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Debating invasive functional diagnosis for angina or ischaemia with non-obstructive coronary arteries; the prognostic impact of COVADIS criteria in acetylcholine testing; a novel sirolimus drug-coated balloon in coronary bifurcation lesions; clinical results of using final kissing balloon inflation in bifurcation lesions; novel training methods for emergency endovascular stroke interventions; and more

It's our last edition for the winter here in Europe, and we offer you an early bouquet of diverse topics, from testing and diagnosis to using drug-coated balloons in bifurcation lesions, as well as other subjects all just waiting to bloom. Join us.

Routine diagnosis of ANOCA/INOCA

Rocco A. Montone and Andrea Caffè and Annapoorna Kini and Keisuke Yasumura debate whether the invasive functional diagnosis of angina or ischaemia with non-obstructive coronary arteries (ANOCA/INOCA) should be adopted as standard practice despite limited evidence at the present time. Their discussion of the pros and cons examines current guidelines, cost-effectiveness and the implications for patient management of using – or not – this diagnostic approach.

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Sirolimus drug-coated balloons in coronary bifurcation lesions

In the SPACIOUS trial, authors **You Zhou, Junbo Ge and colleagues** investigated a novel sirolimus-coated balloon for the treatment of *de novo* non-left main coronary bifurcation lesions. Compared to a paclitaxel-coated balloon, the sirolimus-coated balloon was non-inferior in terms of both angiographic and clinical outcomes. This article is accompanied by an editorial by Daniele Giacoppo.

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The impact of COVADIS criteria in acetylcholine testing

Riccardo Rinaldi, Rocco A. Montone and colleagues explore the prognostic value of COVADIS criteria in patients with ischaemia or myocardial infarction with non-obstructive coronary arteries (INOCA/MINOCA) undergoing intracoronary provocation testing with acetylcholine. They found that both the types and the number of positive COVADIS criteria hold important clinical implications for patient risk stratification and management. **Javier Escaned and Luca Paolucci** contribute an editorial accompanying this article.

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The use of final kissing balloon inflation in the management of bifurcation lesions

From the ULTRA-BIFURCAT registry, **Ovidio De Filippo, Fabrizio D'Ascenzo and colleagues** assess the clinical implications of final kissing balloon inflation in a large, unselected cohort of patients undergoing PCI for coronary bifurcation lesions with an upfront provisional stenting strategy. Despite showing promise in reducing lesion-associated adverse outcomes, final kissing balloon inflation did not reduce major adverse cardiac events.

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