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REBUTTAL:
 COARCTATION STENTING VS. SURGICAL REPAIR
 IN PATIENTS >4 YEARS OF AGE






NO DISCLOSURES





Into the Lion's Mouth...



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Another Hidden Risk
CREEP

Creep

- Insidious
- Doesn't add risk *per se*
- Puts patients unnecessarily at risk
- Less stringent indications for intervention

Creep

- MAGIC trial
 - Community use of Amplatzer for ASD
 - 27% had Qp:Qs < 1.5
 - 6% Qp:Qs not measured
 - 7% ASD 2-5 mm
 - "...it appears...a large defect or...significant shunt...is not used as a criteria for ASD closure."

Creep

- Holzer, R (CCISC). Cath & CV Interven. 2010
- Pre-stent gradient
 - 5% <10 mm Hg
 - 28% <20 mm Hg

Back to the Original Question

STENT V. SURGERY

Outcomes

Study	Mortality	Reintervention	Gradient >15
Surgery	0	3.8% (5.0 yrs)	-
Surgery	2 non-cardiac	3.7% (4.5 yrs)	0%
Stent	0	12% (<1.1 yrs)	17%
Stent	2 procedural	-	-

Outcomes

	Stent	Surgery
Late Hypertension	☹	☹
Scar	☹	☺
Femoral Artery Injury	☹	☹
Radiation	☹☹☹☹	☺
Cost	☹	☹

Stent v. Surgery



- What would you choose for your patient or your own child?

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DEMONSTRATION CASE



 **Case** 

- SS
- 4-year-old
- Discrete juxtaductal coarctation
- Referred for surgery



 **Case** 

- Referred from an outside program, headed up by a very well respected interventionalist



 **Case** 

- Extended resection
- Discharged POD #3
- 0 mm Hg residual gradient

 **Stent v. Surgery** 

- What would you choose for your patient or your own child?