



## Coronary In-Stent Restenosis – Current Perspectives

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### **Message from the Guest Editors**

Percutaneous coronary intervention (PCI), which allows the removal of coronary obstruction and restoration of supply to the affected myocardium, has brought major improvements in the treatment of coronary artery disease. Coronary stents allowed management of early periprocedural complications and led to a lower occurrence of restenosis following the plane balloon angioplasty due to the restricted elastic recoil and constrictive remodelling. The development of neointimal hyperplasia is, however, a novel complication associated with stent implantation possibly causing recurrence of the narrowing of the vessel lumen, the so-called in-stent restenosis (ISR). Although the use of drug-eluting stents (DES) contributed to their lower occurrence, in-stent restenosis remains one of the essential limitations of coronary interventions. In addition, the restenosis in drug-eluting stent (DES-ISR), is a complex process involving not only the intrinsic reaction of the vessel wall to the metallic stent platform, but also the biocompatibility of the polymer coating or insufficient effect of the antiproliferative drug, making the treatment of these remaining DES-ISR even more challenging.

