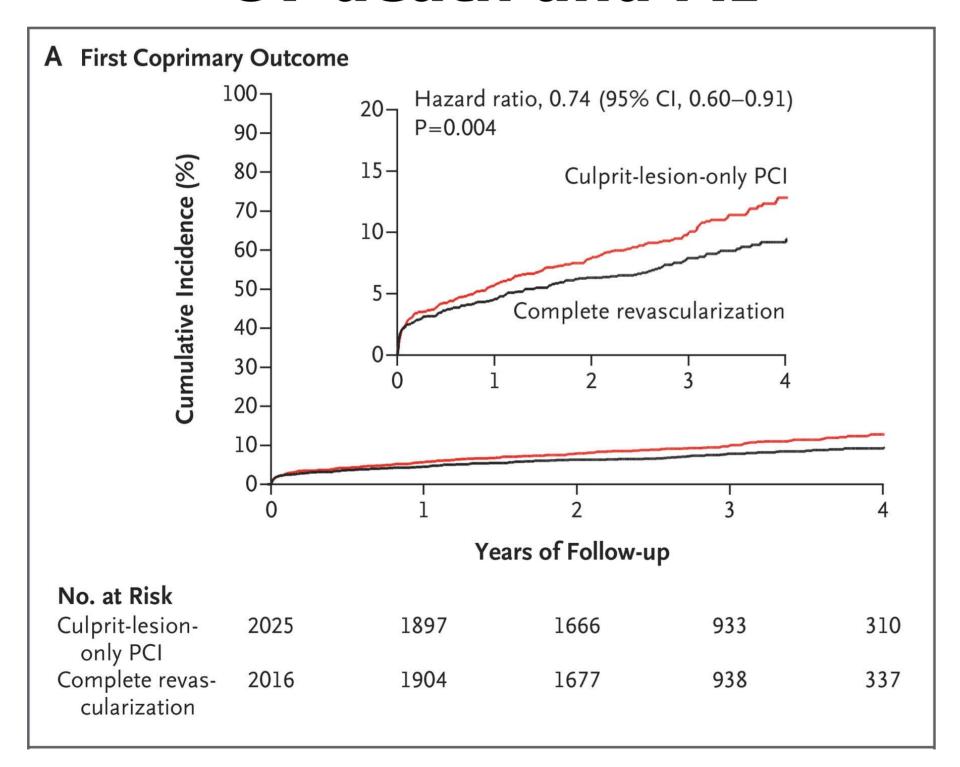




Do we still need to light the FIRE after COMPLETE?



.CV death and MI



• 32% reduction of MI occurrence in the complete arm



Do we still need to light the FIRE after COMPLETE?



Characteristic	Complete Revascularization (N = 2016)	Culprit-Lesion-Only PCI (N = 2025)
Age — yr	61.6±10.7	62.4±10.7
SYNTAX score†‡		
Culprit lesion-specific score	8.8±5.3	8.6±5.3
Nonculprit lesion-specific score	4.6±2.8	4.6±2.7
Baseline score, including culprit lesion	16.3±6.8	16.0±6.6
Residual score, after index PCI	7.2±4.9	7.0±4.7
No./total no. of lesions (%)		
50-69%, with fractional flow reserve < 0.80	21/2612 (0.8)	16/2576 (0.6)
70–79%	1078/2612 (41.3)	1162/2576 (45.1)
80–89%	875/2612 (33.5)	839/2576 (32.6)
90–99%	583/2612 (22.3)	508/2576 (19.7)
100%	55/2612 (2.1)	51/2576 (2.0)



- **1. Mean age 62:** almost no 75+
- 2. Low risk population: mean SYNTAX 16
- 3. No Functional assessment (<1%)



Do we still need to light the FIRE after COMPLETE?





B. Outcome of octogenarian patient (≥80 years) diagnosed with acute coronary syndrome undergoing PCI compared with patients who were not diagnosed with acute coronary syndrome

Outcome	ACS	Non-ACS	aOR (95% CI)	Adjusted povalue
Overall (n)	476,659	1,067,214		
In-hospital mortality	7.3%	1.5%	4.74 (4.62-4.85)	< 0.001
Hemorrhage transfusion	2.7%	1.8%	1.41(1.37-1,45)	< 0.001
Vascular complications	2.2%	1.9%	1.27(1.23-1.31)	< 0.001
Cardiac complications	6.8%	1.9%	4.25(4.15-4.35)	< 0.001
Permanent pacemaker implantation	1.8%	1.2%	1.12(1.08-1.16)	<0.001
Respiratory complications	4.5%	2.0%	2.32(2.26-2.38)	< 0.001
Acute kidney injury	15.1%	6.1%	2.51(2.47-2.55)	< 0.001

476K ACS 80+ registry

- 7.3% in hospital mortality
- 6.8% cardiac complications
- 6.3% post-PCI stroke
- 15.1% AKI





Summer and SIV are almost over!



