

Left Main Interventions

PCI for left main and multivessel coronary artery disease has long been guided more by operator opinion and experience than by trial data. During the last year, several important trials comparing PCI and CABG in this setting have appeared. This issue will provide an overview of these new trial data and their potential impact on practice.

To begin our feature on left main interventions, Issam D. Moussa, MD, FACC, FSCAI, and I provide a summary of the latest data from the SYNTAX trial and the implications they will have on therapy options for patients with left main coronary disease.

Katrin Leadley, MD, presents a helpful step-by-step guide for accessing the SYNTAX score Web site and using the online calculator to determine accurate SYNTAX scores from any location.

Next, Alaide Chieffo, MD, and Valeria Magni, MD, expand on this information with an overview of data from several registries studying the effectiveness of PCI in the left main coronary artery.

Juzar Lokhandwala, MD, and John McB Hodgson, MD, FACC, FSCAI, explain the benefits of visual guidance with IVUS or FFR to evaluate left main disease and decide the best course of treatment.

David Taggart, MD, discusses the data from the SYNTAX trial and provides a surgeon's perspective on the pros and cons of the two main treatment modalities—PCI and CABG.

Manesh R. Patel, MD; Gregory J. Dehmer, MD;

and Ralph G. Brindis, MD, MPH, close our feature this month with a review of the guidelines for unprotected left main intervention and a discussion of the competing modes of revascularization.

To lead off our Department articles, Gregg W. Stone, MD, provides a summary of the study updates that were presented at this year's TCT meeting in San Francisco. Next, our Today's Practice column features an overview of physician employment agreements by Terrell J. Isselhard, JD. This author outlines the important elements every physician should consider when joining a practice.

Our featured interviewee, Zahid Amin, MD, tells us about his experience with animal research and robotic assistance, his practice at the RUSH Center for Congenital and Structural Heart Disease, and much more.

I hope you enjoy the issue and that you might be inspired to review your own practice for therapy for left main and multivessel intervention. This issue may also help you adopt the SYNTAX score to evaluate patients with complex coronary disease. As always, please send a note if you have suggestions for future issues. ■



A handwritten signature in black ink, which appears to read "Ted E. Feldman". The signature is fluid and cursive, written over a white background.

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