VERMONT: CAAS-vFFR Assessment of Stenosis Severity



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Background

Fractional Flow Reserve (FFR) is the gold-standard for guiding revascularisation decisions in intermediate coronary artery stenosis (40-69%).

There has been limited uptake of three-dimensional quantitative angiography based FFR due to real-world measurement variability, inaccuracy, exclusion rates and poor workflow.



STEP 1. Engage + GTN + Root Pressure

STEP 2. Obtain two orthogonal views

STEP 3. Choose Optimal Frame



2. Western Sydney University

STEP 4. Outline Contour + common image point







<u>STEP 5.</u> Physiological + Anatomical Results



The CAAS-vFFR (Pie-Medical) platform has good preliminary results from recent industry sponsored validation studies.

Methods

➢ We conducted an investigator-initiated, single-centre, blinded, prospective observational study assessing the concordance, validity and time efficacy of CAAS-vFFR compared to patients undergoing routine wire-based FFR for intermediate coronary stenoses.

➤ The study was performed at Campbelltown Hospital, in Sydney, Australia. 209 consecutive patients with 225 lesions were recruited over 19 months. FFR and vFFR



Discussion and Conclusions

CAAS-vFFR vs. FFR

High Sensitivity

- High Negative Predictive Value
- Excellent Diagnostic Accuracy
 - Excellent Time Efficacy
 Low Exclusion Rate
- These results reflect the potential for vFFR to be utilized as a reliable screening tool for intermediate lesions.
- > If a positive vFFR (≤ 0.80) is obtained, progression

to wire based FFR is recommended.

Results

