

STUDY TITLE	FIM-LIMUS-DCB TRIAL : Treatment of Coronary In-Stent Restenosis by a Sirolimus (Rapamycin) Coated Balloon or a Paclitaxel Coated Balloon
STUDY POPULATION	Patient with 2 or less primary drug eluting stent in-stent restenosis lesion
PRINCIPAL INVESTIGATOR	Datuk Dr. Rosli Mohd Ali
STUDY COORDINATOR	Salizah Selamat Contact number : 03 – 2617 8200 ext 3132
START DATE	26 Jan 2016
END DATE	30 Jun 2016
INCLUSION	<ul style="list-style-type: none"> • At least 18 years of age and able to give informed consent • Clinical evidence of stable or unstable angina (acute coronary syndrome) or an abnormal functional study demonstrating myocardial ischemia due to the target lesion(s) • Patients with primary 2 or less primary drug-eluting stent in-stent restenosis (DES-ISR) lesions (70% diameter stenosis or more or 50% or more and positive functional study) including margin-stenosis with max 5 mm distance to the stent in the native coronary arteries* • Lesion length 25 mm or less • Patients with lesions suitable for percutaneous coronary intervention (PCI) • Patients who are mentally and linguistically able to understand the aim of the study and to show sufficient compliance in following the study protocol • Patients must agree to undergo the 6-month angiographic and clinical follow-up • Patients must agree to undergo the 1 year clinical follow-up • The patients, by providing their informed consent, agree to these risks and benefits as stated in the patient informed consent document <p>*Treatment of an additional lesion in the non-target vessel, including non-ISR lesions, is permissible if the lesion is treated prior to the target lesion (ideally 24hrs or more) without any evidence of post-procedural MACE.</p>

EXCLUSION

- Reference vessel diameter (RVD) less than 2.5 mm
- Lesion length more than 25 mm
- Intended treatment of more than 2 DES-ISR lesions or a total of more than 3 lesions (including native vessel disease) per patient
- ST-elevation myocardial infarction (MI) within the past 72 hours
- Severe renal failure with creatinine more than 2.0 mg/dL (177 µmol/L)
- Known hypersensitivity or contraindication to aspirin, heparin, clopidogrel or ticlopidine, or sirolimus
- Sensitivity to contrast media not amenable to premedication
- Left ventricular ejection fraction less than 35% known prior to the intervention
- Untreated pre-procedural hemoglobin less than 10 g/dL
- Coagulopathy manifested by platelet count less than 100,000
- Women who are known or suspected to be pregnant; women who are breast-feeding
- Patients in cardiogenic shock
- Patients with concomitant medical illnesses that require cytostatic or radiation therapy
- Patients with a life expectancy of less than 2 years
- Unprotected Left Main diameter stenosis 50% or more
- Visible thrombus (by angiography) at target lesion site
- Patients who are concurrently participating in an investigational study when such participation could confound the treatment or outcomes of this study
- Patients under administrative or judicial custody