

**LINC 2018**  
**Leipzig, January 30-February 2 2018**

# Minimal is optimal in SFA therapy, reducing metal burden

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# Minimal is optimal

- ISR remains the burden of SFA treatment leading to the idea of 'leaving nothing behind'
- DCB alone works in many lesions, but stenting cannot be eliminated

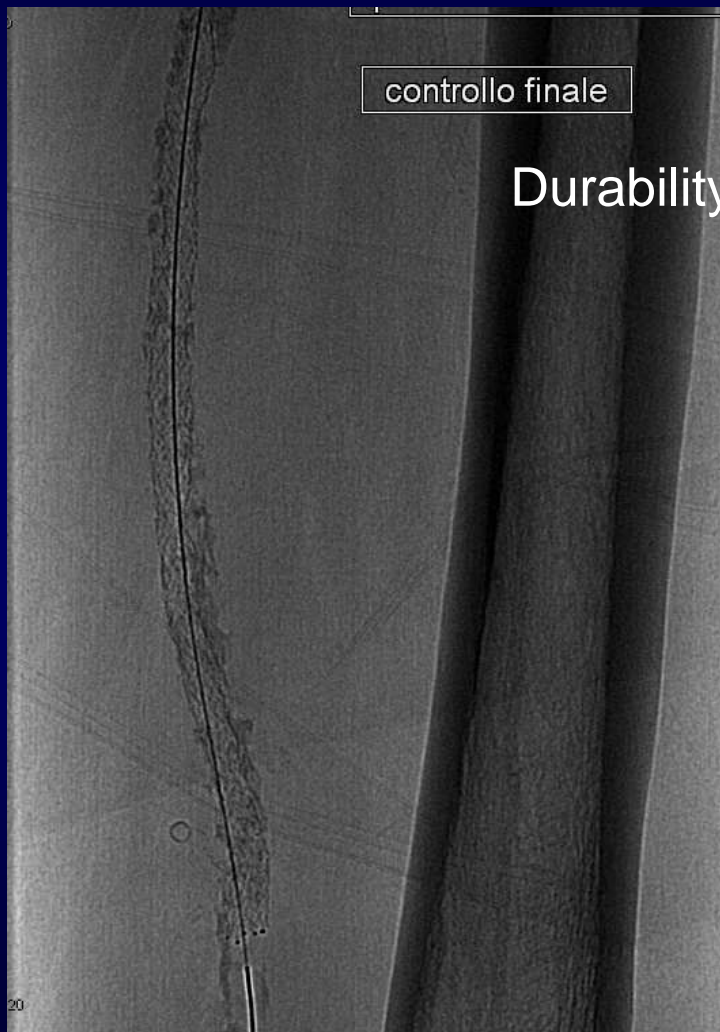
# Bail-out stenting rate

	DCB arm	POBA arm
Thunder	4%	22%
FemPac	9%	14%
Pacifier	20.5%	34%
Levant 1	3%	16%
Levant 2	2.5%	6.9%
INPACT SFA	7.3%	12.6%
BIOLUX PI	6.7%	34%

# Minimal is optimal

- Mechanically-induced neointimal hyperplasia can be minimized (what are the factors that contribute?) by reducing metal burden
  - Thin-strut stents
  - Spot-stenting

