Coronary artery disease (CAD) is one of the most common causes of death. Various technological advancements in interventional cardiology have significantly improved the treatment of CAD and significantly reduced the mortality of cardiovascular diseases. One recent development, the drug eluting balloon (DEB), decreases the incidence of restenosis and acute coronary events. DEB uses Paccocath technology in which the intima of the blood vessel is filled with carrier applied drug, paclitaxel, which penetrates into the lesion, preventing proliferation of vascular media and stabilizing atherosclerotic plaque. By applying that procedure the risk of restenosis is significantly reduced and most importantly the new acute coronary event. While the most common indication for DEB is stent restenosis, studies have also shown good results with bifurcation lesions, lesions in small vessels, certain lesions in native coronary arteries, and in patients who require a month of dual anti-aggregative therapy prior to noncardiac surgery.

In our experience with twenty patients, the indication for DEB was restenosis in sixteen patients, lesion at a bifurcation in three patients, and a new lesion in one patient. Clinical observation was not an indication for recoronarography in any of our patients. Our early success with DEB reaffirms the method for treating CAD, with an emphasis on shortening the length of dual anti-aggregative therapy.

KEYWORDS: coronary artery disease, drug eluting balloon, stent restenosis.


Literature