

European Bifurcation Club Perspectives on Two-stent Techniques – An Interview

An Expert Interview with Dr Francesco Burzotta

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The treatment of coronary bifurcation lesions remains a key clinical challenge in interventional cardiology. Short-term trials have shown benefits with a provisional, one-stent approach, and these findings have been supported by longer-term data when compared with intentional, up-front two-stent approaches.^{1,2} However, these broad observations do not translate to practical guidance for physicians who may need to consider intentional two-stent approaches for individuals with complex coronary lesions. The European Bifurcation Club (EBC) has published its fourteenth consensus, providing practical guidance on percutaneous coronary intervention for obstructive bifurcation lesions.³ It aims to provide support to physicians who are managing bifurcation disease.

Q. What are the key messages of the European Bifurcation Club 2019 Consensus Statement on Two-stent Techniques?

The EBC is a group of scientists and clinicians drawing on a range of multidisciplinary skills that are focussed on improving treatment outcomes in patients with coronary bifurcation disease. Periodically, this group reviews emerging evidence along with clinical experience to help refine understanding and contribute to practical guidance. In seeking to optimise bifurcation treatment, the group examined the role of two-stent techniques.

Two-stent bifurcation treatment is a complex procedure and the technique can vary between institutions and individual physicians. It has been considered by the EBC that the way the procedure is performed can influence treatment effectiveness and they sought to examine current best practice.

Due to the complex nature of all bifurcation double stenting techniques, it was evident that a clear plan for both immediate and long-term management is essential. Elective two-stent approaches may benefit patients with complex lesions and the need for a two-stent technique may become apparent during the steps of bifurcation stenting procedures started with a single stent implantation. In terms of optimising the two-stent procedure, the EBC notes that final kissing-balloon inflation improves the distribution of the stent's struts in the bifurcation area.³

The EBC percutaneous coronary intervention consensus provides advice across currently available techniques and aims to support physicians in their preferred approaches to treatment. It is hoped that these insights and practical suggestions will help to improve outcomes in the challenging field of treating bifurcation disease.

Q. How should physicians incorporate this consensus into their decision making when considering one- and two-stent treatment approaches?

The most important message is to understand the scope, complexity, steps involved and time required for successful two-stent techniques. Single-stent approaches are simpler to perform and the EBC notes that

where simple lesions need to be treated, the single-stent technique is the most appropriate.

When complex lesions need to be managed, physician experience with techniques is an important consideration. The EBC notes that a two-stent approach can be a valuable approach in selected patients with complex coronary bifurcation lesions.³ □

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