# Minimal is optimal



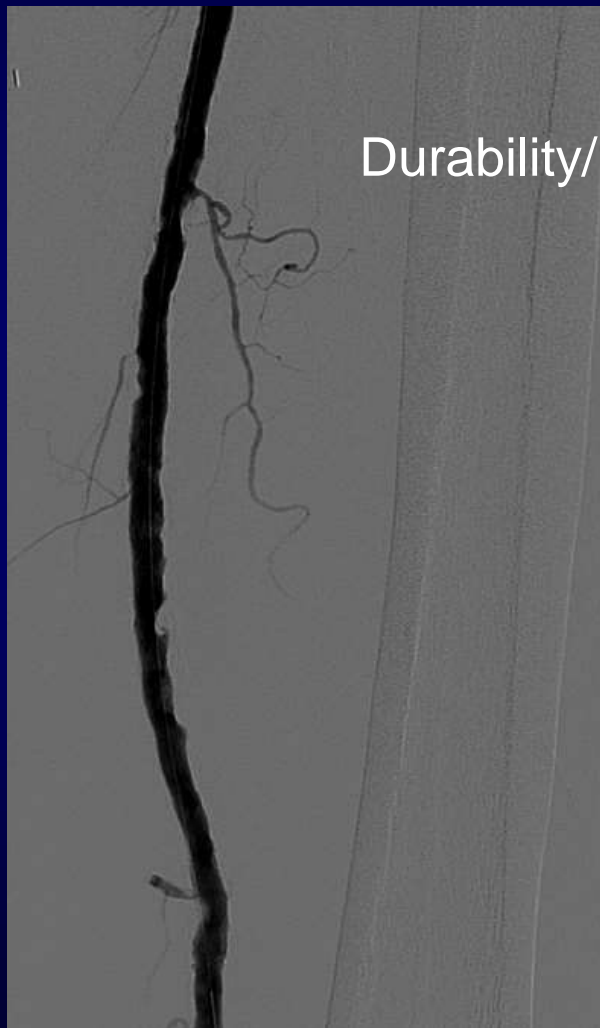
2011



2014

Durability/radial force

# Minimal is optimal



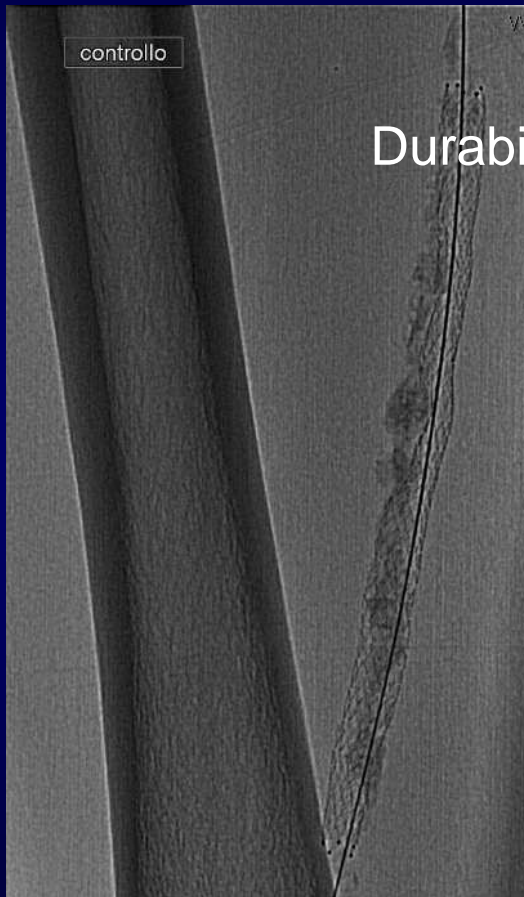
2011

Durability/radial force

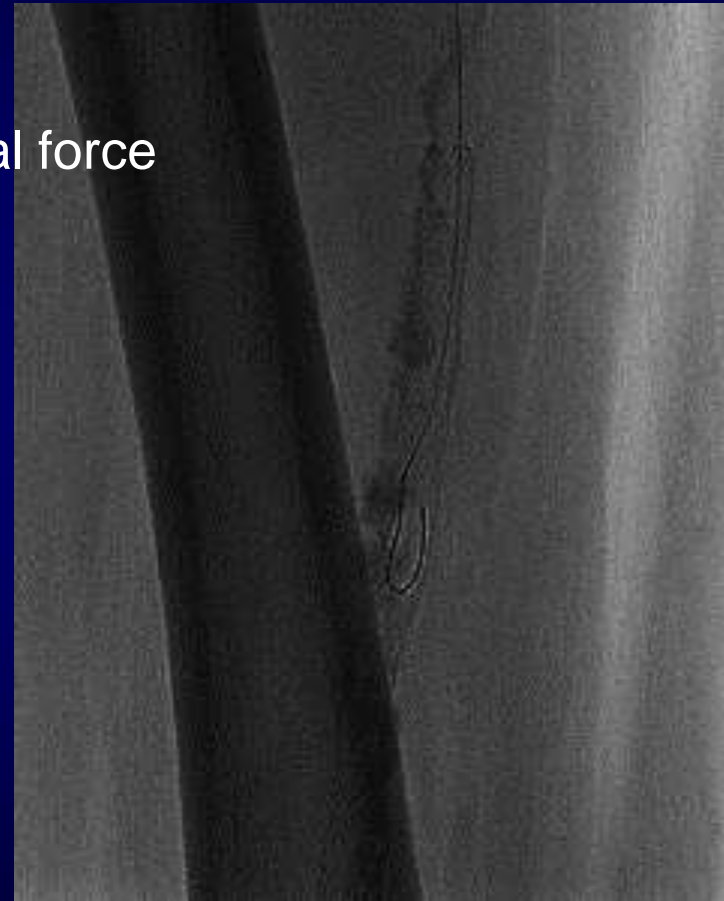


2014

# Minimal is optimal



Durability/radial force

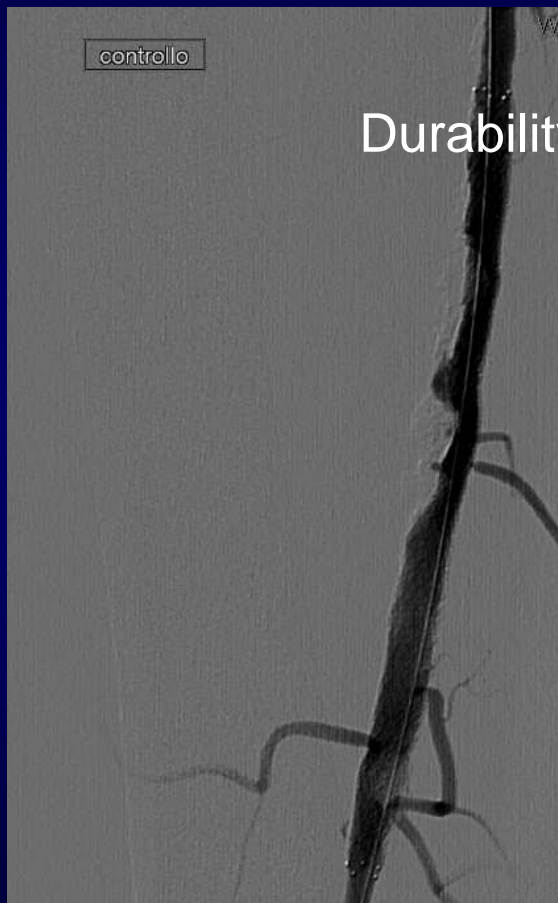


