

Sistema Socio Sanitario



Regione
Lombardia
ASST Valle Olona



Quando prolungare la DAPT oltre l'anno dal ricovero

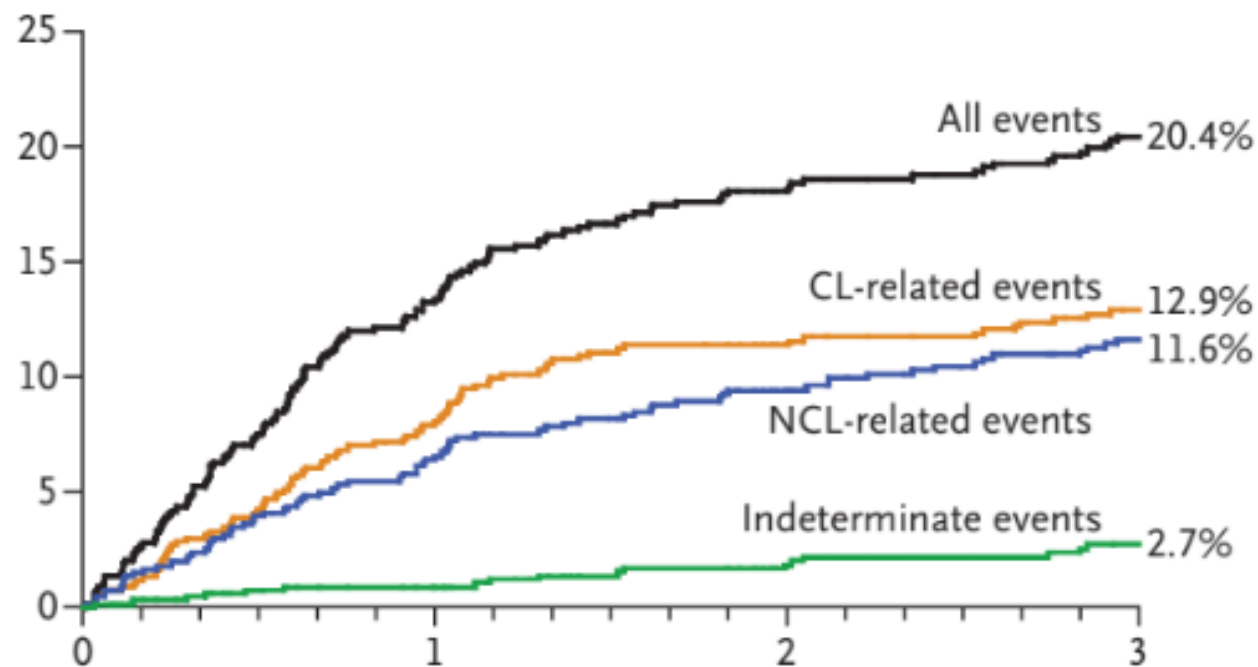
ALBERTO MAESTRONI

EMOCLINIC SYMPOSIUM
SULLE SPONDE DEL TICINO

“Cardiologia
ieri, oggi
e domani”

