

# Interim Results of the Randomized Study in Carotid Artery Revascularization:

CGuard™ Micronet® Covered **S**tent vs. Acculink: **B**asal, 30d DW MRI and 1y Clinical **E**valuation in 100 **R**andomized p**A**tients:  
The **SIBERIA** Trial

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# CAS Current Limitations



Protrusion of atheromatous plaque through the stent struts is a fundamental problem of carotid artery stenting

(Reimers B.2011; De Donato G.2013; Liu R, Jiang Y.2015).

This plaque prolapse is a risk factor for cerebral embolism, not only during carotid artery stenting, but also weeks after the procedure.

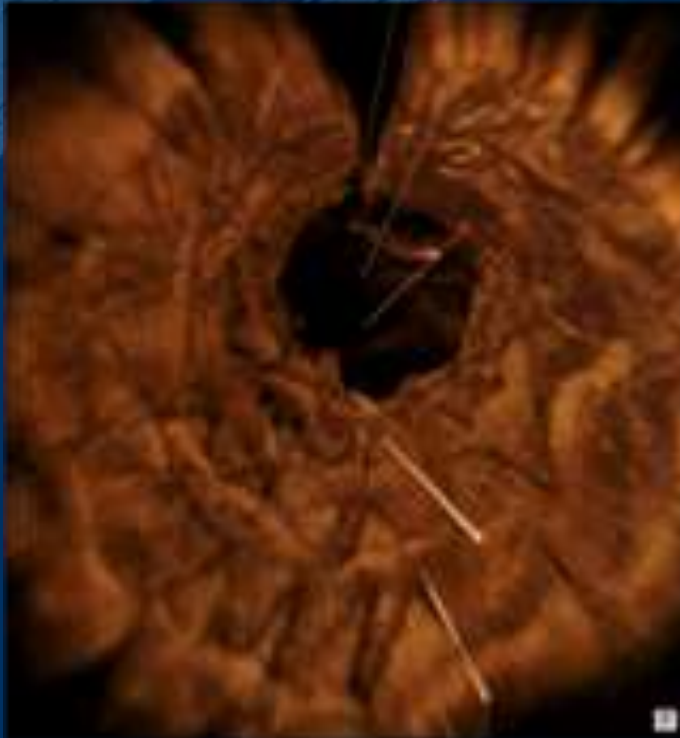
(De Donato G.2013).



# Plaque Coverage in Carotid Stents

## Conventional Carotid Stents

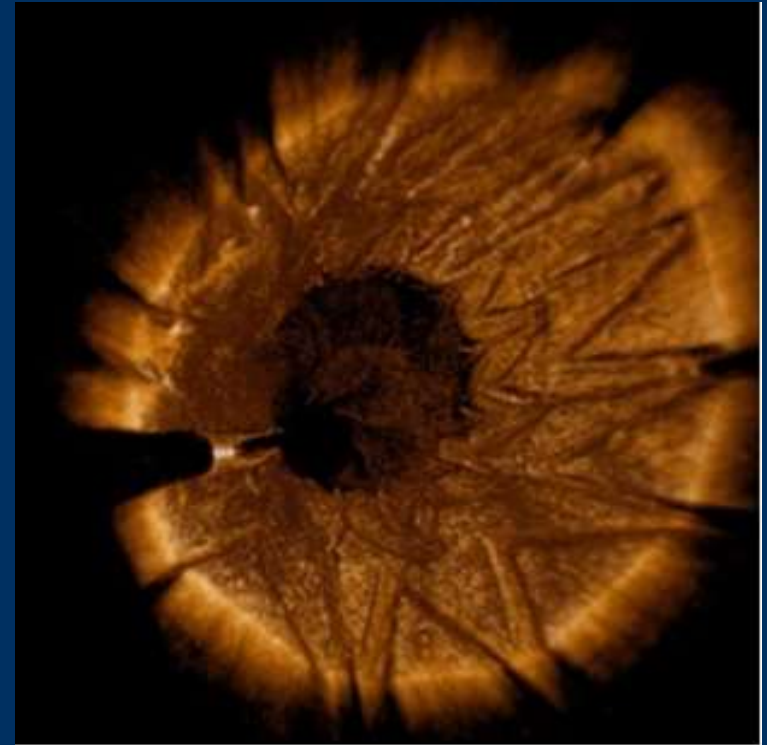
No plaque protection - leading to plaque protrusions or prolapse passing into the vessel lumen



Conventional Carotid Stent

## CGuard™ EPS

The MicroNet® permanently covers plaque and prevents “debris” from passing through the mesh.



