

The EASTBOURNE Registry



Ospedale Fatebenefratelli e Oftalmico
Ospedale Macedonio Melloni

Sistema Socio Sanitario



Regione
Lombardia

ASST Fatebenefratelli Sacco

SPONTANEOUS PROSPECTIVE CLINICAL OBSERVATIONAL TRIAL

European prospective registry on sirolimus drug-coated balloon

(the All-comers Sirolimus-coated Balloon

European Registry:

the EASTBOURNE REGISTRY)

CONFIDENTIAL

VERSION 1.1

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PROTOCOL SYNOPSIS

Purpose	The purpose of this study is to observe and evaluate the performance of a Sirolimus-eluting Drug-Coated Balloon (SCB) for the treatment of any type of coronary lesions, including native vessel disease and in-stent restenosis.
Investigational Device	The SCB that will be used in this study is a semi-compliant polyamide balloon-catheter with low tip profile (0.016”), coated with Sirolimus drug (drug dose of 180µg on 3.0 x 15 mm balloon, drug to excipient ratio of 1:1).
Design	This is a prospective, multicenter, spontaneous clinical registry that will enroll real world, all-comer patients at various interventional cardiology sites in Europe. All Patients will have a clinical follow-up at 1, 6, 12 and 24 months.
Patient Population and duration of enrollment	We plan to enrol a total number of 800 patients at 20-30 european sites, beginning 07.2016 to 09.2017.
Primary endpoint	Target Lesion Revascularization (TLR) at 12 months.
Secondary endpoints	MACE (Major Adverse Cardiac Events) as a composite of cardiac death, myocardial infarction (MI) and TLR at 6, 12 and 24 months; any individual element of MACE; procedural success (defined as technical and angiographic success in the absence of MACE during hospitalization).

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Patients	All patients with a clinical indication to PCI.
Inclusion Criteria	<ul style="list-style-type: none"> • Age \geq 18 years; • Patients with symptomatic coronary artery disease (including patients with chronic stable angina, silent ischemia, and acute coronary syndromes) with clinical indication to PCI.
Exclusion Criteria	<p>Patients with one or more of the following criteria:</p> <ul style="list-style-type: none"> • Patients with known (and untreatable) hypersensitivity or contraindication to Aspirin, Heparin, Clopidogrel, Prasugrel, Ticagrelor, Sirolimus or contrast media, which cannot be adequately pre-medicated. • Patients participating in another clinical evaluation. • Target lesion/vessel with any of the following characteristics: <ul style="list-style-type: none"> ○ successful pre-dilatation not performed in the target lesion, or not efficacious (residual stenosis $>50\%$); ○ severe calcification of the target vessel, also proximal to the lesion; ○ highly tortuous lesions which can impair access of device to treatment site. • Visible thrombus at lesion which is not treatable with aspiration.

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Methodology	Patients will be followed after hospital discharge for up to 24 months: cardiac visits or phone calls will be scheduled at 1, 6, 12 and 24 months.
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