

Drug Eluting Stents Versus Bare Metal Stents in Patients Suffering From Coronary Artery Diseases

Drug Eluting Stents (DES) Showed to be More Efficacious but Less Cost-Effective Than Bare Metal Stents (BMS)

GENEVA, SWITZERLDAN, November 24, 2015 /EINPresswire.com/ -- The advent of angioplasty and stenting was a major advance in the therapy of coronary artery disease. Instead of having bypass surgery or taking multiple medications for angina, subjects suffering from coronary artery disease could now have an outpatient procedure in which the blockage is dilated with a balloon (angioplasty), and the artery is then kept open with a stent.

The development of bare metal stents (BMS) was a major advance over balloon angioplasty to treat patients suffering from coronary artery disease. Later on, drug-eluting stents (DES) were developed to reduce the risk of potential restenosis by releasing drug inhibiting tissue growth. However, thrombosis occurring more than one year after the stent placement became a real problem with the widespread use of DES. Even if this event has a low incidence, it leads almost always to major heart damage or death.

A new study led by Data Mining International, an independent research agency based in Geneva (Switzerland), has been the subject of a recent article published by the World Journal of Cardiology*. Using advanced decision analyses, computerized simulations and an extensive literature review, it was calculated that while the BMS might appear slightly less efficacious compared to DES, they are however more cost-effective.

Dr Ariel Beresniak, CEO of Data Mining International, said: "This simulation study took into account the most recent available evidence to date and confirms the interest of BMS as more cost-effective than DES, even if the interest of DES in term of clinical effectiveness remains, despite a very low risk of late thrombosis".

Both cardiologists and patients are confronted with an increasing number of choices to be made. Should it be DES or BMS? Should they concentrate on minimizing the risk of restenosis or the risk of late stent thrombosis? In fact, should they need a stent at all? As the patients' outcomes need to be optimized and the increasing number of stenting procedures generates significant costs for the health payers, existing and innovative therapeutic strategies have to be fully evaluated from the cost-effectiveness perspective.

What the patients can do, is to try and reduce as many risk factors as possible (improving diet, adding physical exercise, stopping smoking, etc.) as it would not only reduce the risk of stent re-blocking but would also prevent the progression of the coronary artery disease as well as improve their overall Quality of Life.

*Ariel Beresniak, Thibaut Caruba, Brigitte Sabatier, Yves Juillière, Olivier Dubourg, Nicolas Danchin. Cost-effectiveness modelling of percutaneous coronary interventions in stable coronary artery disease. World J Cardiol. 2015 October 26; 7(10): 594–602. Published online 2015 October 26. doi: 10.4330/wjc.v7.i10.594

About Data Mining International

Data Mining International SA is an independent international research agency based in Geneva (Switzerland) with a North American branch, Data Mining America, based in Montreal (Canada). Data Mining International specializes in innovative disease management strategies, public health, data mining research, big data analytics and knowledge discovery, business modelling innovation, advanced simulation modelling for decision-making, risk assessment, multi-criteria analyses, health technology assessment, eHealth applications, and development and validation of quality of life instruments.

Data Mining International brings innovative solutions to the public and private sectors, including pharmaceutical and biotech industries, foods and cosmetics, public health organizations, academia, and other interest groups, stakeholders and decision-makers, across geographic boundaries.

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