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**Editor-in-Chief**  
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**Manuscript submission - “Coronary Angiography-derived Murray Law-Based Quantitative Flow Ratio (μQFR) After De Novo Drug-Coated Balloon Angioplasty: The CAMILLA Study”**

Dear Editor and Editorial Team,

Please find enclosed our manuscript, “Coronary Angiography-derived Murray Law-Based Quantitative Flow Ratio (μQFR) After De Novo Drug-Coated Balloon Angioplasty: The CAMILLA Study” submitted for your consideration for publication in EuroIntervention.

This study addresses a critical gap in the rapidly evolving field of drug-coated balloon (DCB) therapy. While DCB angioplasty offers an attractive “leave-nothing-behind” strategy for de novo coronary disease, the lack of physiological guidance has hindered optimal patient selection and procedural optimization. We present the first comprehensive evaluation of three-dimensional Murray law-based quantitative flow ratio (3D-μQFR) as a prognostic tool following DCB angioplasty in native vessels.

We found that a post-procedural μQFR <0.83 independently predicted a six-fold increase in vessel-oriented composite endpoints. This wire-free, angiography-based assessment provides immediate feedback during the procedure, enabling operators to identify and address suboptimal results before the patient leaves the catheterization laboratory. Given the increasing adoption of DCB therapy and the negative results from trials like REC-CAGEFREE I, our findings offer a practical tool to enhance procedural outcomes and patient safety.

The novelty of our work lies in establishing the first physiological threshold specifically for DCB-treated de novo lesions, extending beyond previous work limited to in-stent restenosis. This aligns perfectly with EuroIntervention’s mission to advance interventional cardiology through practical, clinically relevant research that directly impacts daily practice.

We hereby declare that this paper is not under consideration for publication elsewhere. None of the paper’s contents have been previously published in any form. All authors have thoroughly read and approved the final version of the manuscript. The authors declare no conflicts of interest related to this work.

We believe this manuscript would be of significant interest to EuroIntervention’s readership, particularly given the journal’s focus on innovative coronary interventions and commitment to advancing evidence-based practice. The findings have immediate clinical applicability and may influence future guidelines on DCB usage.

Thank you for your consideration. We look forward to your editorial review.

Sincerely,

**Dorian Garin, MD**  
On behalf of all co-authors