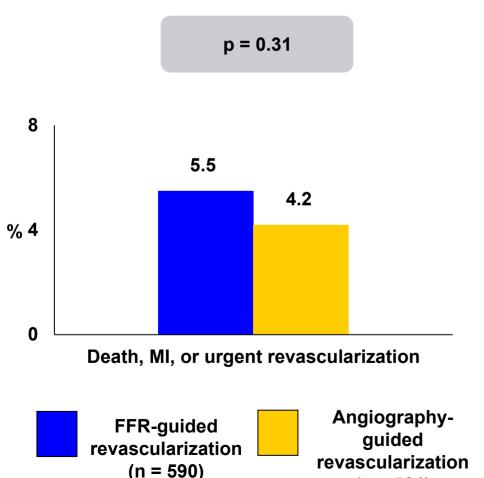
FLOWER-MI #ACC21



Trial Description: Patients who underwent primary PCI for STEMI and had nonculprit multivessel coronary disease were randomized to FFR-guided revascularization vs. angiography-guided revascularization.



(n = 581)

RESULTS

- Death, MI, or urgent revascularization at 12 months: 5.5% of the FFR-guided group vs. 4.2% of the angiography-guided group (p = 0.31)
- Nonfatal MI: 3.1% of the FFR-guided group vs. 1.7% of the angiography-guided group (p = nonsignificant)
- Urgent revascularization: 2.6% of the FFR-guided group vs. 1.9% of the angiography-guided group (p = nonsignificant)

CONCLUSIONS

- Among patients who underwent primary PCI for STEMI and had nonculprit multivessel coronary disease, FFR-guided revascularization was not superior to angiography-guided revascularization
- An FFR-guided strategy failed to reduce death, MI, or urgent revascularization, compared with an angiography-guided strategy

Puymirat E, et al. N Engl J Med 2021; May 15: [Epub]