

CORONARY: The Coronary Artery Bypass Grafting Surgery Off or On Pump Revascularization Study

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Background

- Benefits and risks of performing CABG surgery on beating heart (off pump) not clearly established.
- Majority of prior trials had few events and short follow-up.
- Meta-analyses of 59 trials involving 8961 pts
 - reduction in early strokes with off-pump
 - no differences in other major CV outcomes.

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CORONARY Trial Organization

- 79 centers in 19 countries
- 4,752 patients recruited between (November 2006 October 2011)
- Designed, coordinated, managed and data analysed and reported by the Population Health Research Institute, Hamilton Health Sciences and McMaster University in Hamilton, Canada
- The data was monitored by independent DSMB
- Funded by Canadian Institutes of Health Research





Study Hypotheses

- Off pump CABG compared to on-pump CABG would reduce major clinical events in short-term (30 Days)
- Benefits maintained in long-term (5 yrs)





Inclusion/Exclusion Criteria

- Inclusion Criteria
 - Isolated CABG with median sternotomy
 - One of the following:
 - 1. Peripheral vascular disease
 - 2. Cerebrovascular disease
 - 3. Renal Insufficiency
 - 4. Age \geq 70 years
 - 5. Age 60 -69 with at least one risk factor (diabetes, urgent revascularization, smoker, LVEF $\leq 35\%$)
 - 6. Age 55 -59 with at least two of the above risk factors
- Exclusions
 - Additional cardiac procedure planned
 - Contraindications to off-pump or on-pump CABG
 - Emergency or re-do CABG





Qualifications of Surgeons

Surgical expertise-based randomization

- -> 2 years of experience as staff cardiac surgeon and
- -> 100 cases of one or both techniques

Trainees were not allowed to be primary operators





Primary Outcomes

• 1st Co-Primary Outcome

Composite of total mortality, stroke, non fatal myocardial infarction, new renal failure at 30 days post randomization



2nd Co-Primary Outcome

Composite of above outcomes plus repeat coronary revascularization over <u>5 yrs</u> of follow-up (expected 2016)

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Other Outcomes – 30 Days

Secondary Efficacy Outcomes

- Components of 1st co-Primary Outcome
- Cost Effectiveness*

Other Outcomes

- Recurrent angina, blood transfusions and CV mortality
- Composite of total mortality, stroke, non fatal MI, new renal failure at hospital discharge
- Quality of life, neurocognitive function*

^{*} Further reporting





Statistical Power

• 1st Co-Primary Outcome

Composite of total mortality, stroke, non fatal myocardial infarction, new renal failure at 30 days post randomization 80% power to detect a 28% risk reduction

2nd Co-Primary Outcome

Composite of above outcomes plus repeat coronary re-revascularization over <u>5 yrs</u> of follow-up (expected 2016)

90% power to detect a 20% risk reduction





Data Quality and Completeness

Follow-up at 30 Days: 100% patients

All events adjudicated

Data: 99.9 % clean





Baseline Characteristics

	OFF-PUMP (n = 2375)	ON-PUMP (n = 2377)
Mean Age (years)	67.6	67.5
Males (%)	80.0	81.7
Prior MI	33.8	35.2
Previous Stroke	6.7	7.8
Peripheral Arterial Disease	8.0	8.2
Congestive Heart Failure	5.9	6.6
Urgent Surgery	39.5	38.1
Euroscore 0 - 2 3 - 5 > 5	28.6 51.7 18.1	27.8 54.2 16.8





Baseline Disease – Pre-op Angiogram

	OFF-PUMP (n = 2375) %	ON-PUMP (n = 2377) %
Left Main	22.1	20.9
Triple Vessel	56.1	60.4
Double Vessel	18.7	16.4
Single Vessel	3.0	2.1