2011

2016

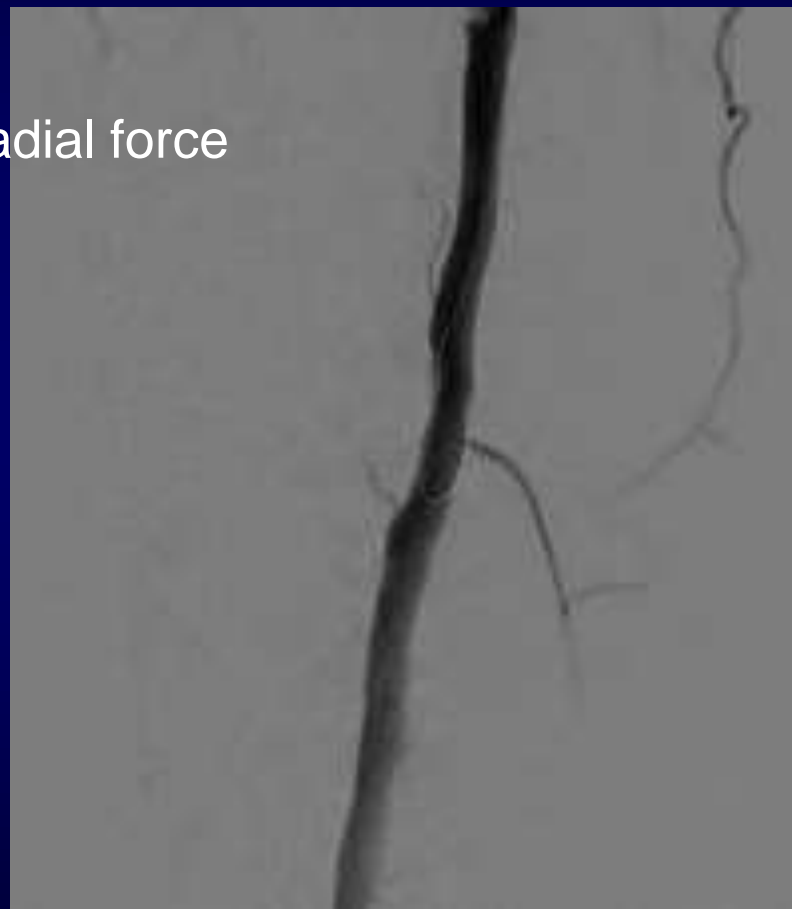


# Minimal is optimal



2011

Durability/radial force



2016



# Minimal is optimal

- BIOFLEX-PIII (G. Tepe)
- BIOFLEX-PEACE (M. Lichtenberg)
- BIOLUX 4EVER (K. Deloose)
- BIOTRONIK REACT (P. Mwipatayi)

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