

# **A COMPLEX PCI IN A PATIENT WITH LM & DM**

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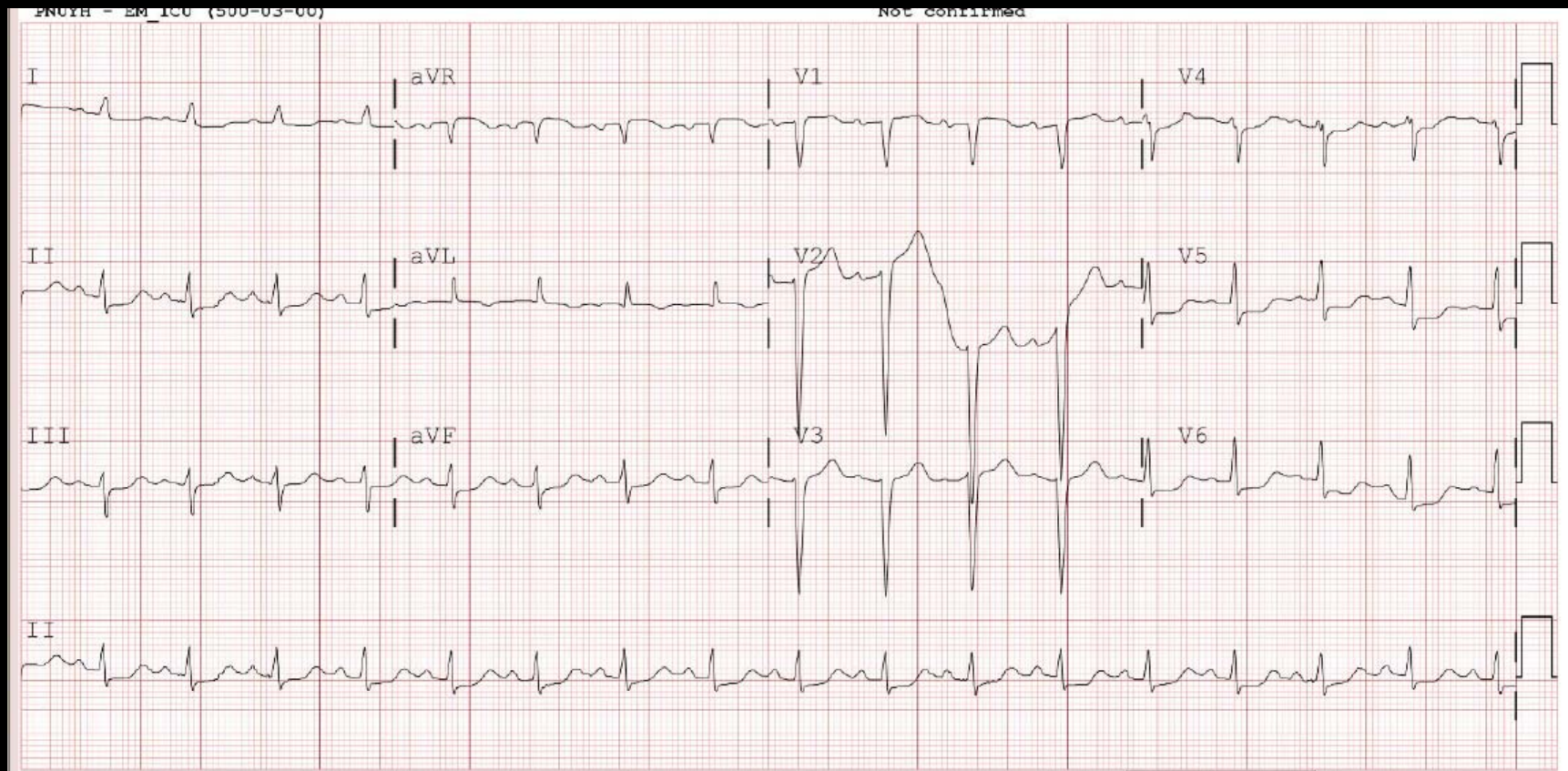
**Pusan National University Hospital**

# A case with pulmonary edema

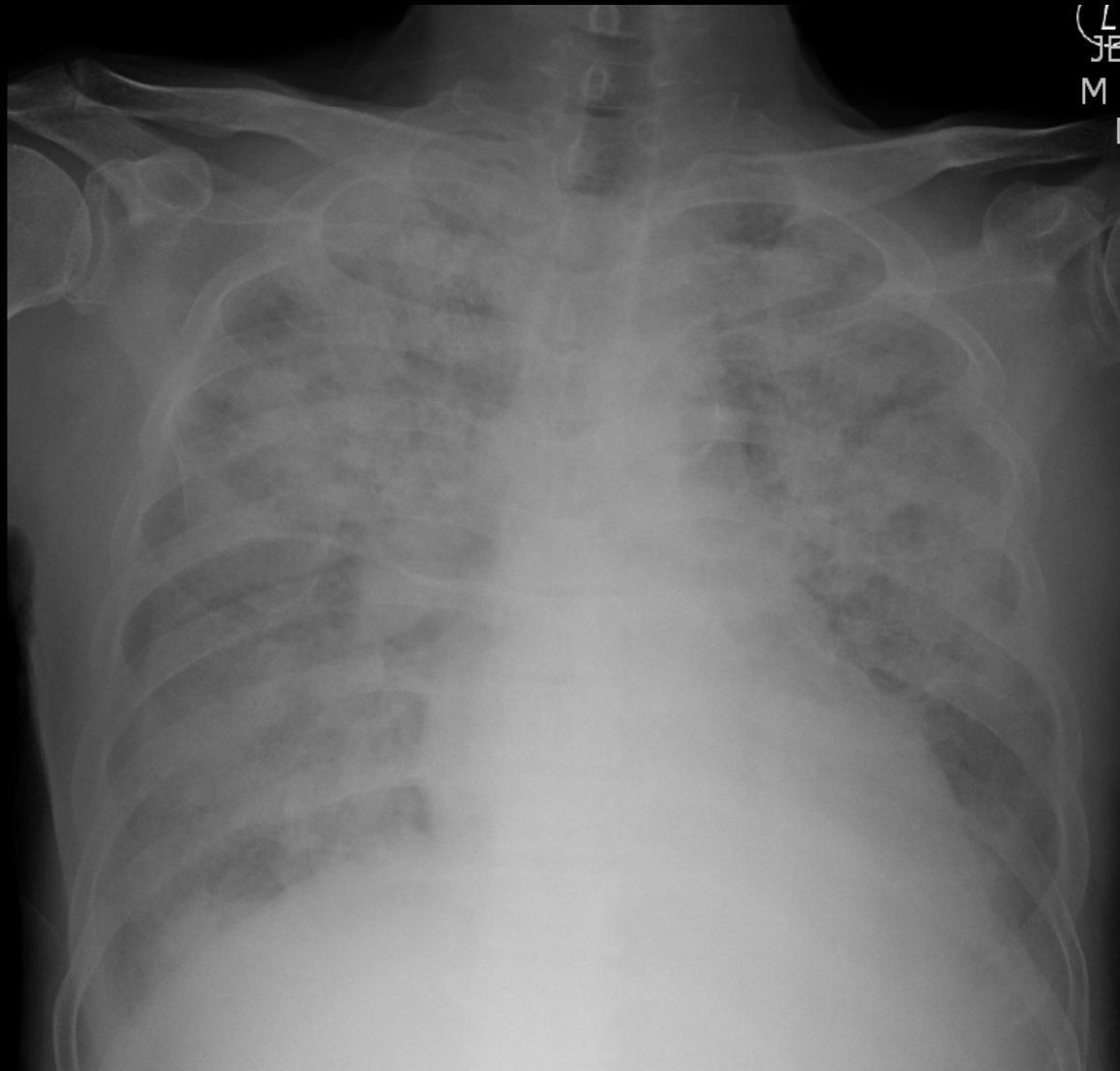
After having taken CAG, the patient was referred to our center because of lesion complexity & unstable patient's condition