CGuard™ EPS



# Hypothesis

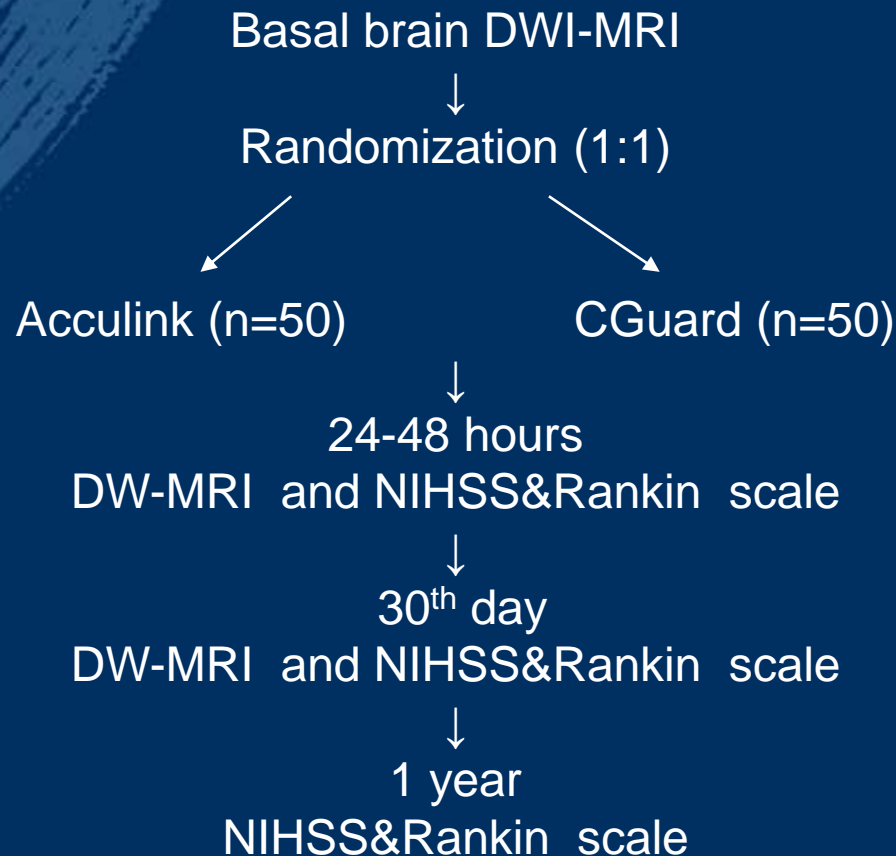
CGuard™ EPS MicroNet covered stent will give protection during CAS, both procedural and postprocedural, from new DW-MRI lesions compared with the Acculink™ reference stent. As a consequence, CGuard will demonstrate a reduction in neuro-embolic events.

## Study Objective

To compare neuroprotection and clinical outcomes with the new CGuard™ EPS MicroNet® stent versus the conventional carotid stent Acculink™ in the standard treatment of carotid artery disease

# Study design

100 patients with lesions of the carotid artery bifurcation.  
Screening patients to determine inclusion / exclusion criteria.



The **SIBERIA** Trial



# Endpoints

## Primary endpoint

Incidence and volume of new DW-MRI lesions post procedure, within 24-48 hours, and 30 days

## Secondary endpoints

Technical success, periprocedural and 30 days adverse events, 1 year device related events (any homolateral stroke, device related death or restenosis)

