



Latest Data on TCAR

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Disclosure

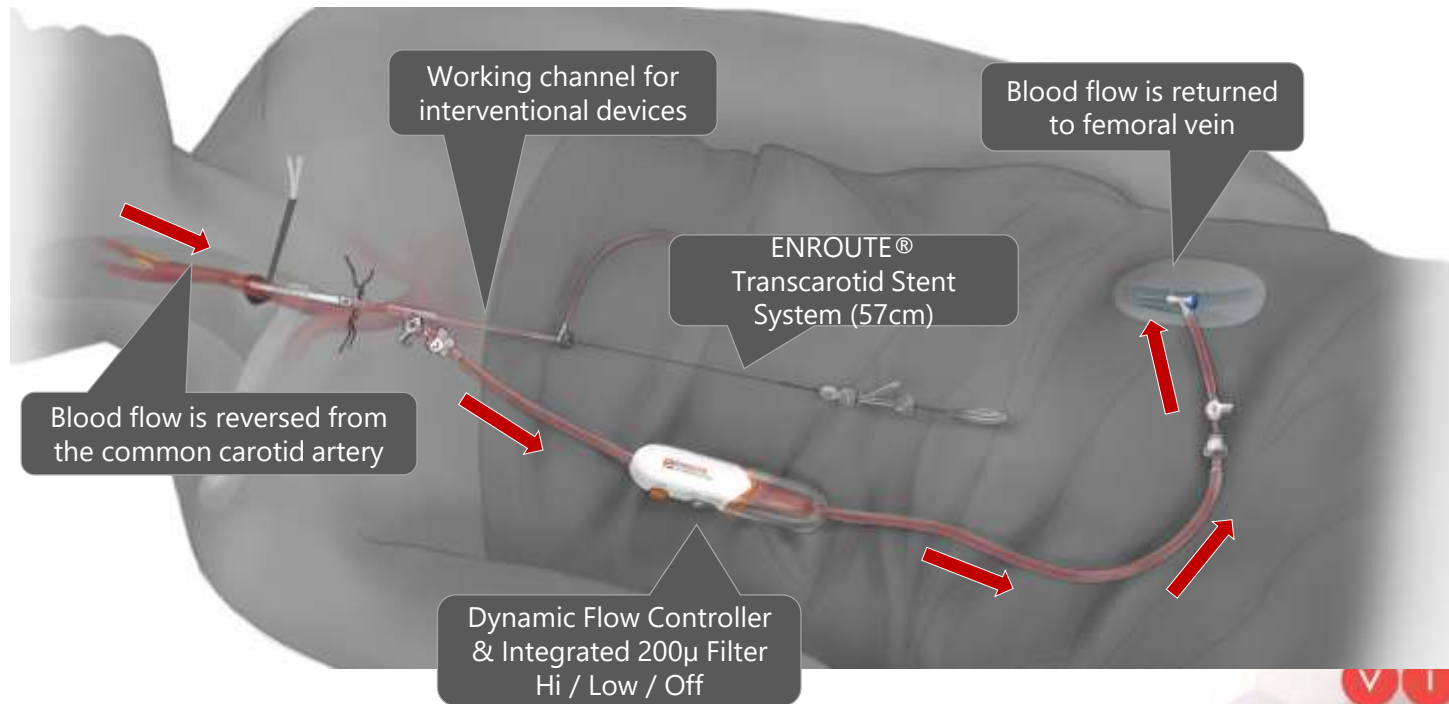
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I have the following potential conflicts of interest to report:

Consulting: Philips, Medtronic, Boston Scientific, Intact, PQ Bypass,
Cagent, Silk Road Medical, Surmodics, Profusa, CSI



