

EuroPCR 2014: the 25th Official Congress of the European Association of Percutaneous Cardiovascular Interventions



Stephan Windecker the new European Association of Percutaneous Coronary Intervention President discusses the highlights of the Congress with live transmissions from around the globe

The Official Annual Congress of the European Association of Percutaneous Cardiovascular Interventions—the EuroPCR course—was held in Paris from 20 May to 23 May 2014. This was the 25th anniversary of what is now known as EuroPCR and reaffirmed the course as the leading Congress in the field of percutaneous cardiovascular medicine with an attendance of 12 257 participants. It is noteworthy that 39 National Societies of the European Society of Cardiology community were represented at EuroPCR this year, with a dedicated area to showcase their achievements. Overall, the course comprised 513 sessions with 51 h of live case transmissions from 17 centres in Europe, Canada, Japan, and Kuwait.

Ten sessions were dedicated to the presentation of 48 late-breaking clinical trials, including first reports of randomized controlled trials, large-scale registries and updates of clinical trials.

In the field of coronary interventions, important data were presented by Dr Valgimigli from a pooled patient-level analysis of five trials including 4896 patients randomly allocated to everolimus-eluting stents or bare metal stents. In this analysis, everolimus-eluting stents were associated with a marked clinical benefit compared with bare metal stents during 2 years of follow-up. This was not limited to a reduction in the risk of the prevention of restenosis, but extended to a reduction in the risk of ischaemic events, including stent thrombosis, myocardial infarction, and cardiac mortality.

The primary end-point results of the CENTURY II randomized trial were presented by Prof. Wijns and simultaneously published online in the *European Heart Journal*. In this all-comer trial, the new-generation, thin-strut, sirolimus-eluting Ultimaster stent, with biodegradable polymer coating was shown to be non-inferior to the everolimus-eluting Xience stent with durable polymer coating in terms of target-lesion failure at the 1-year follow-up. Finally, the OCTAVIA intracoronary imaging study was presented by Dr Guagliumi, with interesting data on the mechanisms of atherothrombosis in the setting of acute myocardial infarction in women and men.

Moving on to the field of transcatheter aortic valve interventions, Dr Webb presented for the first time the 30-day outcomes from the SAPIEN 3 trial. In this study, the newest iteration of the SAPIEN heart

valve prosthesis with an outer skirt to mitigate paravalvular leaks not only showed remarkable clinical outcomes with a very low rate of mortality and stroke but, importantly, an exceptionally low rate of paravalvular aortic regurgitation. Dr Moellmann presented promising results on the ACURATE neo transfemoral TAVI device at 30 days. Moreover, Dr Tuzcu presented the initial results of the US feasibility trials of the Direct Flow Medical valve. Finally, Dr Duncan reported the long-term 5-year outcomes of transcatheter aortic valve interventions in high-risk patients within the UK TAVI registry.

Concerning mitral interventions, two first-in-man studies were presented on the Fortis valve and the Tiara bio-prosthesis, presented by Dr Bapat and Dr Cheung, respectively. These reports reflect the fact that transcatheter mitral valve replacement has entered the clinical arena with important studies to evaluate this new technology to be followed in the next few years. On the topic of transcatheter mitral repair, Dr Maisano reported a feasibility study on a 'surgical-like' device for percutaneous mitral valve direct annuloplasty. It is likely that transcatheter mitral valve replacement and repair will play complementary roles and future studies will address which patients will benefit from these interventions.

In addition to late-breaking science, EuroPCR 2014 included a large number of educational sessions. The educational theme this year was 'Personalized Medicine', with the intention of placing the individual patient at the centre of decision-making, and to provide guidance on how results from clinical trials performed in highly selected patient populations may influence the care of individual patients. Of note, interventional cardiovascular medicine is inclusive by definition as it encompasses prevention, diagnosis and integrated care of multiple, interrelated disease conditions. The theme of Personalized Medicine represented an important thread running throughout the educational component of the EuroPCR 2014 course.

Overall, the blend of live cases, educational, and scientific sessions represents the very essence of EuroPCR, making it a unique course in interventional cardiovascular medicine.

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