- M/80
- Sudden onset chest pain with severe dyspnea for 2 days
- BP : 90/60 mmHg
- Risk factor : long standing DM/ HTN
- T chol 180 mg/dl BNP 1088 pg/mL,
- Cardiac enzyme : Troponin-I 13.3 ng/mL,  
CK-MB 9.0 ug/L
- Echo : Anterior wall akinesia with moderate to severe LV dysfunction (EF = 35%)

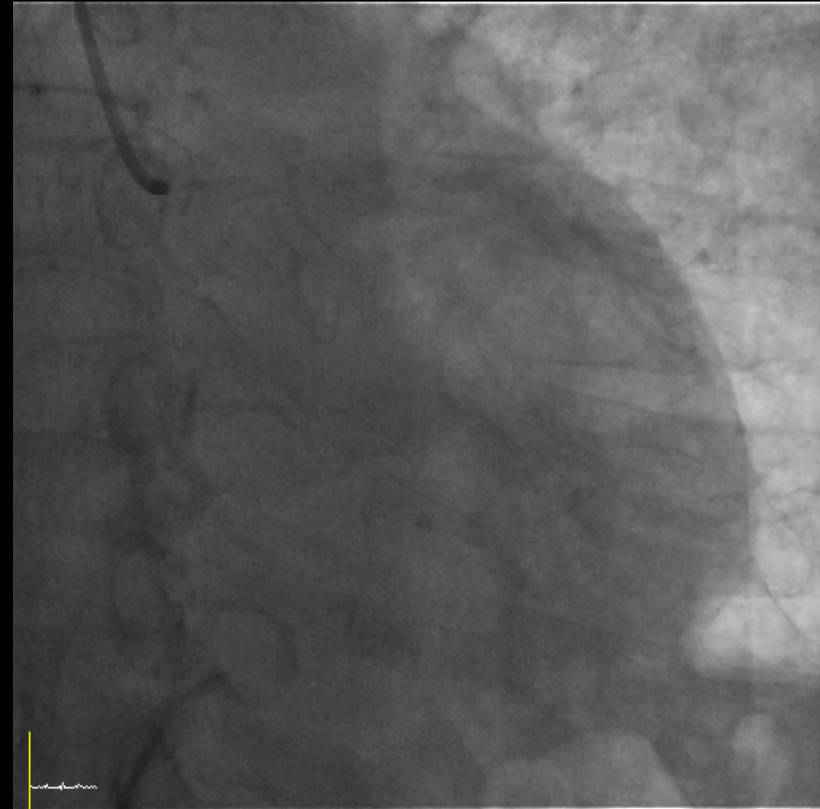
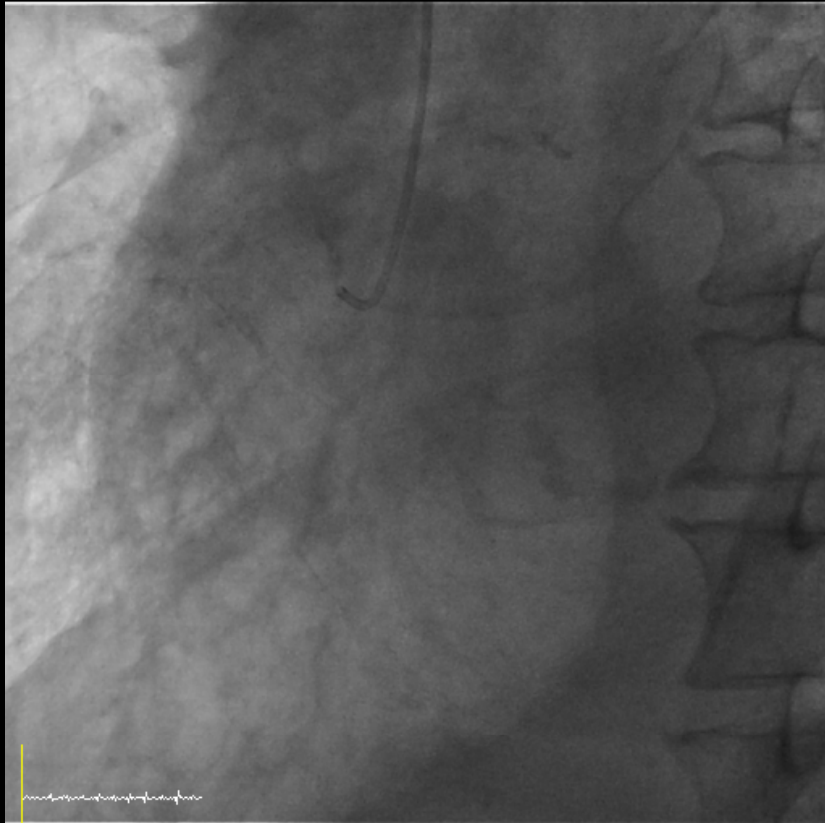
# ECG