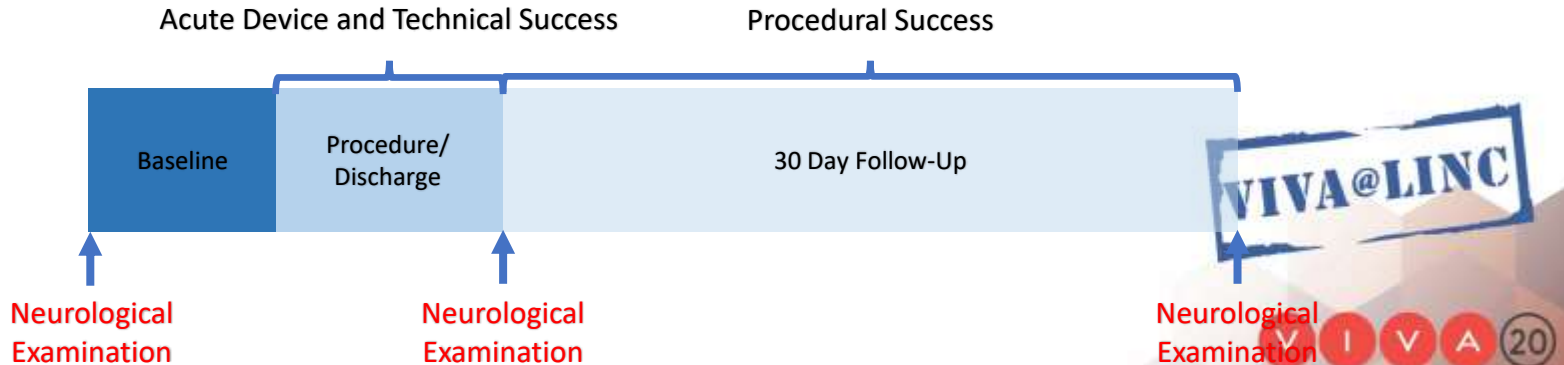
TransCarotid Artery Revascularization: TCAR



ELINC

ROADSTER 2: Study Design

- **FDA-Mandated Post Approval Study** (condition of FDA approval for the ENROUTE Transcarotid Stent System)
- **Minimum of 600 patients treated Per-Protocol** (all subjects enrolled without a major protocol deviation)
- **70% new sites**, no more than 30% ROADSTER 1 sites
- **Independent adjudication** of major adverse events
- **Dedicated TCAR System** = ENROUTE NPS + ENROUTE Stent
- **Objective:** The ROADSTER 2 Study is intended to evaluate **real world usage** of the ENROUTE Transcarotid Stent when used with the ENROUTE Transcarotid Neuroprotection System.



ROADSTER 2: Procedure Information

Parameter	ROADSTER 1 n=219	ROADSTER 2 n=632
ROADSTER 1 Operators	100%	20.0%
Enrollment by New Operators	65.3%	70.0%
Skin-to-Skin Time (median)	70 mins	75 mins
Reverse Flow/Clamp Time (median)	9 mins	11 mins
Fluoro Time (median)	N/R	5.0 mins
Contrast Usage (median)	62 cc	36 cc



Presented by V Kashyap, VAM June 2019

ROADSTER 2: Procedure Information

Parameter	ROADSTER 1 n=219	ROADSTER 2 n=632	p-value
General Anesthesia	59.6%	71.7%	P<0.001
Local Anesthesia	47.0%	24.7%	P<0.001
Regional Block	0.0%	3.6%	0.042
Tolerance to High Flow	98.6%	98.0%	1.00
Tolerance to Low Flow	100%	100%	1.00
Local Complications			
Bleeding at Arteriotomy	0.0%	0.0%	1.00
Hematoma (requiring intervention)	2.3%	0.0%	0.0013
CCA Dissection (requiring surgical repair)	1.8%	0.8%	0.14
Cranial Nerve Injury	0.5%	1.3%	0.30
Permanent	0.0%	0.5%	1.00



ROADSTER Trials: Comparative Clinical Outcomes

FDA Analysis Population

	ROADSTER 1 n=203		ROADSTER 2 n=632		<i>p</i> -value
Stroke/Death/MI	6	3.0%	11	1.7%	0.40
Stroke	1	0.5%	4	0.6%	1.00
Death	2	1.0%	1	0.2%	0.15
MI	3	1.5%	6	0.9%	0.46
Stroke/Death	3	1.5%	5	0.8%	0.46
Neurological Death	0	0.0%	0	0.0%	1.00
Cardiac Death	1	0.5%	0	0.0%	0.24



ROADSTER Trials: Comparative Outcomes by Symptom Status

Asymptomatic Patients – FDA Analysis Population

	ROADSTER 1 n=157		ROADSTER 2 n=467		p-value
Stroke/Death/MI	4	2.5%	9	1.9%	0.7587
Stroke	1	0.6%	3	0.9%	1.0000
Death	1	0.6%	1	0.2%	0.4402
MI	2	1.3%	5	1.1%	1.0000
Stroke/Death	2	1.3%	4	0.9%	1.0000

Symptomatic Patients – FDA Analysis Population

	ROADSTER 1 n=46		ROADSTER 2 n=165		p-value
Stroke/Death/MI	1	2.2%	2	1.2%	0.5237
Stroke	0	0.0%	1	0.6%	1.0000
Death	1	2.2%	0	0.0%	0.2180
MI	0	0.0%	1	0.6%	1.0000
Stroke/Death	1	2.2%	1	0.6%	0.3893



Objectives: TCAR Surveillance Project (TSP)

- Monitor the safety and effectiveness of stents placed directly into the carotid artery while reversing blood flow within the carotid artery to reduce stroke risk.
- Compare this less-invasive surgical procedure with standard carotid endarterectomy in centers that participate in the Society for Vascular Surgery Vascular Quality Initiative.

