

Better patient outcomes with drug eluting stents

December 18 2008

Patients receiving drug eluting stents (DES) — stents coated with medication to prevent narrowing of the artery — as part of an angioplasty had better outcomes one year later than patients with bare metal stents, according to a new study to be published in *CMAJ*.

Mortality in the first 30 days for people with drug eluting stents was significantly lower than for those with bare metal stents. However, in this prospective cohort study of 6440 patients, there was an increased risk of repeat revascularization procedures or death in the DES group after 3 years.

Patients with drug eluting stents were more likely to be female, with higher rates of kidney disease, diabetes, high cholesterol and hypertension.

"Our study findings suggest that drug eluting stents, despite recent concerns surrounding drug eluting stent safety, the long-term survival (to 3 years) of patients receiving drug eluting stents remains globally favourable, and certainly not measurably worse than that of patients treated with bare metal stents," state Dr. William Ghali, coauthors from the University of Calgary and Dr. Andrew Philpott. "However, we did observe a concerning risk trend toward accelerating adverse events in the DES group late in the follow-up period — a finding that underlines the need for ongoing surveillance of longer-term outcomes," write the authors.



Visit cmaj.ca later this week for a related commentary by Dr. Philippe Généreux and Dr. Roxana Mehran from the Columbia University Medical Center. They also caution that "despite the large amount of favourable long-term data on the use of drug eluting stents from randomized controlled trials, meta-analyses and observational studies, the long-term safety of drug eluting stents, especially regarding late and very late stent thrombosis, remains a major concern."

Paper: http://www.cmaj.ca/press/080050.pdf

Source: Canadian Medical Association Journal

Citation: Better patient outcomes with drug eluting stents (2008, December 18) retrieved 9 April 2024 from https://medicalxpress.com/news/2008-12-patient-outcomes-drug-eluting-stents.html

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