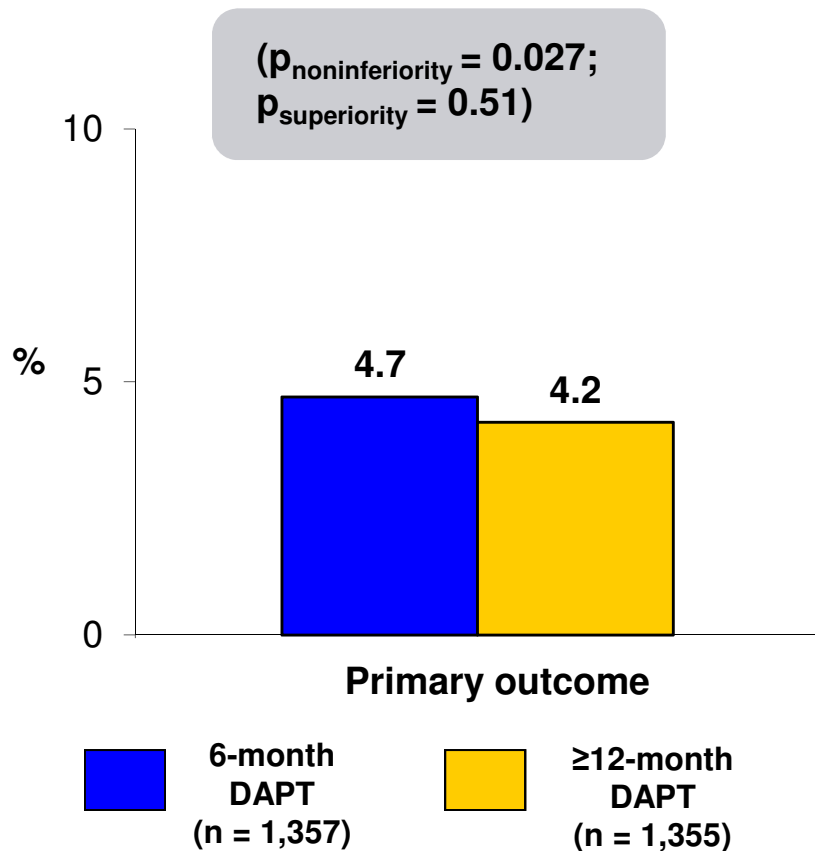


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Trial design: Patients with ACS undergoing PCI with a second-generation DES were randomized in a 1:1 fashion to either DAPT for 6 months or ≥ 12 months. Patients were followed for 18 months.



Results

- Primary outcome, MACCE at 18 months: short-term vs. long-term DAPT: 4.7% vs. 4.2%, p for noninferiority = 0.027; p for superiority = 0.51
- MI: 1.8% vs. 0.8%, $p = 0.02$; nontarget vessel MI: 0.8% vs. 0.2%, $p = 0.07$; stent thrombosis: 1.1% vs. 0.7%, $p = 0.32$
- BARC 2-5 bleeding: 2.7% vs. 3.9%, $p = 0.09$

Conclusions

- 6-month duration of DAPT is noninferior to ≥ 12 -month duration among patients with ACS undergoing PCI with a second-generation DES; however, there is a higher risk of MI with shorter durations
- Trial validates current guidelines, which recommend at least 12 months of DAPT following DES PCI for ACS