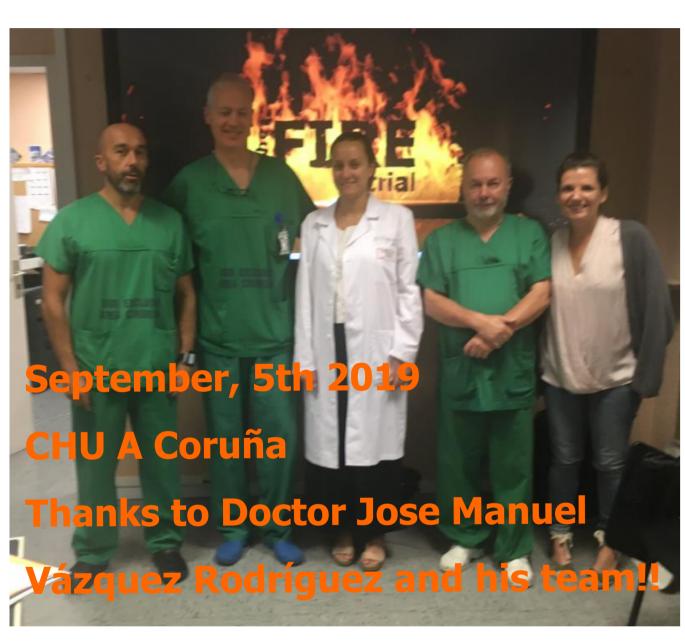
September, 4th 2019
H. Lucus Augusti Lugo
Thanks to Doctor Raymundo
Ocaranza-Sanchez and his team!







Summer and SIV are almost over!



September, 6th 2019
Hospital La Paz, Madrid
Thanks to Doctor Raul Moreno
and his team!!





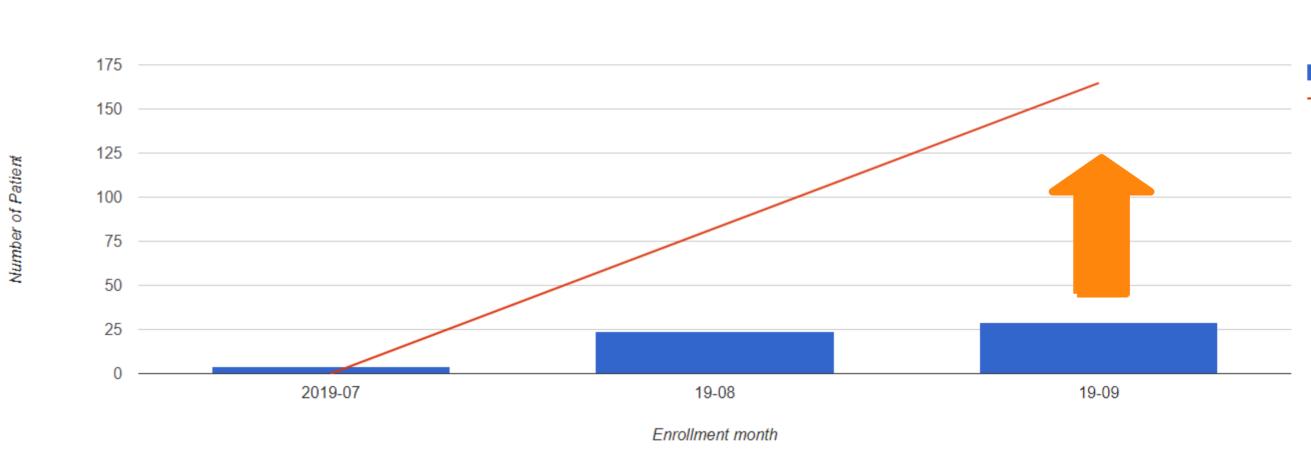
September, 12th 2019. Ospedale Maggiore, Bologna Thanks to Doctor Gianni Casella and his team!!





Now it is time to RISE UP!!!





The goal is at least one patient/week per center!









