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Mid-term outcome of Drug-Eluting Stent or Drug-coated Balloon for saphenous vein graft intervention

We investigated PCI of saphenous vein graft (SVG) that was performed between July 2012 and July 2018. During the survey period, 40 patients (47 lesions) underwent SVG PCI. The mean age was 75 ± 6.9 years old and 82.5% were male. ACS lesions were 27.5%. Excluding POBA-only and BMS stenting, DES was deployed at 34 lesions and DCB dilation was performed at 7 lesions. All patients who underwent DCB was in-stent restenosis. Follow-up CAG was performed in 29 patients and restenosis was seen in 19.3% with a mean follow-up of 9.4 ± 2.0 months. There was no restenosis in the DCB and restenosis was seen in 20% of DES, but there was no significant difference between the two groups. There are limited cases of revascularization to SVG, and this study included only a few cases. If possible, revascularization to the native coronary artery is desirable, but revascularization to SVG was considered to be acceptable in cases that treatment of the native coronary artery is difficult or for ACS lesions.