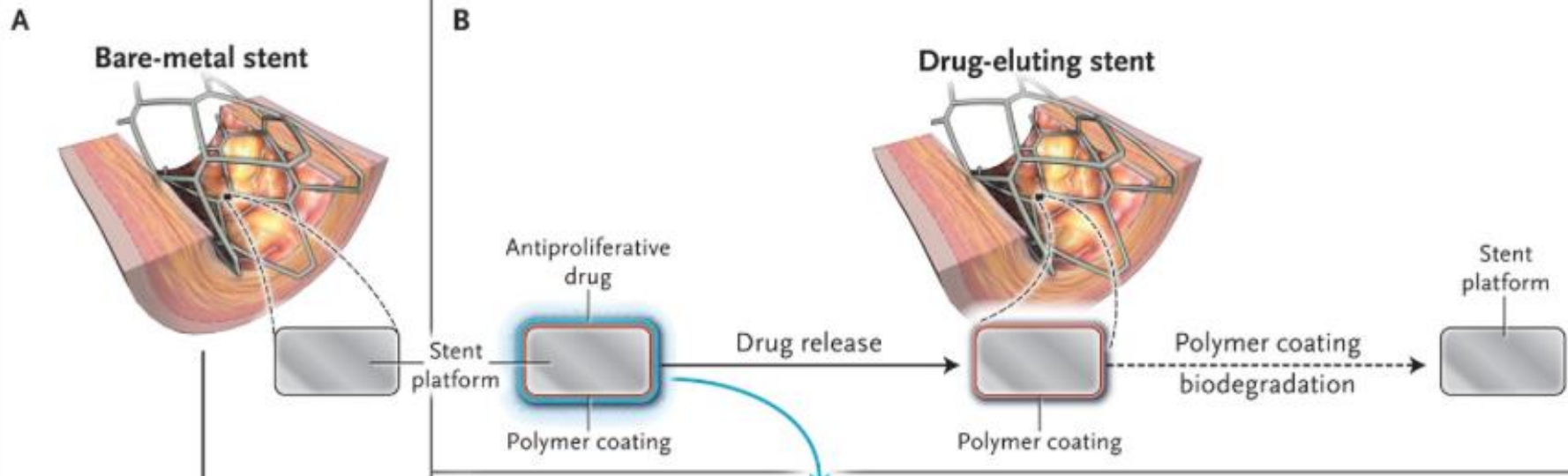


A Prospective Natural-History Study of Coronary Atherosclerosis



Drug-Eluting Coronary-Artery Stents

Giulio G. Stefanini, M.D., and David R. Holmes, Jr., M.D.