Operation Details

4752 Randomized (ITT Analyses)

	Off Pump	On Pump			
CABG ≤ 30 days	2148 (90.4%)	2183(91.8%)			
Cross-overs	184 (7.8%)	150 (6.4%)			
	Off Pump %	On Pump %	RR	95% CI	p value
Incomplete revascularization	11.8	10.0	1.18	1.00-1.39	0.05
Operating room (median hrs)	4.0	4.2			<0.001
Initial ventilation (median hrs)	9.6	11.2			<0.001





Conduits

	OFF-PI (n = 23		ON-PL (n = 23		p-value
	n	%	n	%	
CABG Completed	2349	98.9	2356	99.1	
Total grafts performed	3.0		3.2		<0.001
CONDUIT					
LIMA or RIMA	2199	93.6	2201	93.4	0.788
Saphenous Vein	2028	86.3	2117	89.9	<0.001

Peri-operative Transfusions and Bleeding



	OFF-PUMP (n = 2375) %	ON-PUMP (n = 2377) %	p value
Any Blood Transfusion	50.7	63.3	<0.001
Antifibrinolytics	26.1	37.0	<0.001
Re-operation for bleeding	1.4	2.4	0.02





1st Co-Primary Outcome (30 Days)

	Off Pump %	On Pump %	Hazard Ratio	95% CI	p value
Primary Outcome Death, Stroke, MI, Renal Failure	9.8	10.3	0.95	0.79-1.14	0.59





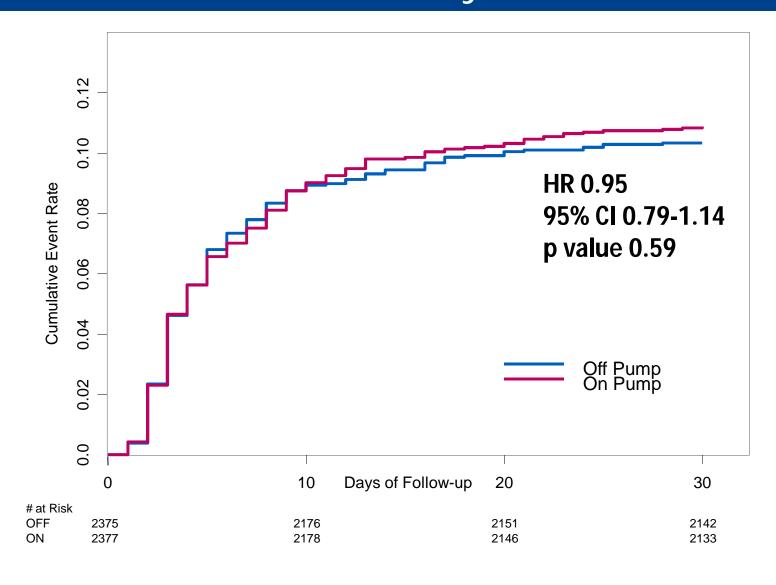
1st Co-Primary Outcome (30 Days)

	Off Pump %	On Pump %	Hazard Ratio	95% CI	p value
Primary Outcome Death, Stroke, MI, Renal Failure	9.8	10.3	0.95	0.79-1.14	0.59
Components					
Death	2.5	2.5	1.02	0.71-1.46	
Stroke	1.0	1.1	0.89	0.51-1.54	
Non Fatal MI	6.7	7.2	0.93	0.75-1.15	
New Renal Failure	1.2	1.1	1.04	0.61-1.76	

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Death/MI/Stroke/New Renal Failure at 30 Days







Other Outcomes at 30 days

	Off Pump %	On Pump %	Hazard Ratio	95% CI	p value
Angina	0.1	0.1	1.50	0.25-8.99	0.66
PCI	0.5	0.1	3.67	1.02-13.2	0.05
Re-do CABG	0.2	0.04	6.00	0.72-49.8	0.01
PCI/Re-do CABG	0.7	0.2	4.01	1.34-12.0	0.01
All re-operations (re-do CABG)	3.3	3.9	0.85	0.63-1.14	0.27
All re-operations/Re-do CABG/PCI	3.7	4.0	0.94	0.70-1.25	0.65





