

# OCT vs. IVUS vs. angiography guidance

#ESCCongress

A real-time updated network meta-analysis

## Conclusion



Intravascular imaging (IVI)-guided percutaneous coronary intervention (PCI) is associated with a lower rate of target lesion failure compared with angiography-guided PCI.

## Impact on clinical practice



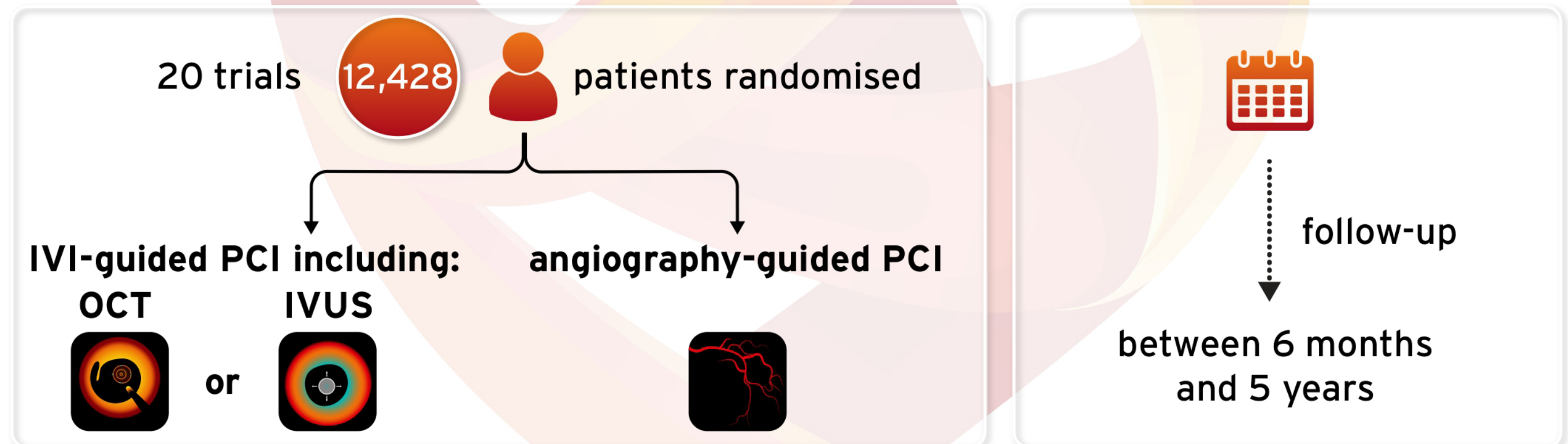
These results emphasise the importance of physicians using IVI with either optical coherence tomography (OCT) or intravascular ultrasound (IVUS) to optimise stent outcomes and improve the long-term prognosis of their patients.

## Study objectives



This real-time updated network meta-analysis, integrating data from the ILUMIEN IV and OCTOBER trials with prior studies, examined the effects of IVI-guided PCI versus angiography-guided PCI.

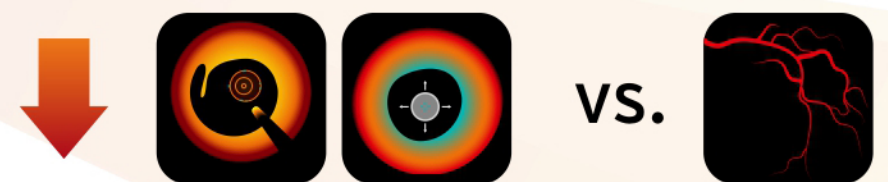
## Who and what?



## Primary endpoint

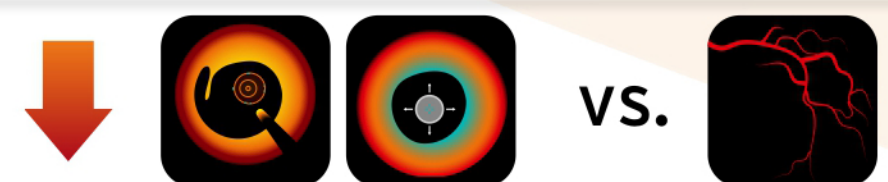
Target lesion failure, defined as a composite of cardiac death, target vessel myocardial infarction, or target lesion revascularisation.

Reduced by 31% with



## Secondary endpoints

Cardiac death reduced by 46% with



Target vessel myocardial infarction reduced by 20% with



Target lesion revascularisation reduced by 29% with



Stent thrombosis reduced by 52% with