Secondary Prevention after ACS Requires an Integrated Approach



Focal interventional
treatment by PCI

Systemic medical therapy
intended to stabilise
plaque and inhibit clot
formation

DAPT

2014

12 → 36

Clopidogrel-Prasugrel

T

P

9961 PCI-DES (1°-2° gen)

STEMI 11%

NSTEMI 15%

Stable Angina 37%

Altro 20%

Stent
thrombosis

0.4%

1.4%

Death
MI
Stroke

4.3%

5.9%

MI

2.1%

4.1%

Non CV
death

1.0%

0.5%

PEGASUS 2015

12/36 → 33 months
Ticagrelor 90 mg vs 60 mg

21162 MI 1-3 y before

STEMI 53%

NSTEMI 41%

Unknown 5%

Only 83% PCI

CV death
MI
Stroke

TIMI major
bleeding

T₉₀

0.4%

4.3%

T₆₀

1.4%

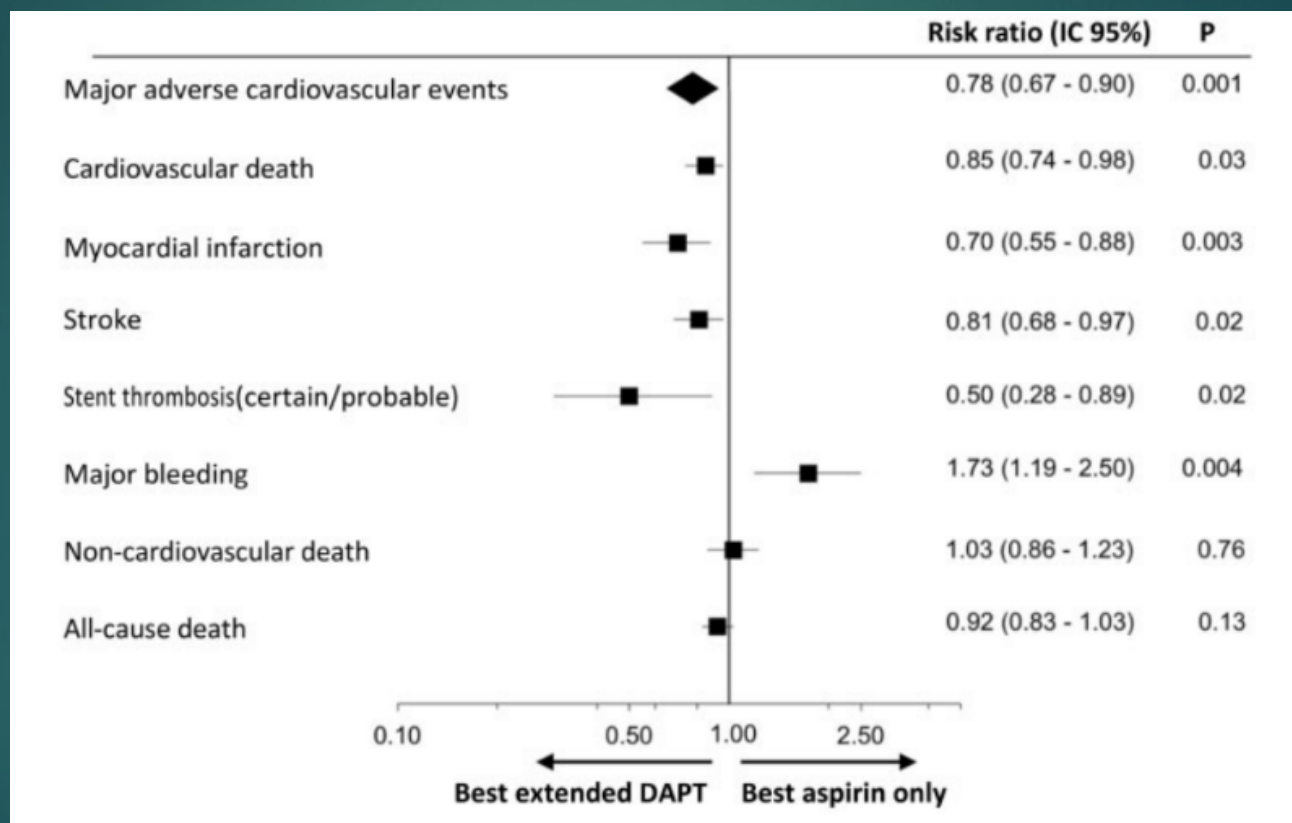
5.9%

P

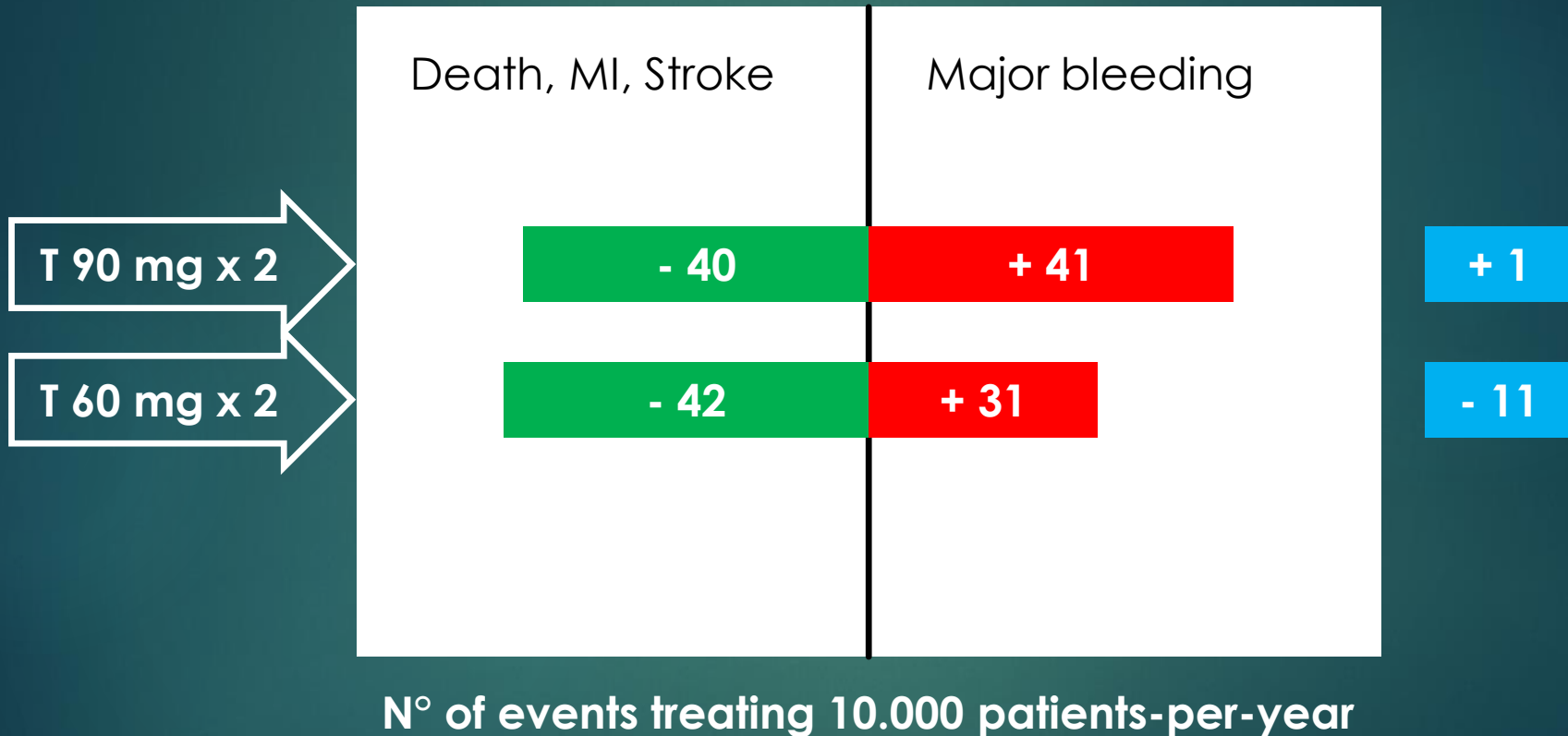
2.5%

1.6%

Long-term dual antiplatelet therapy for secondary prevention of cardiovascular events in the subgroup of patients with previous myocardial infarction: a collaborative meta-analysis of randomized trials