Other Outcomes at 30 days

	Off Pump %	On Pump %	Relative Risk	95% CI	p value
Respiratory Infection or failure	5.9	7.5	0.79	0.63-0.98	0.03
Acute Kidney Injury					
AKIN Stage 1	28.0	32.1	0.87	0.80-0.96	0.01
RIFLE risk	17.0	19.6	0.87	0.76-0.98	0.02
New Renal Failure requiring Dialysis	1.2	1.1	1.04	0.61-1.76	0.77

Acute Kidney Injury Network (<u>AKIN</u>): absolute increase in serum creatinine value ≥27 µmol/L <u>OR</u> an increase of ≥150 % from the baseline serum creatinine value Risk, Injury, Failure, Loss and End-stage Renal Disease (<u>RIFLE</u>): increase of ≥150 % from the baseline serum creatinine value



Primary Outcome at Hospital Discharge

	Off Pump %	On Pump %	Hazard Ratio	95% CI	p value
Tertiary Outcome Death/MI/Stroke/Renal Failure	9.6	10.4	0.94	0.78-1.13	0.50
Components					
Death	2.6	2.8	0.97	0.68-1.37	
Stroke	0.9	1.0	0.94	0.52-1.69	
Non Fatal MI	6.7	7.2	0.93	0.75-1.15	
New Renal Failure	1.2	1.1	1.11	0.65-1.87	



Subgroups (1)

