



The Medical **Bulletin**

In Cardiology

IT IS not sure how many more experiments we will need to convince cardiologists that PCI outside of acute plaque rupture and myocardial infarction has minimal to no value.

Here is a list of previous trials that assessed clinical outcomes and found no benefit for PCI in patients with stable coronary artery disease (CAD):

The STICH trial compared CABG to medical therapy in patients with ischemic cardiomyopathy and failed to find a difference in mortality at 5 years, but at 10 yrs there is benefit of surgery

- **MASS-II PCI trial (2004):** PCI vs medical therapy;
- **COURAGE (2007):** PCI added to optimal medical therapy vs medical therapy alone;
- **BARI-2D (2009):** PCI added to optimal medical therapy vs medical therapy alone in patients with diabetes;
- **ISCHEMIA (2020):** an early invasive strategy, mostly with PCI, in patients with moderate to severe ischemia;
- **ISCHEMIA-CKD (2020):** an early invasive strategy in patients with moderate to severe ischemia and chronic kidney disease. REVIVED-BCIS trial, which enrolled patients most likely to benefit from PCI: those with anatomy amenable to intervention as well as viable myocardium. Yet not even a hint of benefit.

Dr. V. Balachandran
MD, MNAMS, FRCP, FACC