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SUPPLEMENTARY DATA

Table S1. Baseline characteristics and clinical outcomes of observational studies on single antiplatelet therapy after DCB-only revascularization

Characteristic	Cortese et al. (JAHA 2023)[1]	Räsänen et al. (CCI 2023)[2]	Mangier et al. (crm 2025)[3]
Study design	Retrospective observational	Retrospective observational, single-center	Prospective, multicenter registry
Inclusion period	2012–2021	2011–2020	2016–2020
Total sample size (N)	1110	172	2123
Patients on SAPT n, (%)	107 (9.6%)	172 (100)	113 (5.8%)
Comparator group	Full DCB cohort (n = 1110)	None (SAPT only)	DAPT (n = 1826)
PCI strategy	DCB-based PCI	DCB-only PCI	DCB-only PCI
DCB type		Paclitaxel-coated	Sirolimus-coated
Mean/median age (years)	71 (SAPT) vs 69 (DAPT); p = 0.71	75	67 (SAPT) vs 66 (DAPT); p = 0.33
Female sex (%)	36% (SAPT) vs 39% (DAPT); p = 0.87	41%	24% (SAPT) vs 18% (DAPT)
Acute coronary syndrome (%)	13% (SAPT) vs 45% (DAPT); p = 0.02	58%	35% (SAPT) vs 46% (DAPT)
Hemoglobin	9.9 g/dL (12 DAPT, p = 0.002)	12.3	12.7 (13.4 DAPT, p = 0.001)
High bleeding risk	100%	87% (≥ 1 major or ≥ 2 minor ARC-HBR criteria)	Not systematically assessed
Oral anticoagulation (%)	48% (SAPT) vs 27% (DAPT); p = 0.03	65%	Not reported
Antiplatelet	35% aspirin 65% clopidogrel	70% aspirin 22% clopidogrel 5% ticagrel 1% prasugrel	Not reported
De novo lesions (%)	100%	96%	56%
In-stent restenosis (%)	0%	4%	44%
Periprocedural DAPT	Not reported	49%	Not reported
Procedural success	96% (97% DAPT, p = 0.98)	Not reported	High angiographic success (not detailed)
Primary follow-up	12 months	12–24 months	12 months
MACE Definition	Cardiac death, MI, TLR	Cardiovascular death, nonfatal MI, TLR	Overall death, MI, TLR
MACE at 12 months (%)	9% (SAPT) vs 10% (DAPT); p = 0.78	4.7% overall (1.4% stable CAD; 7.1% ACS)	11.2% (SAPT) vs 8.9% (DAPT); p = 0.4

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TLR at 12 months (%)	4% (SAPT) vs 3.5% (DAPT); p = 0.87	1.7% overall (0% stable CAD; 3% ACS)	7.7% (SAPT) vs 5.6% (DAPT); p = 0.6
Cardiac death at 12 months	2% (similar in both groups)	3% overall	No significant differences
BARC 2–5 bleeding at 12 Months (%)	6% (SAPT) vs 9% (DAPT); p = 0.04	10.5%	Not detailed
BARC 3–5 bleeding at 12 Months (%)	2% (similar in both groups)	2.3%	2.9% (SAPT) vs 0.6% (DAPT); p = 0.027
Vessel Thrombosis/Abrupt Occlusion	0% (both groups)	0% (both groups)	0% (both groups)
Key message	Similar ischemic outcomes with reduced bleeding vs DAPT	Low TLR/MACE/bleeding rates in elderly, comorbid HBR patients	SAPT safe and effective, reduces bleeding risk in selected patients (including de novo and ISR)

ACS: acute coronary syndrome; CAD: coronary artery disease; DAPT: dual antiplatelet therapy; DCB: drug-coated balloon; HBR: high bleeding risk; ISR: in-stent restenosis; MACE: major adverse cardiovascular events; MI: myocardial infarction; SAPT: single antiplatelet therapy; TLR: target lesion revascularization.

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