

# Clinical trials of PCI with or without stent

TrialResults-center [www.trialresultscenter.org](http://www.trialresultscenter.org)

## 1 stable angina

Trial	Treatments	Patients	Trials design and methods
<b>PCI with or without stent vs medical treatment</b>			
<b>TIME , 2001</b> n=NA follow-up:	coronary angiography and revascularisation versus optimised medical therapy	patients aged 75 years or older with chronic angina of at least Canadian Cardiac Society class II despite at least two antianginal drugs	Parallel groups open
<b>AVERT , 1995</b> n=177/164 follow-up: 1.5y	angioplasty versus atorvastatin at 80 mg per day	Angina or asymptomatic, MI or unstable angina but not within 14 days, no triple vessel disease	Parallel groups open
<b>Dakik , 1998</b> n=19/22 follow-up: 1y	PTCA versus intensive medical therapy	stable survivors of AMI	Parallel groups open
<b>MASS II , 2007</b> n=205/203 follow-up: 5y	PCI versus medical therapy	patients with multivessel coronary artery disease with stable angina and preserved ventricular function	Parallel groups open
<b>COURAGE , 2007</b> [NCT00007657] n=1149/1138 follow-up: median 4.6 y	PCI coupled with optimal medical therapy versus optimal medical therapy alone	patients with stable coronary artery disease	Parallel groups open Canada, US
<b>ALKK , 2003</b> n=149/151 follow-up: 4.7y	angioplasty versus medical therapy	patients with single vessel disease of the infarct vessel and no or minor angina pectoris in the subacute phase (1 to 6 weeks) after an acute myocardial infarction	Parallel groups open Germany
<b>Hambrecht , 2004</b> n=50/51 follow-up: 1y	PCI versus 12 months of exercise training (20 minutes of bicycle ergometry per day)	male patients aged 70 years	Parallel groups open
<b>Bech , 2001</b> n=90/91 follow-up: 2y	PTCA versus deferral of PTCA	patients with planned PTCA and no documented ischemia and with coronary pressure-derived fractional flow reserve >0.75	Parallel groups open

continued...

Trial	Treatments	Patients	Trials design and methods
ISCHEMIA <i>ongoing</i> n=NA follow-up:	invasive strategy, consisting of early routine cardiac catheterization followed by revascularization plus optimal medical therapy (OMT) and lifestyle changes versus conservative strategy of optimal medical therapy and lifestyle changes in which invasive procedures will be performed only after failure of OMT	patients with stable ischemic heart disease and moderate to severe ischemia	Parallel groups open-label

More details and results :

- myocardial revascularization for stable angina in all type of patient at <http://www.trialresultscenter.org/go-Q25>
- myocardial revascularization for stable angina in single vessel disease at <http://www.trialresultscenter.org/go-Q27>
- myocardial revascularization for stable angina in multivessels disease at <http://www.trialresultscenter.org/go-Q28>

## References

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Pfisterer M, Buser P, Osswald S, Allemann U, Amann W, Angehrn W, Eeckhout E, Erne P, Estlinbaum W, Kuster G, Moccetti T, Naegeli B, Rickenbacher P Outcome of elderly patients with chronic symptomatic coronary artery disease with an invasive vs optimized medical treatment strategy: one-year results of the randomized TIME trial. *JAMA* 2003;289:1117-23 [[12622581](#)]

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### MASS II, 2007:

Hueb W, Lopes NH, Gersh BJ, Soares P, Machado LA, Jatene FB, Oliveira SA, Ramires JA Five-year follow-up of the Medicine, Angioplasty, or Surgery Study (MASS II): a randomized controlled clinical trial of 3 therapeutic strategies for multivessel coronary artery disease *Circulation* 2007;115:1082-9 [[17339566](#)] [10.1161/CIRCULATIONAHA.106.625475](#)

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#### **Bech, 2001:**

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#### **ISCHEMIA, :**

ongoing trial

## 2 coronary artery disease

<b>Trial</b>	<b>Treatments</b>	<b>Patients</b>	<b>Trials design and methods</b>
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More details and results :

- myocardial revascularization for coronary artery disease in all type of patient at <http://www.trialresultscenter.org/go-Q26>

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Entry terms: PCI