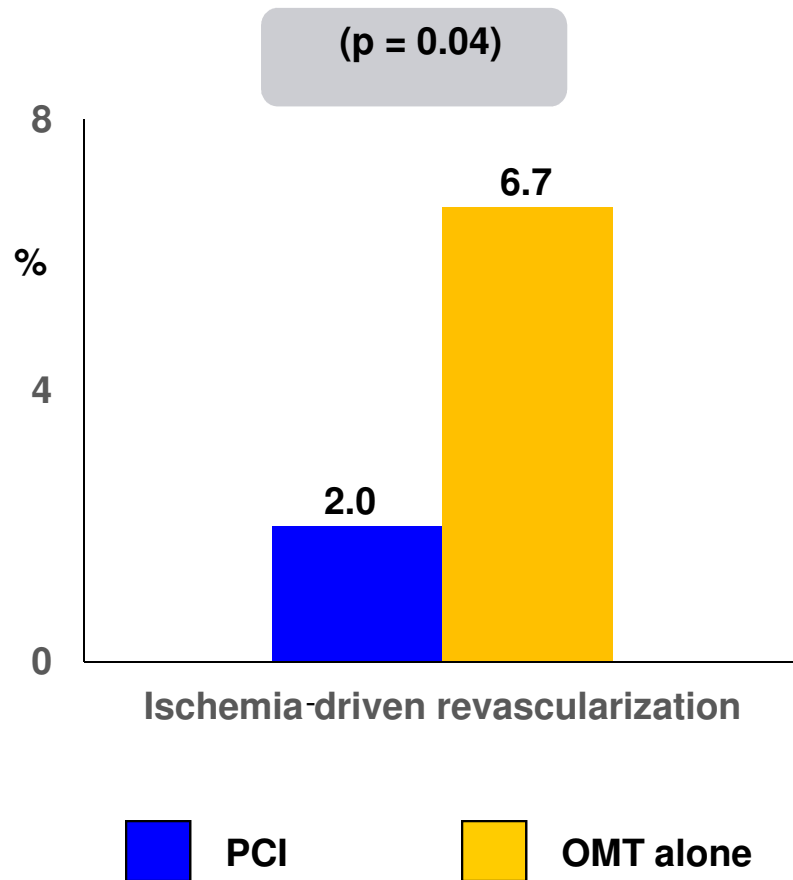


EUROCTO

Trial design: Stable angina patients with a chronic total occlusion (CTO) were randomized to PCI with a biolimus-eluting stent plus optimal medical therapy (OMT) (n = 259) vs. OMT alone (n = 137).



Results

- Angina frequency score (p = 0.003) and the quality-of-life score (p = 0.007) improved for PCI compared with OMT (intention to treat)
- Major cardiovascular and cerebrovascular events: 5.2% for PCI vs. 6.7% for OMT (p = 0.55)
- Ischemia-driven revascularization: 2.0% for PCI vs. 6.7% for OMT (p = 0.04)

Conclusions

- Among patients with stable angina due to CTO, PCI improved some, but not all measures of health status (angina frequency and quality of life)
- Ischemia-driven revascularization was less frequent in the PCI group