Provide “**REAL-WORLD**” Outcomes

Presented by M Malas at VAM June 2019



Baseline Characteristics

	CEA (N=44,442)	TCAR (N=5,716)	P-value	Standardized Difference*
Median Age, IQR	71 (65-77)	74 (67-80)	<0.001	-0.27
Age ≥75 years	16,023 (36.1)	2,796 (48.9)	<0.001	-0.26
Female Gender	17,508 (39.4)	2,082 (36.4)	<0.001	0.06
Non-White Race	4,513 (10.2)	559 (9.8)	0.38	0.01
Symptomatic Status	13,151 (29.6)	2,207 (38.6)	<0.001	0.19
HTN	39,766 (89.5)	5,194 (90.9)	<0.01	0.05
DM	16,313 (36.7)	2,175 (38.0)	0.05	0.03
CAD	11,874 (26.7)	2,960 (51.8)	<0.001	0.53
Prior CABG/PCI	15,316 (34.5)	2,327 (40.7)	<0.001	0.13
CHF	4,945 (11.1)	1,076 (18.8)	<0.001	0.22
COPD	10,292 (23.2)	1,585 (27.7)	<0.001	0.10
CKD	14,597 (33.4)	2,180 (39.0)	<0.001	0.11
Dialysis	434 (1.0)	93 (1.6)	<0.001	0.06
Prior Ipsilateral CEA	758 (1.7)	937 (16.4)	<0.001	0.53
Prior Ipsilateral CAS	110 (0.25)	83 (1.5)	<0.001	0.13
Ipsilateral Stenosis ≥ 80%	20,521 (47.0)	2,999 (54.2)	<0.001	0.14

*Some have proposed that an absolute standardized difference of 0.10 or more indicates that covariates are imbalanced between groups



Baseline Characteristics (cont'd)

	CEA (N=44,442)	TCAR (N=5,716)	P-value	Standardized Difference*
Contralateral CEA/CAS	6,057 (13.6)	994 (17.4)	<0.001	0.10
Contralateral Occlusion	1,812 (4.3)	593 (10.8)	<0.001	0.25
Anatomic High-Risk	1,838 (4.1)	2,812 (49.2)	<0.001	1.18
Radiation History	576 (1.3)	328 (11.8)	<0.001	-0.43
Preoperative Medications				
Aspirin	37,414 (84.2)	5,097 (89.2)	<0.001	0.15
Statin	37,363 (84.1)	5,064 (88.6)	<0.001	0.13
P2Y12-Receptor Antagonists	15,712 (35.4)	4,945 (86.5)	<0.001	1.23
Beta Blockers	23,965 (54.0)	3,297 (57.7)	<0.001	0.08
Anticoagulation	4,779 (10.8)	819 (14.3)	<0.001	0.11
ACE Inhibitors	23,623 (53.2)	3,081 (53.9)	0.29	0.01
ASA Class IV-V	9,151 (20.6)	1,660 (29.1)	<0.001	0.20
Elective procedures	39,036 (87.9)	5,139 (89.9)	<0.001	0.06
General Anesthesia	41,124 (92.6)	4,664 (81.6)	<0.001	0.33

*Some have proposed that an absolute standardized difference of 0.10 or more indicates that covariates are imbalanced between groups



Univariable Analysis

	CEA	TCAR	P-value
In-Hospital Outcomes			
Death	152 (0.3)	19 (0.5)	0.03
Ipsilateral Stroke	504 (0.9)	48 (1.2)	0.10
Stroke	677 (1.2)	57 (1.4)	0.37
MI	391 (0.7)	19 (0.5)	0.07
Stroke/Death	773 (1.4)	67 (1.6)	0.23
Stroke/Death/MI	1,119 (2.0)	83 (2.0)	0.98
Cranial Nerve Injury	1,463 (2.6)	9 (0.3)	<0.001
Post-procedural Hypotension	5,568 (10.1)	605 (14.7)	<0.001
Post-procedural Hypertension	10,983 (19.9)	575 (14.0)	<0.001
Bleeding with intervention	578 (1.0)	53 (1.3)	0.14
LOS more than 1 day	17,290 (31.2)	1,220 (29.6)	0.03
Non-Home Discharge	3,543 (6.4)	270 (6.6)	0.70