# Study Population

n=50

Variable	CGuard N=25	Acculink N=25	p
Age	66 [63;72]	66 [64;69]	0,66
Degree of stenosis	75 [70;81]	75 [70;79]	0,89
Gender			
Male	16 (64 %)	19 (76 %)	
Female	9 (36 %)	6 (24 %)	0,53
Concomitant pathology and risk factors			
Ischemic heart disease	19 (76 %)	15 (60 %)	0,36
CHF	22 (88 %)	22 (88 %)	1
Diabetes	3 (12 %)	5 (20 %)	0,70
PTCA	14 (56 %)	8 (32 %)	0,15
PTA	3 (12 %)	5 (20 %)	0,70
Aorto-Femoral Shunt	1 (4 %)	1 (4 %)	1,00
CABG	4 (16 %)	1 (4 %)	0,38
Primary Hypertension	24 (96 %)	24 (96 %)	1
Smoking	10 (40 %)	7 (28 %)	0,55
Hypercholesterolemia	1 (4 %)	4 (16 %)	0,38

# Study Population

Variable	CGuard N=25	Acculink N=25	p
Asymptomatic patients	15 (60 %)	20 (80 %)	0,21
Symptomatic patients	10 (40 %)	5 (20 %)	0,21
Stroke	7 (28 %)	3 (12 %)	0,13
TIA	3 (12%)	2 (8 %)	0,67
Neurological deficit (paresis, paralysis)	3 (12 %)	2 (8 %)	0,67
Side of the lesion			
On the right ICA	15 (60 %)	13 (52 %)	0,77
On the left ICA	10 (40%)	12 (48%)	0,77
Previous intervention in the contralateral carotid artery:	2 (8%)	4 (16%)	0,40
Current disease in the contralateral Carotid Artery:	10 (40%)	3 (12%)	<u>0,05</u>

- Higher number of symptomatic patients in the CGuard group.
- Higher number of stroke patients included in the CGuard arm group
- Disease in the contralateral carotid artery was significantly higher in the CGuard group



# Stent Characteristics

n=50

Variable	CGuard N=25	Acculink N=25	p
Predilation 3.5–4 mm	9 (36 %)	10 (40%)	1
Postdilation 5-6 mm	25 (100%)	25 (100%)	1
Diameter of stents	<b>8 [8;8]</b>	<b>7 [7;7]</b>	<b><u>0,01</u></b>
Stent length	40 [40;40]	40 [40;40]	1,00

# Clinical Results

## Interim DW-MRI results on the first 50 patients

Intermediate Results	Group CGuard	Group Acculink	p
	(n = 25)	(n = 25)	
New DW Lesions at 24-48	12 (48%)	14 (56%)	p = NS
Bilateral	2 (8%)	4 (16 %)	p = NS
New DW Lesions at 24-48 > 3 mm	24%	40%	p = NS
Multiple DW Lesions at 24-48	16%	44%	<b>p ≤ 0.05</b>

Intermediate Results	Group CGuard	Group Acculink	p
	(n = 25)	(n = 25)	
DW MRI Lesions at 30d	0	1(4%)	p = NS

# Clinical Results

## Interim MACE results on the first 50 patients

Periprocedural (<24h)	CGuard N=25	Acculink N=25	p
Stroke	0	1 (4%)	p=NS
AMI	0	1 (4%)	p=NS
Periprocedural MACE	0	2 (8%)	p=NS

24h-30 days	CGuard N=25	Acculink N=25	p
Stroke	0	1 (4%)	P=NS
AMI	0	0	P= NS
MACE	0	1 (4%)	P=NS

Cummulative MACE at 30 days	CGuard N=25	Acculink N=25	p
MACE	0	3 (12%)	P=NS



# Device Related MACE\*

## Interim Results

- Periprocedural minor ischemic stroke
- NSTEMI AMI within 24 hours (+troponin)
- Stroke with clinical sequelae at 30 days

\*All the device related MACE events occurred in the Acculink group



# All Cause MACE\*

## Interim Results for the first 50 patients

- Periprocedural minor ischemic stroke
- NSTEMI AMI at 24 hours (+troponin)
- Stroke with clinical sequelae at 30 days
  
- Death at 6 months post acute occlusion of the superior mesenteric artery
- Death at 7 month due to myocardial infarction
- Death at 7 month due to congestive heart failure

\*All MACE events occurred in the Acculink group



# Conclusions

## Interim analysis of the first 50 patients

- CGuard EPS trended to lower DW-MRI lesions overall and showed significantly lower incidence of multiple lesions at 24-48h when compared to the Acculink group
- CGuard EPS did not have any MACCE events compared with the Acculink group that had three device related MACE events
- Enrollment in the SIBERIA trial goes on