# Chest PA



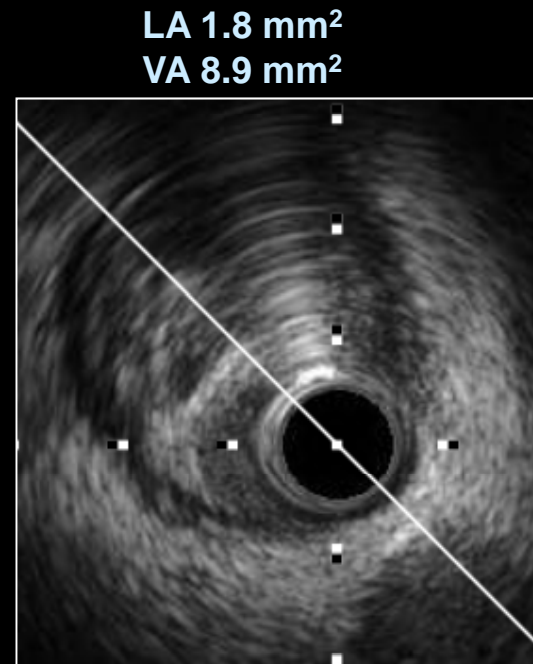
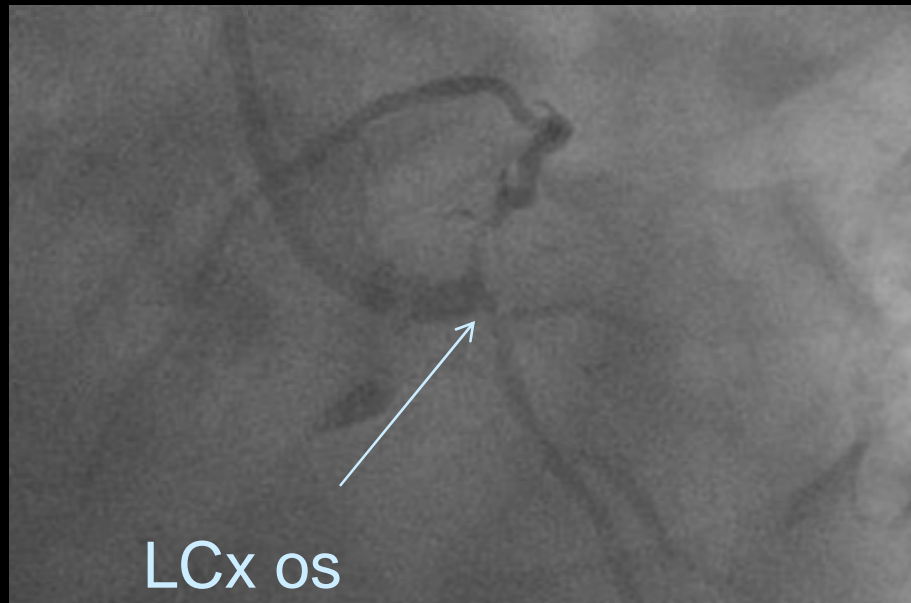
# CAG finding



CABG was not considered due to refusal of highly invasive approach

# Technical challenging points

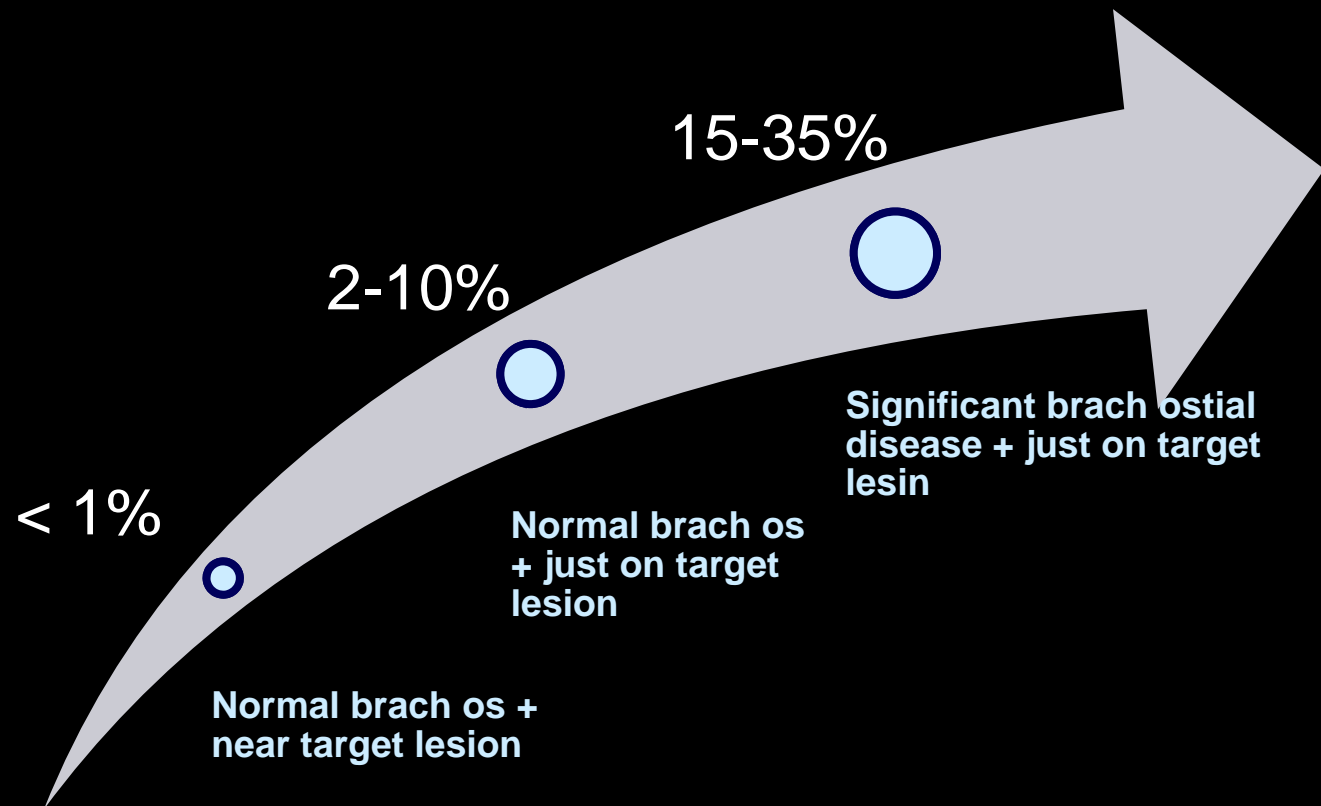
very severe ostial LAD disease + severe LCx ostial disease  
LM equivalent



Just LAD ostial stenting ??  
What if compromization of LCx os ??

