There is no, in my view, particular reason to be more aggressive in a patient that has received the stent, than in a patient that has other manifestations of coronary heart disease and atherosclerosis disease. For example, some of the lesions are not amenable to stents. But of course, they are very much conferring a prognostic disadvantage. So I would say, irrespective of stent implantation in established disease, and, of course, taking into account a number of factors such as diabetes, hypertension, et cetera to optimize the secondary prevention.