Net Adverse Clinical Events



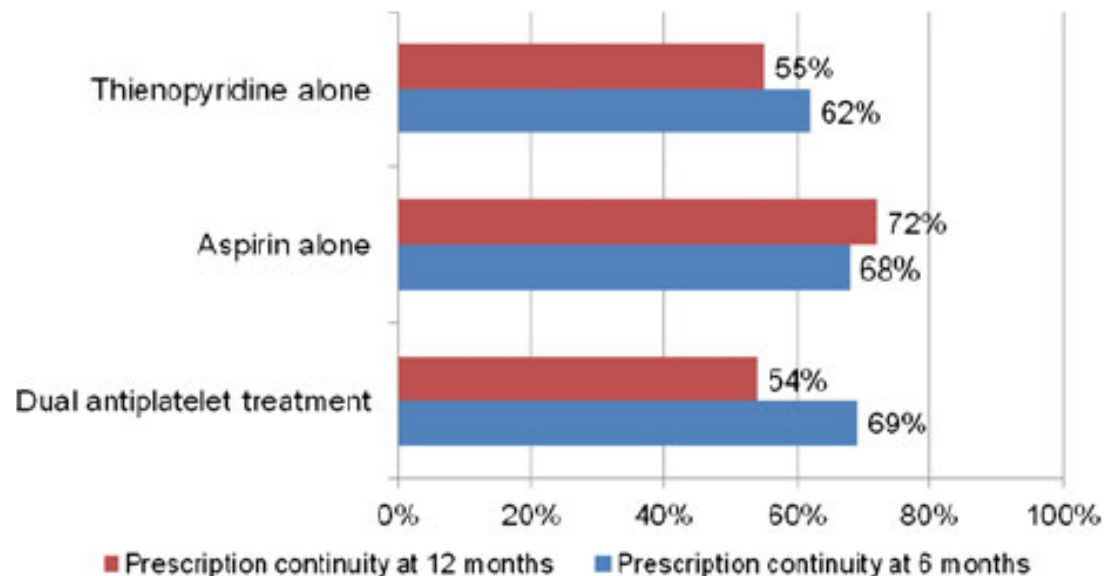


105 DCL

NO CCH

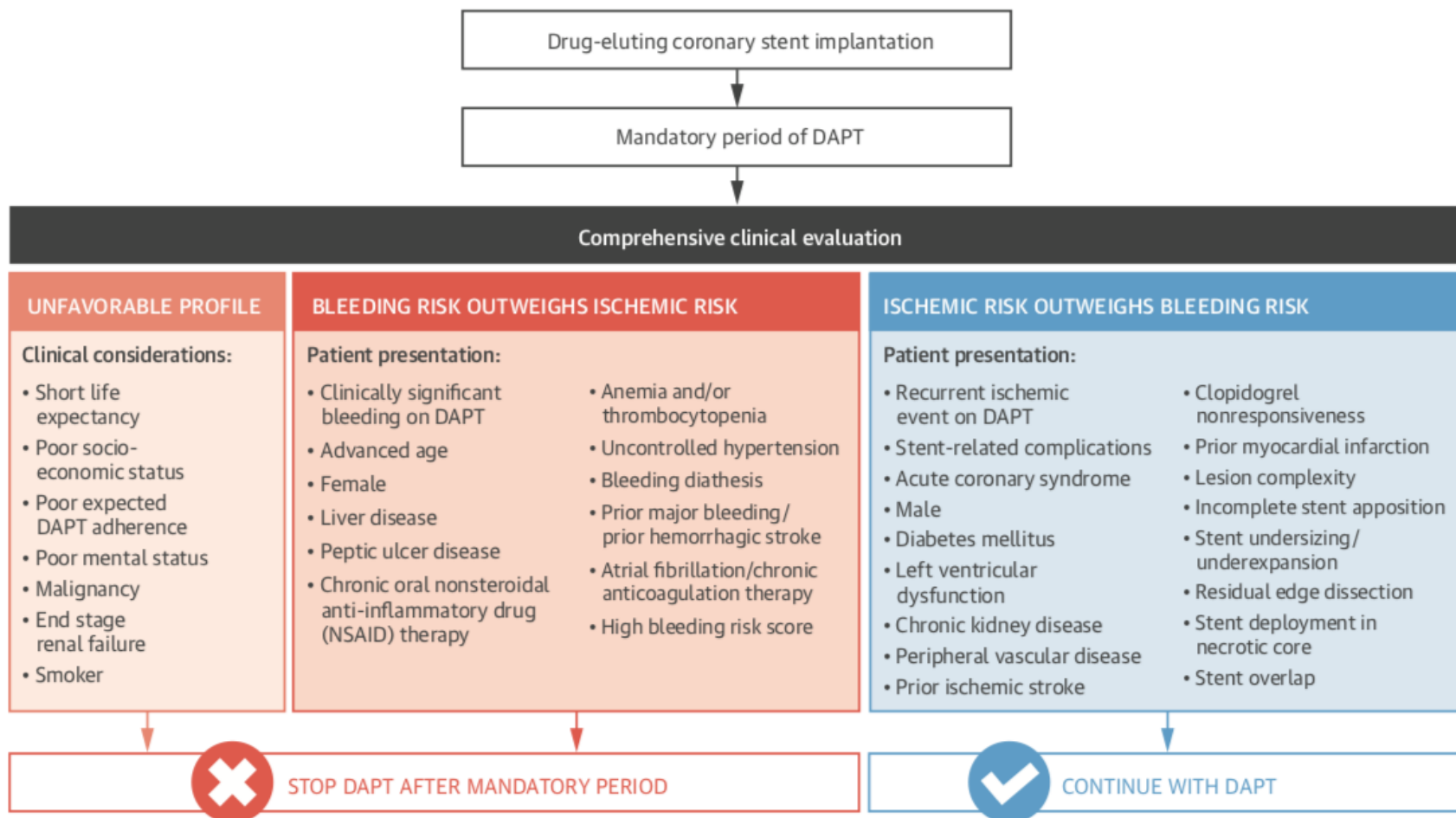
Outcomes, Health Costs and Use of Antiplatelet Agents in 7,082 Patients Admitted for an Acute Coronary Syndrome Occurring in a Large Community Setting

Aldo P. Maggioni • Elisa Rossi • Elisa Cinconze • Daniela P. Roggeri •
Alessandro Roggeri • Gianna Fabbri • Marisa De Rosa •
on the behalf of the ARNO Cardiovascular Observatory



Cardiovasc Drugs Ther (2013) 27:333–340

CENTRAL ILLUSTRATION Decision-Making After the Mandatory DAPT Period



Montalescot, G. et al. J Am Coll Cardiol. 2015; 66(7):832-47.

When a mandatory period of DAPT is completed, a careful evaluation of the patient's ischemic risk and bleeding risk, and of the overall clinical profile should be undertaken. DAPT = dual antiplatelet therapy; NSAID = nonsteroidal anti-inflammatory drug.