# Technical challenging points

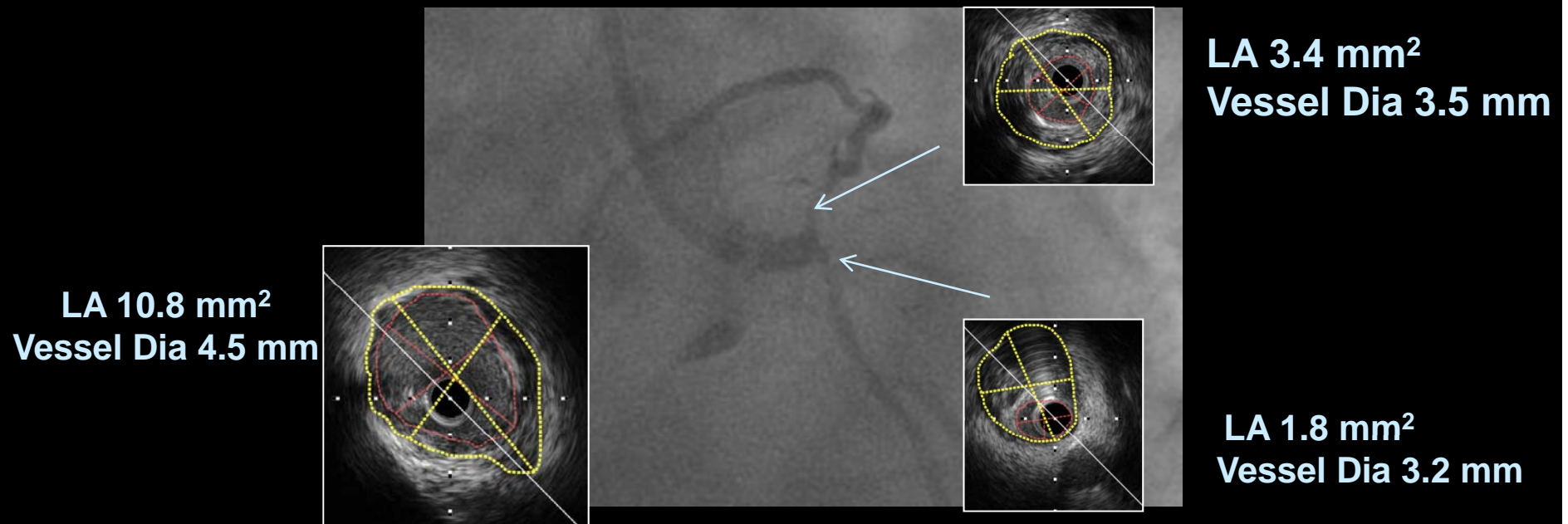
1 stent strategy? or Two stent strategy?



Risk of Side Branch Occlusion

# Technical challenging points

Which two stent strategy?

