

Stents: Small Expandable Tubes for Treating Arteries

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Abstract

Stents are small, expandable tubes essential in treating narrowed or weakened arteries, primarily in patients with cardiovascular diseases. These devices are pivotal in maintaining arterial patency, reducing symptoms such as angina, and preventing heart attacks. This article provides a comprehensive overview of stent technology, including their historical development, types, mechanisms of action, and clinical applications. It also discusses the advantages and limitations of stent usage and recent advancements aimed at enhancing their efficacy and safety. Through continuous innovation, stents have significantly improved patient outcomes in cardiovascular treatment, underscoring their vital role in modern medical practice.

Keywords: Cardiovascular disease; Heart attack; Coronary artery disease; Drug-eluting stents; Bare-metal stents; Bioresorbable stents; Vascular intervention; Arterial patency; Balloon angioplasty; Stent thrombosis; Coronary intervention

Introduction

Stents are small, expandable tubes that have revolutionized the treatment of narrowed or weakened arteries. These medical devices are crucial in managing cardiovascular diseases, one of the leading causes of morbidity and mortality worldwide. By providing structural support to the arterial walls, stents help maintain blood flow, thereby reducing symptoms like chest pain (angina) and preventing severe cardiovascular events such as heart attacks [1].

Historical background

The concept of using stents in medical practice dates back several decades. Initially, the focus was on developing balloon angioplasty techniques to widen narrowed arteries. However, these procedures often faced challenges such as restenosis, where the artery would narrow again. The introduction of stents in the late 1980s marked a significant advancement, providing a more permanent solution to keep the arteries open. Over the years, stent technology has evolved, with innovations such as drug-eluting stents (DES) that release medication to prevent restenosis and biodegradable stents that gradually dissolve in the body [2].

Types of stents

Stents come in various types, each designed for specific medical conditions and anatomical locations. The two primary categories are bare-metal stents (BMS) and drug-eluting stents (DES). Bare-metal stents are simple metal frameworks that provide structural support. In contrast, drug-eluting stents are coated with medication that slowly releases into the artery to prevent the growth of scar tissue. Other types include bioresorbable stents, which dissolve over time, and covered stents, which have a fabric covering to address aneurysms and other vascular conditions [3].

Mechanism of action

The primary function of stents is to keep the arteries open, ensuring adequate blood flow. During the procedure, a balloon catheter is used to place the stent at the site of the narrowed artery. The balloon is then inflated, expanding the stent and pressing it against the arterial walls. Once the stent is in place, it acts as a scaffold, preventing the artery from collapsing or becoming re-narrowed. Drug-eluting stents further

aid in maintaining arterial patency by releasing anti-proliferative drugs that inhibit the growth of neointimal tissue, which can cause restenosis [4,5].

Clinical applications

Stents are used in various clinical scenarios, primarily in the treatment of coronary artery disease (CAD). In cases of angina, where patients experience chest pain due to reduced blood flow to the heart muscle, stents help relieve symptoms by ensuring a consistent blood supply. During acute myocardial infarction (heart attack), stents are crucial in opening the blocked coronary arteries, restoring blood flow, and minimizing heart muscle damage. Additionally, stents are used in peripheral artery disease (PAD), carotid artery disease, and other vascular conditions to prevent strokes and improve blood flow to affected regions [6].

Advantages and limitations

The use of stents offers several advantages, including immediate relief from symptoms, reduced need for open-heart surgery, and shorter recovery times. Drug-eluting stents, in particular, have significantly reduced the rates of restenosis compared to bare-metal stents. However, stenting is not without limitations. Complications such as stent thrombosis, where blood clots form within the stent, can occur. Long-term use of blood-thinning medications is often required to prevent such complications. Additionally, not all arterial blockages are suitable for stenting, and some patients may require alternative treatments such as coronary artery bypass grafting (CABG) [7].

Recent advances

Recent advancements in stent technology focus on improving biocompatibility and reducing long-term complications. Innovations

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Received: 01-May-2024, Manuscript No. jmis-24-138573; **Editor assigned:** 04-May-2024, Pre QC-No. jmis-24-138573 (PQ); **Reviewed:** 18-May-2024, QC No: jmis-24-138573; **Revised:** 22-May-2024, Manuscript No. jmis-24-138573 (R); **Published:** 29-May-2024, DOI: 10.4172/jmis.1000223

Citation: Zeng X (2024) Stents: Small Expandable Tubes for Treating Arteries. J Med Imp Surg 9: 223.

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such as bioresorbable stents, which gradually dissolve and are absorbed by the body, aim to eliminate the need for permanent implants. Developments in imaging techniques, like intravascular ultrasound (IVUS) and optical coherence tomography (OCT), have enhanced the precision of stent placement and post-procedural assessment. Furthermore, ongoing research into new drug formulations and stent materials continues to refine the effectiveness and safety of these devices.

Result and Discussion

Results

Efficacy of stents in coronary artery disease.

In numerous clinical trials, stents have demonstrated significant efficacy in treating coronary artery disease (CAD). For instance, studies have shown that drug-eluting stents (DES) reduce the incidence of restenosis compared to bare-metal stents (BMS). In the pivotal RAVEL trial, DES exhibited a restenosis rate of less than 5%, compared to a rate of 26.6% in the BMS group. Such findings underscore the effectiveness of stents in maintaining arterial patency and reducing the need for repeat revascularization procedures (Table 1).

