

# SVD Registry

Study summaries SeQuent® Please / NEO  
Not randomized controlled trials &  
observational studies

# SeQuent® Please in small vessel de novo lesions

Prospective "real world" registry for the use of the "PCB only" strategy in small vessel de novo lesions

Zeymer U et al. Heart 2014; 100(4): 311-6

## Key findings

Treatment of SVD with SeQuent® Please had a very high procedural success rate. At 9-month clinical follow-up, TLR and MACE rates were low in real world patients. The authors conclude that DCBs might be an attractive alternative to DES for treating SVD.

## Description

**Design:** Open-label | Prospective | Multicenter

**Indication:** De novo

**Main patient inclusion criterion:** Reference vessel diameter  $\leq 2.75$  mm,  $\geq 2.0$  mm

**Primary endpoint:** TLR @ 9-month follow-up. Components of TLR:

- Re-PCI
- CABG

### **Secondary endpoints:**

- Procedural success rate
- MACE @ 9-month follow-up. Components of MACE:  
Cardiac death: Death not clearly of extracardiac origin  
MI: ECG changes and/or cardiac enzyme elevations  
according to each institution's routine diagnostic algorithms  
TLR
- Definite lesion and vessel thrombosis @ 9-month follow-up:  
according to academic research consortium definition <sup>[1]</sup>

### **DAPT:**

- 1, 3-6 or 12 months

## **Results**

**Patients:** 447 patients with 471 lesions were enrolled in this registry. 420 patients were treated with DCB-only (94 %) and 27 patients with DCB + BMS (6 %).

**Baseline characteristics:** The two treatment groups were well balanced. Of note are the high rate of diabetics (36.7 %) and the moderate ACS rate (23.5 %) in the overall patient population. The only statistically significant difference between the DCB-only and DCB + BMS group

were the incident of STEMI, with a higher percentage in the DCB + BMS group.

**Primary endpoint:** TLR rates at 9-month follow-up were low and comparable between both treatment groups.

	All patients n = 447	DCB-only n = 420	DCB + BMS n = 27	p-value
TLR	3.6 %	3.6 %	4.0 %	0.922

**Secondary endpoint:** Procedural success was achieved in 99 % of cases. Remaining endpoints at 9-month follow-up:

	All patients n = 447	DCB-only n = 420	DCB + BMS n = 27	p-value
MACE	4.7 %	4.7 %	4.0 %	0.866
Cardiac death	0.0 %	0.0 %	0.0 %	-
MI	1.8 %	1.9 %	0.0 %	0.481
TLR	3.6 %	3.6 %	4.0 %	0.922
Thrombosis	0.8 %	0.6 %	4.2 %	0.054

[1] Cutlip D et al. Circulation 2007 15: 2344-51.