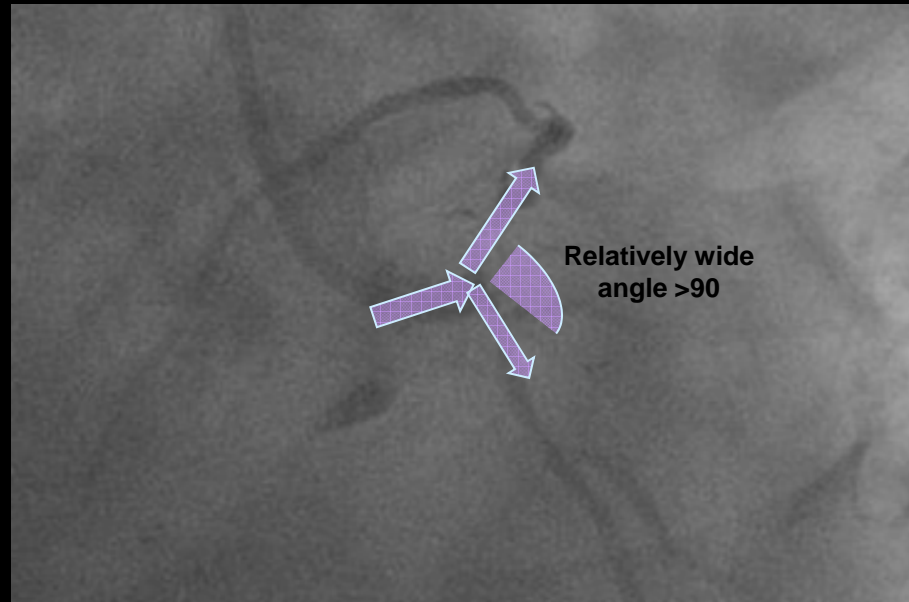


Vessel size relationship between Main vessel and two side br



# Technical challenging points

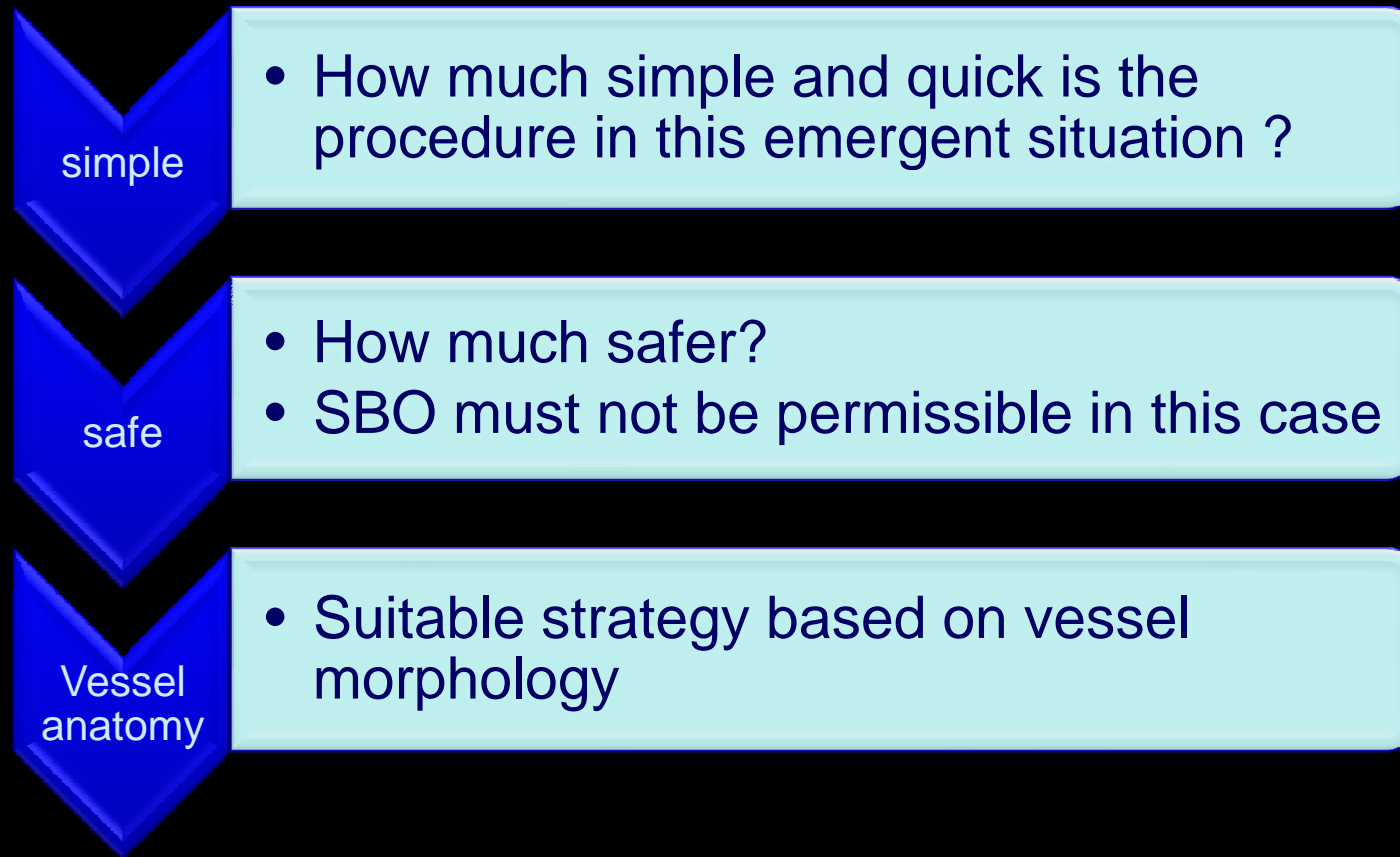
Which two stent strategy?



Angle relationship between Main vessel and two side br

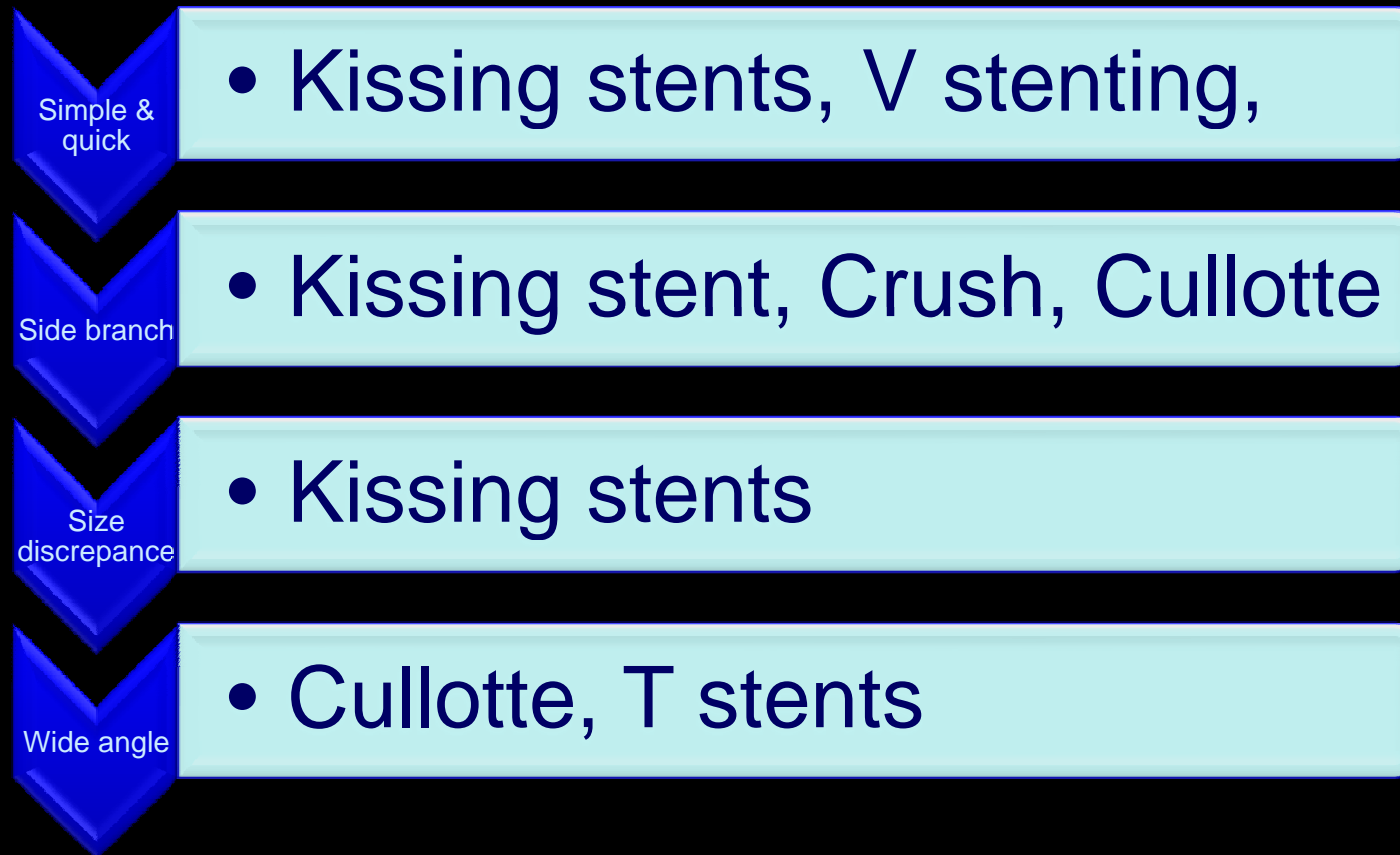
# 2 stents strategy (Kissing stents)