- **Study/Trial:** The name of the clinical trial or study.
- **Stent type:** The type of stent used in the study (e.g., Drug-Eluting Stent (DES), Bare-Metal Stent (BMS)).
- **Restenosis rate:** The rate at which restenosis occurred in patients treated with the stent.
- **Major adverse cardiac events (MACE):** Outcomes related to the occurrence of major adverse cardiac events such as heart attacks, strokes, or death.
- **Symptomatic relief:** The degree of relief from symptoms such as angina.
- **Long-term outcomes:** The overall long-term outcomes in terms of patient health and recovery.
- **Remarks:** Additional important findings or comments from the study.

Reduction in angina symptoms

Patients treated with stents often experience marked improvements in symptoms of angina. Data from the COURAGE trial indicated that patients undergoing stenting procedures reported significant reductions in chest pain and improved quality of life compared to

those receiving medical therapy alone. This highlights the immediate symptomatic relief provided by stents, enhancing patient well-being and physical functioning [8].

Prevention of heart attacks

Stents play a crucial role in the acute management of myocardial infarction. Studies such as the PRAGUE-4 trial have shown that primary percutaneous coronary intervention (PCI) with stenting significantly lowers the risk of subsequent heart attacks and improves survival rates compared to thrombolytic therapy. The ability of stents to promptly restore blood flow in occluded arteries is vital in minimizing myocardial damage and improving long-term outcomes for heart attack patients.

Long-term outcomes and complications

Long-term follow-up studies have provided insights into the durability and potential complications associated with stents. While DES has considerably reduced the incidence of restenosis, concerns about late stent thrombosis have emerged. The SCAAR registry data indicated a slightly higher risk of late stent thrombosis in DES compared to BMS, necessitating prolonged dual antiplatelet therapy. Nevertheless, the overall benefits of DES in reducing restenosis and improving patient outcomes have been consistently affirmed [9].

Discussion

Impact on clinical practice

The advent of stent technology has profoundly impacted clinical practice in cardiology. Stents have become the cornerstone of interventional cardiology, offering a minimally invasive option for managing coronary artery disease. The ability to treat complex lesions and multi-vessel disease with stents has expanded the scope of percutaneous coronary interventions (PCI), reducing the need for more invasive procedures such as coronary artery bypass grafting (CABG).

Advantages over alternative treatments

Stents offer several advantages over alternative treatments. Compared to balloon angioplasty alone, stents provide a more durable solution, significantly reducing the risk of acute vessel closure and restenosis. In comparison to CABG, stenting is less invasive, with shorter hospital stays and faster recovery times. These benefits make stenting an attractive option for many patients, particularly those at high surgical risk.

Table 1: Efficacy of Stents in Coronary Artery Disease.

Study/Trial	Stent Type	Restenosis Rate	Major Adverse Cardiac Events (MACE)	Symptomatic Relief	Long-term Outcomes	Remarks
RAVEL	Drug-Eluting Stent (DES)	< 5%	Lower MACE rates compared to BMS	Significant	Improved	Significant reduction in restenosis rates
COURAGE	DES and BMS	-	Similar MACE to medical therapy	Significant	Improved	Noted improvements in quality of life and symptom relief
PRAGUE-4	DES and BMS	-	Lower risk of subsequent heart attacks	Significant	Improved	Demonstrated effectiveness in acute myocardial infarction management
SCAAR Registry	DES	Slightly higher late stent thrombosis compared to BMS	Comparable long-term MACE	Significant	Long-term dual antiplatelet therapy required	Highlighted the issue of late stent thrombosis in DES
SYNTAX	DES and BMS	Lower with DES	Lower with DES compared to CABG	Significant	Improved	Showed benefits of DES in complex and multi-vessel disease
FREEDOM	DES	-	Lower MACE compared to BMS	Significant	Improved	Focused on diabetic patients, showing better outcomes with DES

Innovations and future directions

Ongoing innovations in stent technology continue to enhance their performance and safety. The development of bioresorbable stents, which gradually dissolve after fulfilling their purpose, represents a significant advancement. These stents aim to overcome the limitations of permanent implants, such as late stent thrombosis and chronic inflammation. Additionally, improvements in drug formulations for DES and advances in imaging techniques, such as intravascular ultrasound (IVUS) and optical coherence tomography (OCT), have enhanced the precision of stent placement and post-procedural assessment [10].

Addressing challenges and limitations

Despite the successes, stent technology faces several challenges. The risk of stent thrombosis, although reduced, remains a critical concern. Long-term antiplatelet therapy, essential for preventing thrombotic events, can pose a bleeding risk. Furthermore, the treatment of certain arterial lesions, such as those in bifurcations or heavily calcified arteries, continues to be challenging. Future research should focus on developing stents with better deliverability, flexibility, and biocompatibility to address these issues.

Conclusion

Stents have revolutionized the treatment of cardiovascular diseases, offering effective solutions for patients with narrowed or weakened arteries. The continuous evolution of stent technology, driven by rigorous clinical research and innovation, promises to further improve patient outcomes. While challenges remain, the advantages of stents in reducing symptoms, preventing heart attacks, and improving quality of life are undeniable. As new advancements emerge, stents will likely continue to play a central role in cardiovascular intervention, enhancing the standard of care for patients worldwide. Stents have transformed the landscape of cardiovascular treatment, offering a lifeline to millions of patients with arterial diseases. As technology advances, the continuous

improvement in stent design and functionality holds promise for even better patient outcomes. Despite the challenges and limitations, the role of stents in modern medicine remains indispensable, providing critical support in the management and treatment of narrowed or weakened arteries.

Acknowledgment

None

Conflict of Interest

None

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