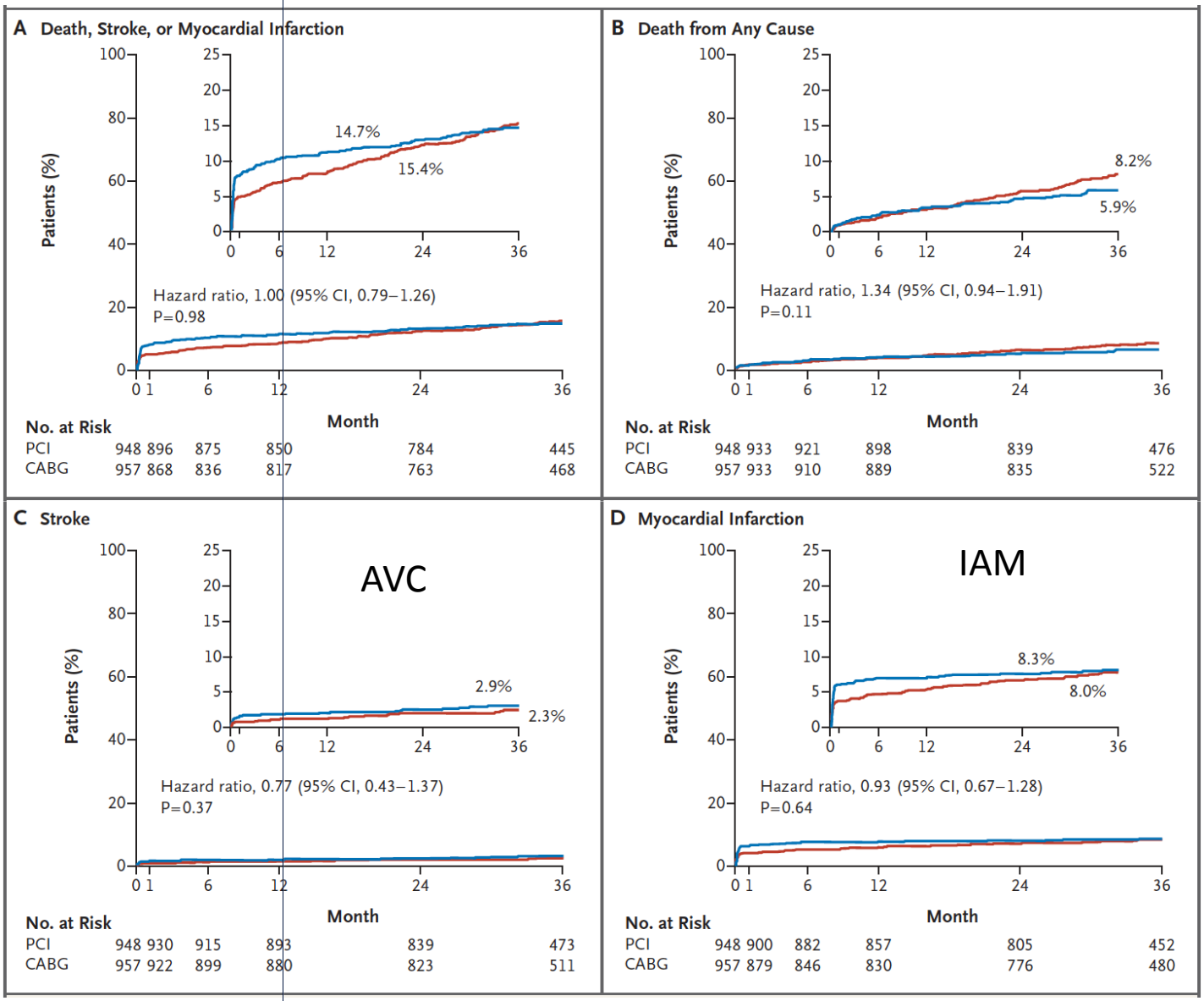
Proposta do estudo EXCEL

- Portadores de DAC – estável e instável
- Lesão de TCE (80,5% distal); SYNTAX-20,6; Multivaso= 51,3%
- Everolimus x Cir (arterializada)
- 80% usaram USIC (IVUS)
- Desfecho primário: morte, AVC ou IAM em 3 anos.

Resultados do EXCEL

Morte, AVC, IAM

Mortalidade Total



N Engl J Med 2016;375:2223-35

Conclusões após o Estudo EXCEL

- Em pacientes de SYNTAX escore < 32, quando viável, a IPC é uma alternativa à cirurgia de revascularização.
- Até que se tenham dados de acompanhamento mais prolongado a cirurgia continua preferivel na maioria dos casos .

Revascularização em TCE Não-protegido

Estudos observacionais

- Estudos observacionais comparativos de IPC x cirurgia de revascularização sugerem resultados semelhantes exceto por nova revascularização, que favorece a cirurgia

Estudos randomizados

- SINTAX- e EXCEL de 3 anos reafirmam achados

No mundo real

- Escolha baseada em: tipo de lesão no tronco; estado das demais artérias; risco cirúrgico; possibilidade de utilização de recursos alem da angiografia(USIC), expertise