Considering points for the successful procedure



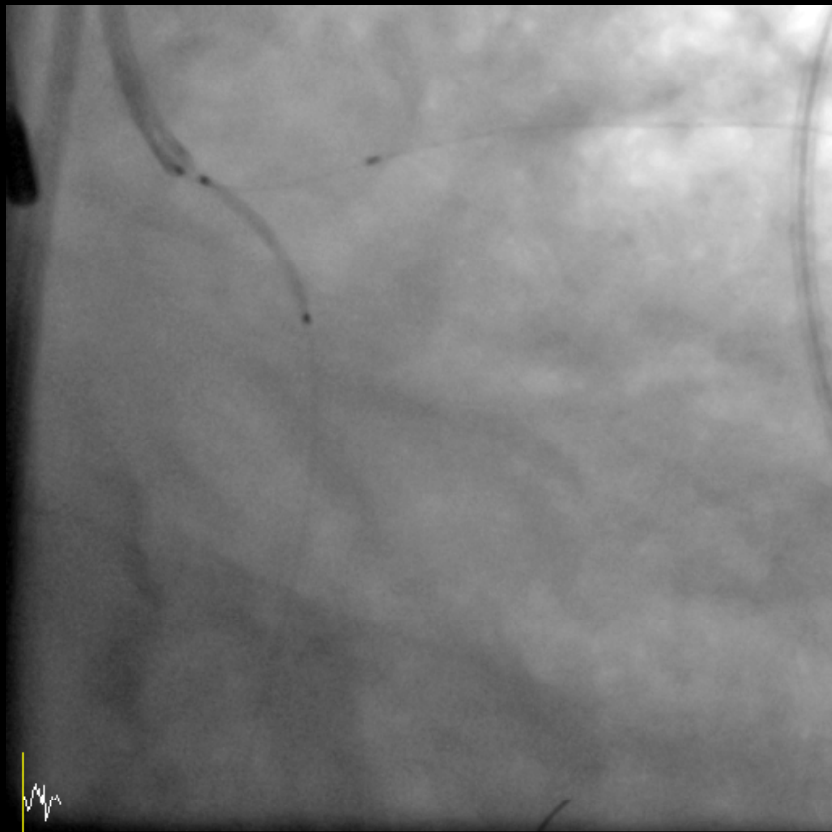
# 2 stents strategy (Kissing stents)

Considering points for the successful procedure



# 2 stents strategy (Kissing stents)

Simultaneous Kissing Stents was first attempted but 7 Fr Guiding catheter was not big enough with two stents in this case



LCx stenting with LAD  
balloon positioning  
(Endeavor R 3./18)

# 2 stents strategy (Kissing stents)

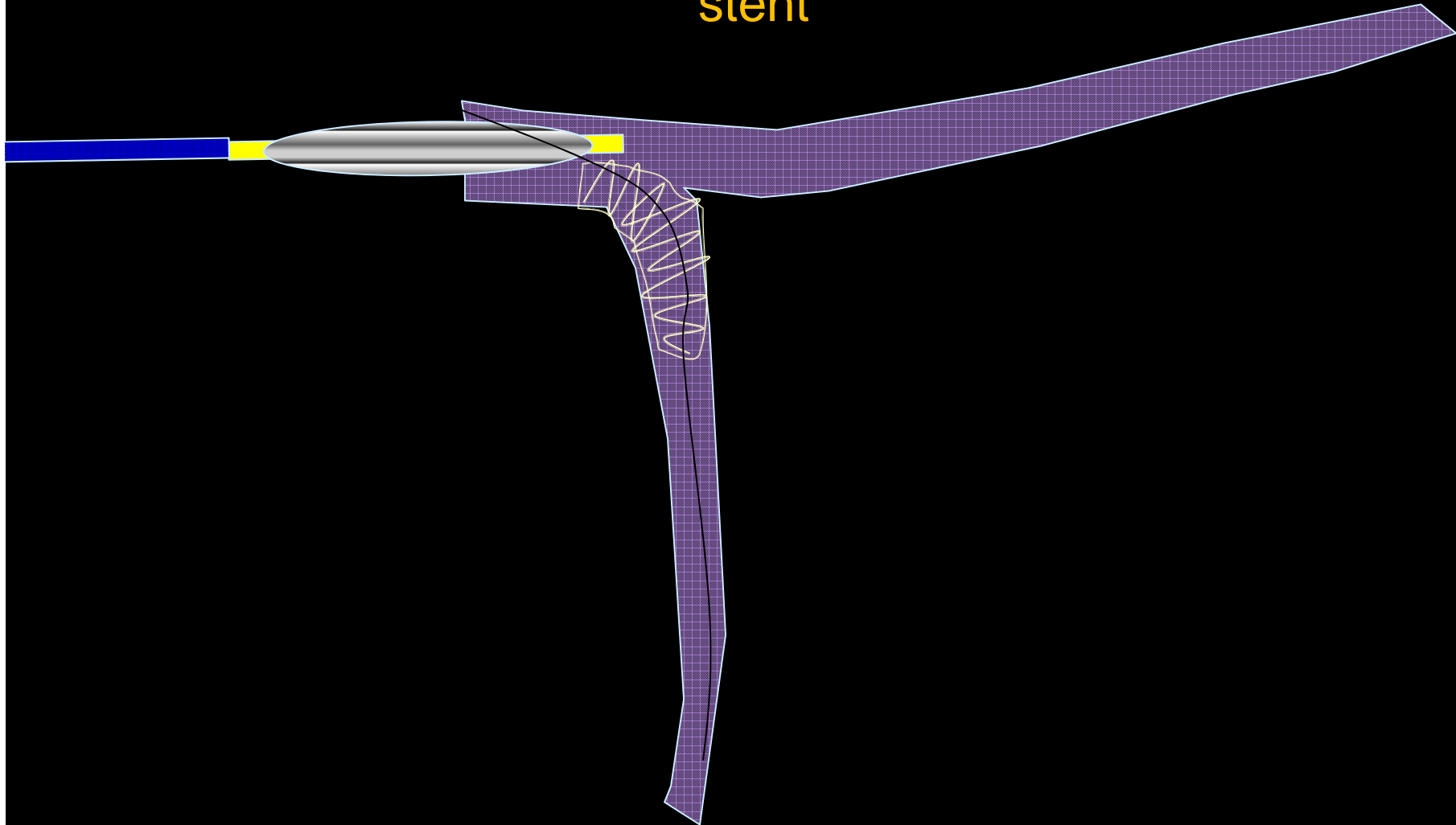
Not Simultaneous but sequential Kissing Stents with 7 Fr Guiding catheter system