Multivariable Logistic Regression

<1.0 favors TCAR, >1.0 favors CEA	TCAR vs. CEA	
	OR (95% CI)	P-value
In-hospital Outcomes		
Death	0.94 (0.57-1.53)	0.80
Ipsilateral Stroke	0.99 (0.72-1.39)	0.99
Stroke	0.89 (0.66-1.19)	0.43
MI	0.46 (0.30-0.72)	<0.01
Stroke/Death	0.85 (0.65-1.13)	0.27
Stroke/Death/MI	0.69 (0.54-0.89)	<0.01
Cranial Nerve Injury	0.12 (0.07-0.19)	<0.001
Post-procedural Hypotension	1.59 (1.30-1.94)	<0.001
Post-procedural Hypertension	0.58 (0.48-0.71)	<0.001
Bleeding with intervention	1.12 (0.84-1.50)	0.44
Non-Home discharge	0.73 (0.61-0.88)	<0.01
Hospital Stay for more than 1 day	0.74 (0.64-0.84)	<0.001

*Adjusted for symptomatic status, age, CAD, CHF, COPD, CKD, prior ipsilateral CEA, prior ipsilateral CAS, Contralateral occlusion, ASA Class and statin use



In-Hospital Outcomes based on Symptomatic Status

CEA vs TCAR

<1.0 favors TCAR >1.0 favors CEA	Asymptomatic		Symptomatic	
	OR (95% CI)	P-value	OR (95% CI)	P-value
Death	1.14 (0.57-2.31)	0.71	0.75 (0.37-1.53)	0.43
Stroke	0.79 (0.51-1.24)	0.31	0.96 (0.66-1.39)	0.84
MI	0.51 (0.29-0.91)	0.02	0.39 (0.20-0.76)	0.01
Stroke/Death	0.85 (0.57-1.26)	0.41	0.86 (0.60-1.23)	0.42
Stroke/Death/MI	0.69 (0.49-0.95)	0.02	0.70 (0.50-0.98)	0.04



CEA vs TCAR: 30-day Outcomes

	Unadjusted			Adjusted		
	CEA	TCAR	P-value	CEA	TCAR	P-value
Mortality	308 (0.70)	40 (0.70)	0.95	Ref.	0.66 (0.46-0.95)	0.03
Stroke	241 (1.4)	16 (1.1)	0.46	Ref.	0.68 (0.39-1.20)	0.18
MI	140 (0.80)	9 (0.6)	0.52	Ref.	0.36 (0.16-0.83)	0.02
Stroke/Death	323 (1.8)	19 (1.4)	0.19	Ref.	0.54 (0.33-0.89)	0.02
Stroke/Death/MI	453 (2.6)	27 (1.9)	0.13	Ref.	0.47 (0.30-0.74)	<0.01

*Adjusted for age, symptomatic, CAD, CHF, COPD, CHF, CKD, prior ipsilateral CEA or CAS, contralateral occlusion, ASA Class



TCAR Patient Population

*ONE risk factor qualifies patient for
CMS high surgical risk status*

- Age ≥75
- Congestive Heart Failure
- Left Ventricular Ejection Fraction ≤35%
- ≥2 diseased coronaries with ≥70% stenosis
- Unstable angina
- Myocardial infarction within 6 weeks
- Abnormal stress test
- Need for open heart surgery
- Need for major surgery (including vascular)
- Uncontrolled diabetes
- Severe pulmonary disease
- Prior head/neck surgery or irradiation
- Spinal immobility
- Restenosis post CEA
- Surgically inaccessible lesion
- Laryngeal palsy; Laryngectomy;
- Permanent contralateral cranial nerve injury
- Contralateral occlusion
- Severe tandem lesions
- Bilateral stenosis requiring treatment

**~2/3 of carotid
revascularization
patients qualify as
a CMS High
Surgical risk status.**

These criteria are considered reimbursement eligible for the TCAR Procedure per the Medicare National Coverage Determination (20.7) on PTA including CAS.

<https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?ncdid=201>

List is a compendium of all risk factors across all carotid stent and EPD IDE trials.



Latest Data on TCAR

Conclusion

- Latest data suggests that results of TCAR are similar to CEA
 - Major endpoints
 - Properly selected patients
 - Data on TCAR is in patients at high risk for CEA



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