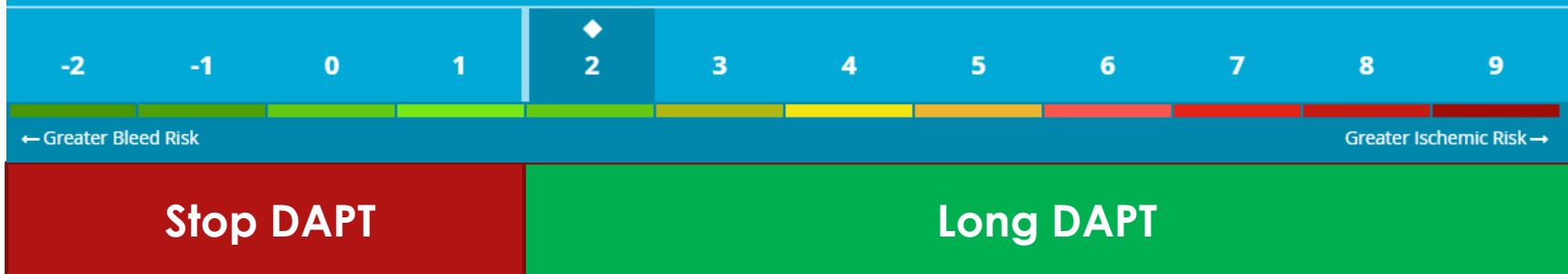
DAPT Score: Not Enough information

The DAPT Score was created in patients who had completed 12 months of DAPT without having a major bleeding or ischemic event and who were not on chronic oral anticoagulation. The DAPT Risk Calculator is recommended to be used for guidance in the overall conversation about dual antiplatelet therapy and not as a recommendation for or against any medical treatment. X

