

Drug-eluting stents may be more effective than bare-metal stents for acute coronary syndrome

| | |
|-----------------------------------|--|
| Clinical Question | Compared to bare-metal stents, how effective are drug-eluting stents in people with acute coronary syndrome? |
| Bottom Line | The evidence suggested that drug-eluting stents might lead to fewer serious adverse events (particularly repeat balloon angioplasty) compared with bare-metal stents without increasing the risk of all-cause mortality or major cardiovascular events. However, Trial Sequential Analysis (a technique to control the risk of cumulative meta-analysis producing random error due to sparse data and multiple testing of accumulating data) showed that there currently was not enough information to assess a risk ratio reduction of 10% for all-cause mortality, major cardiovascular events, cardiovascular mortality, or myocardial infarction. There were no data on quality of life or angina. |
| Caveat | The evidence in this review was of low to very low quality, and the true result may depart substantially from the results presented in this review. |
| Context | Approximately 3.7 million people died from acute coronary syndrome worldwide in 2012. Percutaneous coronary intervention is often used for acute coronary syndrome, but previous systematic reviews on the effects of drug-eluting stents compared with bare-metal stents have shown conflicting results regarding myocardial infarction. |
| Cochrane Systematic Review | Feinberg J et al. Drug-eluting stents versus bare-metal stents for acute coronary syndrome. <i>Cochrane Reviews</i> , 2017, Issue 8. Art. No.: CD012481. DOI: 10.1002/14651858. CD012481.pub2. This review contains 25 studies involving 12,503 participants. |

Pearls No. 602, October 2018, written by Brian R McAvoy. C25

Cochrane Systematic Review link:

<https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD012481.pub2/full>