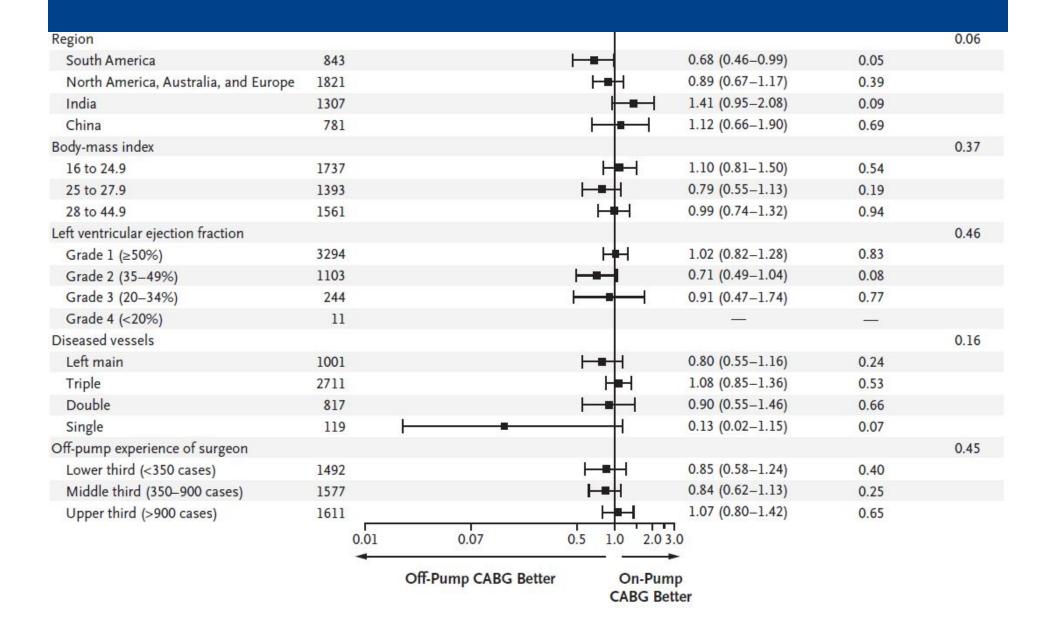


Subgroup	No. of Patients	Hazard Ratio (95% CI)		P Value	P Value for Interaction
Age					0.46
<70 yr	2815	- -	1.02 (0.79-1.32)	0.88	
≥70 yr	1935	├-	0.89 (0.69-1.14)	0.37	
Sex					0.99
Male	3843	 	0.95 (0.77-1.16)	0.60	
Female	908	├-	0.94 (0.65-1.36)	0.75	
Cerebrovascular disease					0.58
Yes	456	 	1.10 (0.66-1.83)	0.72	
No	4296	H al l	0.94 (0.77-1.14)	0.51	
Peripheral arterial disease					0.21
Yes	385	├	0.66 (0.36-1.21)	0.18	
No	4366	⊦∔ -l	0.99 (0.82-1.19)	0.88	
Diabetes					0.08
Yes	2233	 ■ 	0.80 (0.61-1.04)	0.10	
No	2518	;-	1.10 (0.86-1.41)	0.44	
Renal failure requiring dialysis					0.16
Yes	65	<u> </u>	0.38 (0.11-1.36)	0.14	
No	4595	 ■ -l	0.95 (0.79-1.15)	0.61	
Congestive heart failure					0.11
Yes	296	 ■ 	0.61 (0.34-1.09)	0.10	
No	4455	ŀ ∳ -l	1.00 (0.83-1.21)	0.97	
EuroSCORE					0.13
0 to 2	1339	⊬= -1	1.35 (0.92-1.99)	0.12	
3 to 5	2516	 = 1	0.87 (0.68-1.11)	0.26	
>5	828	├- ■ ├- 1	0.85 (0.58-1.25)	0.41	



Subgroups (2)









Conclusions

- At 30 days there was no difference in the primary outcome between Off pump CABG and On pump CABG.
- Off-pump was associated with:
 - Less transfusions and re-operation for bleeding
 - Less acute kidney injury
 - Less respiratory infections/failure
 - More early revascularizations





Implications

- In experienced hands, both procedures are reasonable options based on short-term results
- The difference in morbidity that was detected in the 30 days results may or may not lead to significant differences during the long-term follow-up that we are conducting





Steering Committees

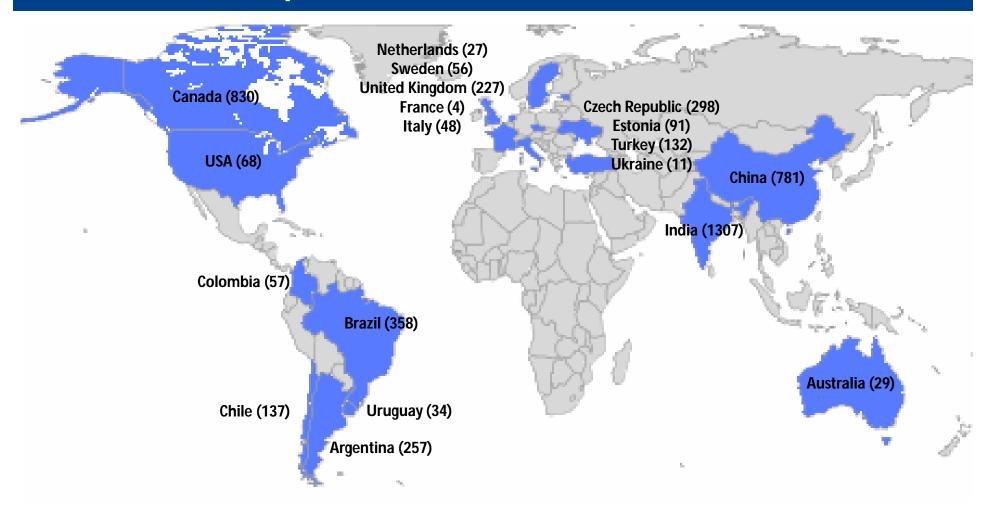
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Final Recruitment by Country

4752 patients from 79 sites in 19 countries



ORIGINAL ARTICLE

Off-Pump or On-Pump Coronary-Artery Bypass Grafting at 30 Days

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