LCx stenting with LAD  
balloon inflation

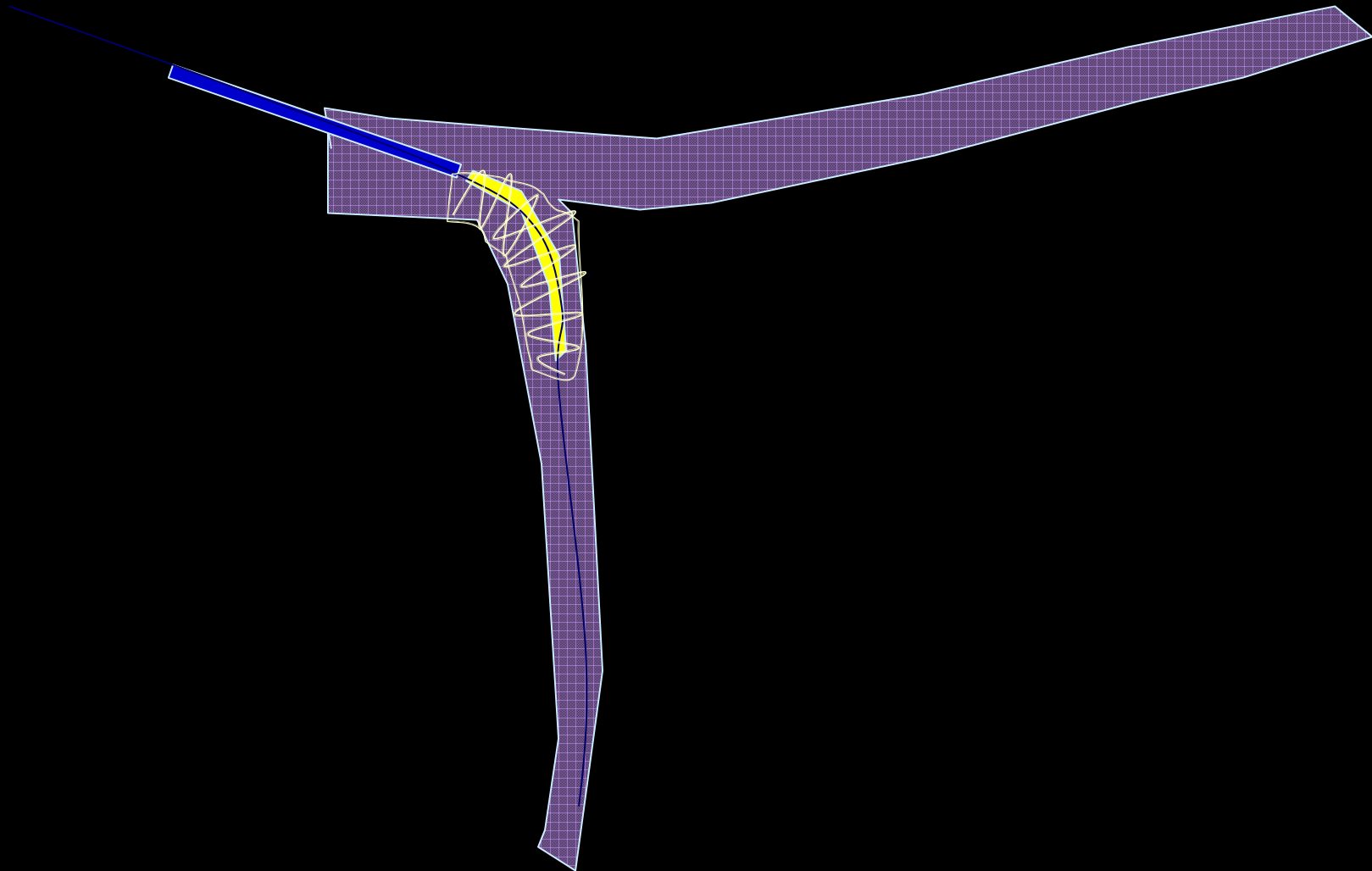
# 2 stents strategy (Kissing stents)