TRIAL kick-off meeting (*)



EduLab @ Hospital Clinico San Carlos in Madrid

30 September – 1 October

- FIRE trial presentation
- Supraflex Cruz presentation
- QFR certification







SEPTEMBER 30th, 2019

3:45 pm Registration

3:45 pm Welcome

4:05 pm Presentation of the FIRE study

4:30 pm Technical features and clinical studies on Supraflex Cruz

5:00 pm Physiological stenosis assessment in FIRE trial

6:00 pm FIRE study debriefing and center by center update

7:00 pm Discussion and conclusions

8:30 pm Dinner

OCTOBER 1st, 2019

9.30 am FIRE case examples

10 am QFR training (part I)

11:30 am Live case with Supraflex Cruz and on-line QFR

12:30 pm Live case discussion

1:00 pm QFR training (part II) and next steps for certification

2.30 pm Adjurn



S Statu urrent

NAME CENTER - ITALY	PI
AZIENDA OSPEDALIERO-UNIVERSITARIA DI FERRARA	SIMONE BISCAGLIA
OSPEDALE MAGGIORE DI BOLOGNA	GIANNI CASELLA
OSPEDALE INFERMI DI RIMINI	ANDREA SANTARELLI
OSPEDALE SANTA MARIA DELLE CROCI DI RAVENNA	LUCA FILETI
MARIA CECILIA HOSPITAL, COTIGNOLA	FRANCESCO GIANNINI
ARCISPEDALE SANTA MARIA NUOVA, REGGIO EMILIA	VINCENZO GUIDUCCI
OSPEDALE DI RIVOLI, TORINO	FERDINANDO VARBELLA
OSPEDALE SAN GIOVANNI EVANGELISTA, TIVOLI	MAURO PENNACCHI
CASA DI CURA MONTEVERGINE, MERCOGLIANO	ANGELO CIOPPA
OSEPDALE UMBERTO I DI SIRACUSA	GIORGIO SACCHETTA
AZIENDA OSPEDALIERA PER L'EMERGENZA CANNIZZARO, CATANIA	VINCENZO ARGENTINO
A.R.N.A.S. OSPEDALI CIVICO, PALERMO	MARCO CARUSO
ASP DI AGRIGENTO	DIEGO MILAZZO
OSPEDALE CIVILE DI BAGGIOVARA	MARCO RUOZZI
CASA DI CURA SAN MICHELE, MADDALONI	PIETRO LANDINO

Active

Active

Active

Ready to start

Active

Active

Approved by IRB, waiting final authorization

Waiting IRB approval

Waiting IRB approval

Waiting IRB approval

Waiting IRB approval

Approved by IRB, waiting final authorization





current status

NAME CENTER - SPAIN	PI
HOSPITAL CLINICO SAN CARLOS, MADRID	JAVIER ESCANED
HOSPITAL UNIVERSITARIO LA PAZ, MADRID	RAUL MORENO
HOSPITAL GENERAL UNIVERSITARIO GREGORIO MARAÑÓN, MADRID	FRANCISCO FERNÁNDEZ- AVILÉS
HOSPITAL ALVARO CONQUEIRO DE VIGO, VIGO	ANDRES IÑIGUEZ
HOSPITAL GENERAL UNIVERSITARIO DE CIUDAD REAL	FERNANDO LOZANO
HOSPITAL UNIVERSITARI I POLITÈCNIC LA FE, VALENCIA	JOSÉ LUIS DÍEZ
HOSPITAL UNIVERSITARIO LUCUS AUGUSTI, LUGO	RAYMUNDO OCARANZA- SANCHEZ
COMPLEJO HOSPITALARIO UNIVERSITARIO DE SANTIAGO, SANTIAGO DE COMPOSTELA	RAMIRO TRILLO NOUCHE
COMPLEJO HOSPITALARIO UNIVERSITARIO DE LA CORUÑA, LA CORUÑA	JOSE MANUEL VÁZQUEZ RODRÍGUEZ
HOSPITAL CLINICO UNIVERSITARIO DE VALLADOLID	IGNACIO AMAT SANTOS

Active



Irrent

NAME CENTER - POLAND	PI
CENTRUM KARDIOLOGII INWAZYJNEJ, ELEKTROTERAPII I ANGIOLOGII W NOWYM SĄCZU	DARIUSZ DUDEK
CENTRUM KARDIOLOGII INWAZYJNEJ ELEKTROTERAPII I ANGIOLOGII W OSTROWCU ŚWIĘTOKRZYSKIM	MACIEJ MALISZEWSKI
PODKARPACKIE CENTRUM INTERWENCJI SERCOWO- NACZYNIOWYCH, SANOK	ANDRZEJ WIŚNIEWSKI
CENTRUM KARDIOLOGII INWAZYJNEJ ELEKTROTERAPII I ANGIOLOGII W OŚWIĘCIMIU	WITOLD ŻMUDA
CENTRUM KARDIOLOGII INWAZYJNEJ, ELEKTROTERAPII I ANGIOLOGII W KROŚNIE	MARCIN NOSAL
CENTRUM KARDIOLOGII INWAZYJNEJ, ELEKTROTERAPII I ANGIOLOGII W PIŃCZOWIE	JACEK GODLEWSKI
SZPITAL POWIATOWY IM. TYTUSA CHAŁUBIŃSKIEGO W ZAKOPANEM	BARTŁOMIEJ HEŁMECKI

Waiting IRB approval



For information, details, troubles, please feel free to contact





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