DAPT Risk Calculator

Reset

DAPT Score Impact – Increasing Bleeding Risk vs. Increasing Ischemic Risk ⓘ



☐ Peripheral Arterial Disease ⓘ

Procedure Characteristics

Select all that apply

☐ Myocardial Infarction at Presentation

☐ Stenting of Vein of Graft

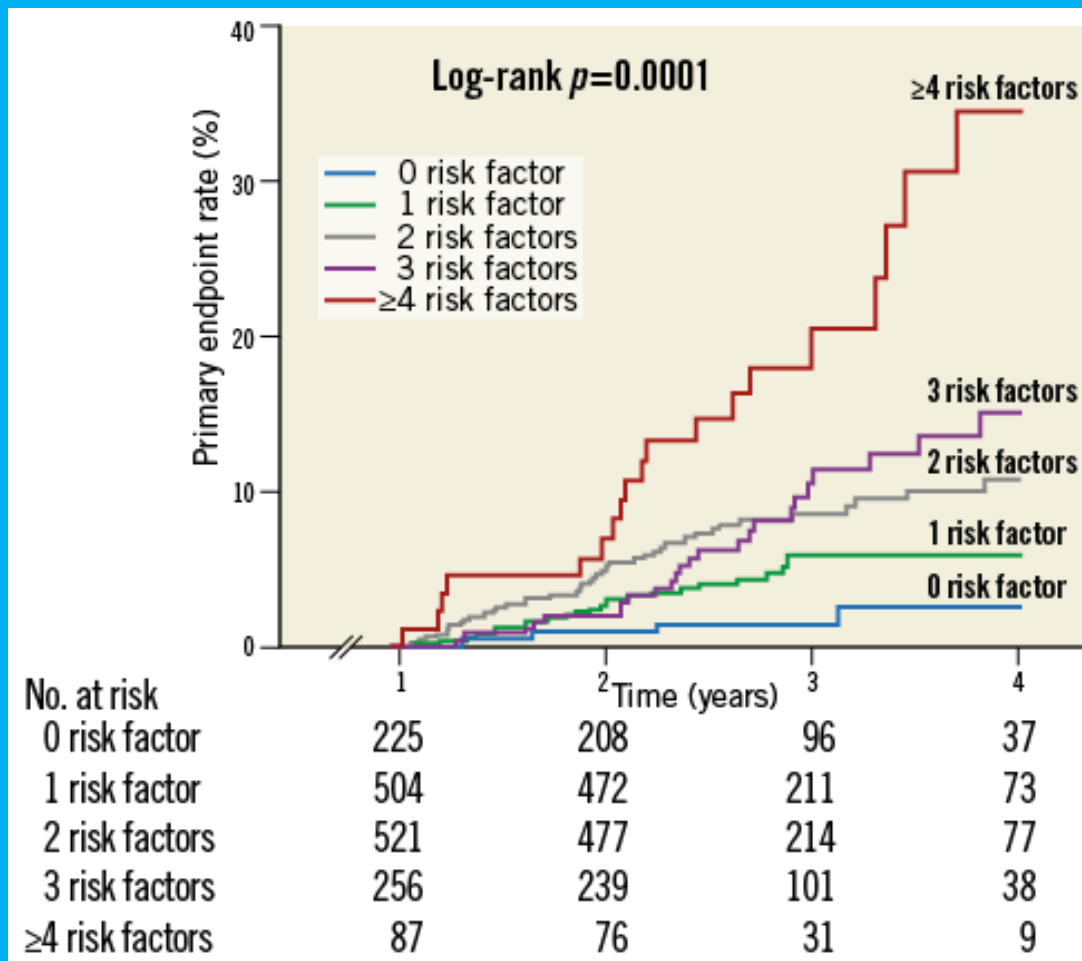
☐ Stent Diameter < 3mm



DAPT Risk
Calculator

Clinical events beyond one year after an acute coronary syndrome: insights from the RECLOSE 2-ACS study

Guido Parodi^{1*}, MD, PhD; Benedetta Bellandi¹, MD; Giuseppe Tarantini², MD; Fernando Scudiero¹, MD; Renato Valenti¹, MD; Rossella Marcucci¹, MD, PhD; Angela Migliorini¹, MD; Niccolò Marchionni¹, MD, PhD; Anna Maria Gori¹, BS; Chiara Zocchi¹, MD; David Antoniucci¹, MD



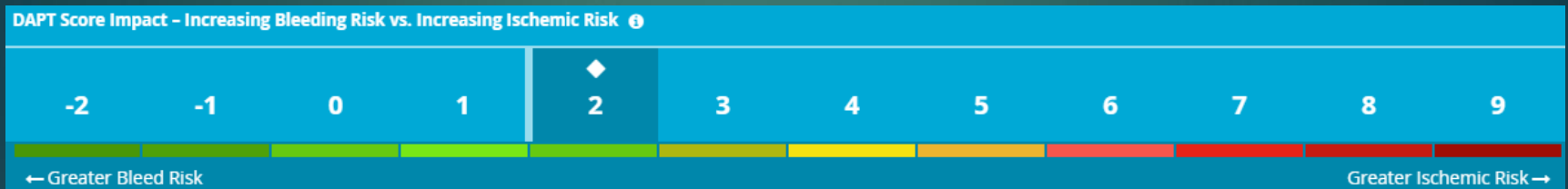
EuroIntervention

Published on 20 March 2017

Caso Clinico

- ▶ **05/2018 Visita di controllo: ASA + Ticagrelor 90 x 2**
- ▶ 54 aa M
- ▶ 2003 STEMI anteriore → PCI DES su IVA m
- ▶ 2010 NSTEMI → restenosi intrastent → rePCI DEB
- ▶ 2015 ictus ischemico criptogenetico territorio ACM sx in corso di SAPT (ASA)
- ▶ 05/2017 STEMI anteriore → restenosi subocclusiva intrastent → PCI DES Biofreedom

Ticagrelor 60 x 2 → controindicato per pregresso ictus



Shift a Clopidogrel 75 mg + ASA

Ricerca di PFO negativa, impianto di loop recorder

Conclusioni

- ▶ Il prolungamento della DAP oltre i 12 mesi determina una riduzione degli eventi ischemici a fronte di un incremento dei sanguinamenti
- ▶ E' fondamentale la stratificazione del rischio emorragico vs ischemico quindi il «tailoring» della terapia più appropriata al singolo paziente (eventualmente avvalendosi di SCORE)



GRAZIE per l'ATTENZIONE !

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