The subsequent stent got stuck because of the LM-LCx stent



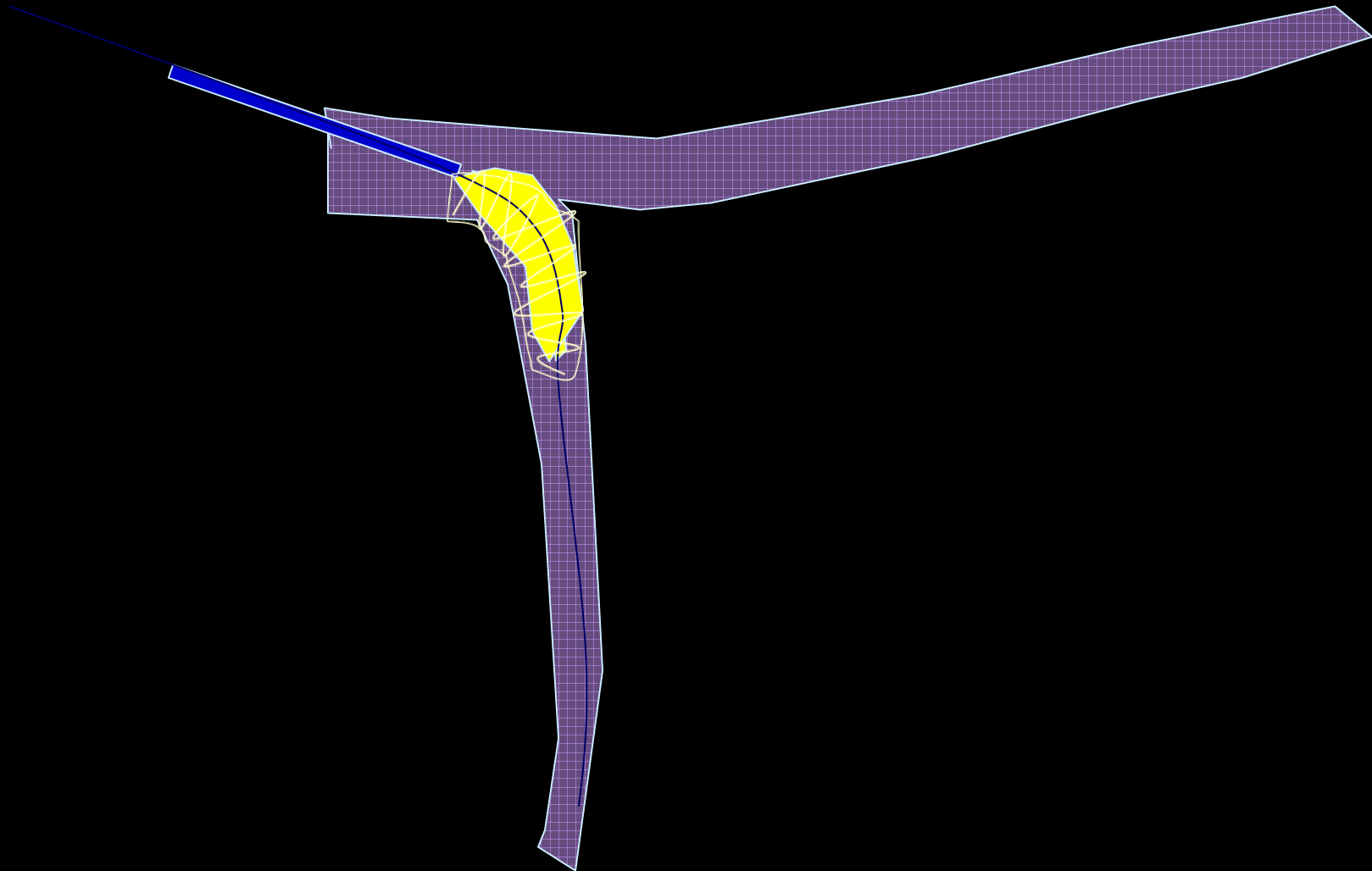
# 2 stents strategy (Kissing stents)

The balloon anchoring for good back-up support



# 2 stents strategy (Kissing stents)

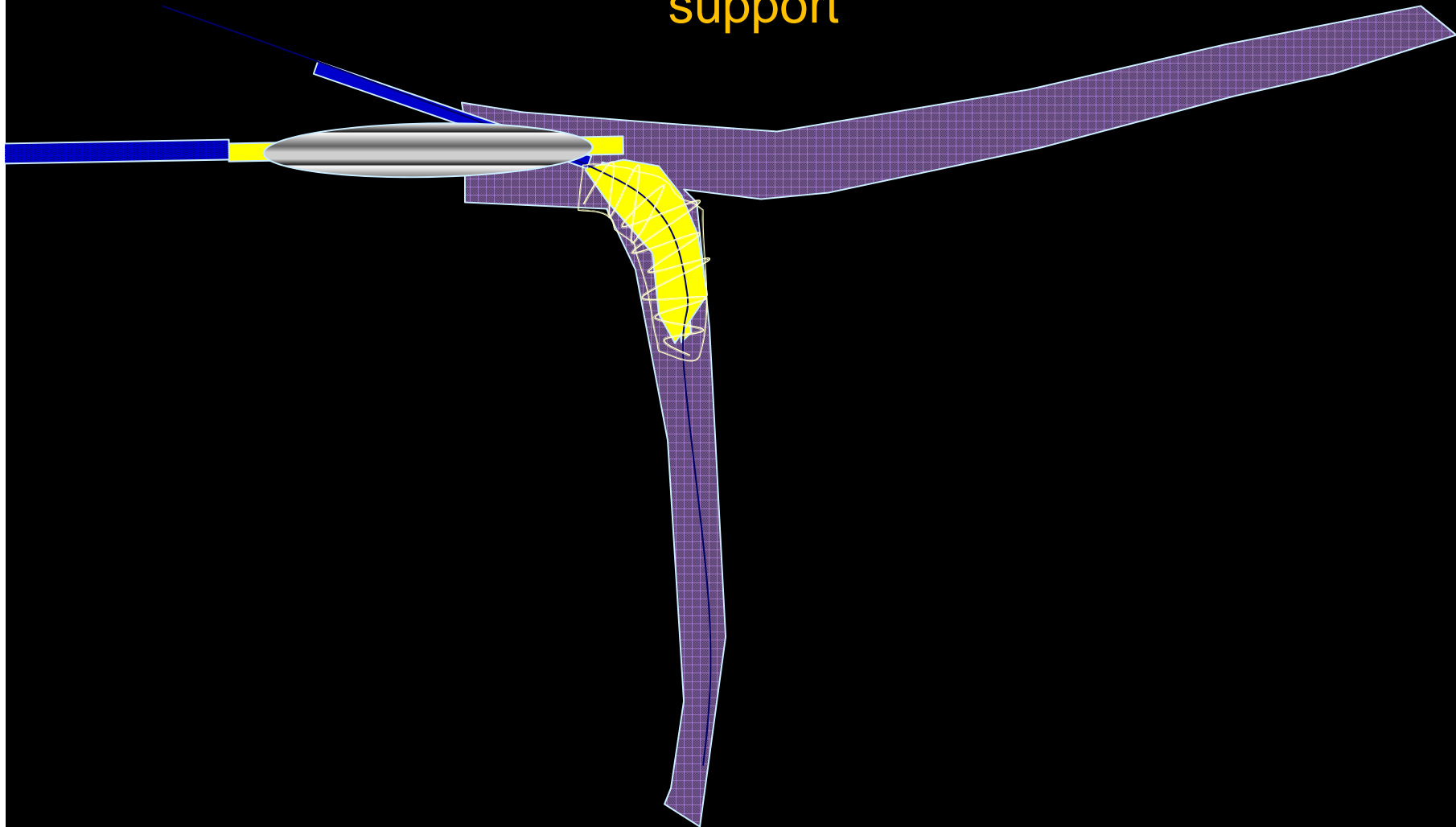
The balloon anchoring for good back-up support





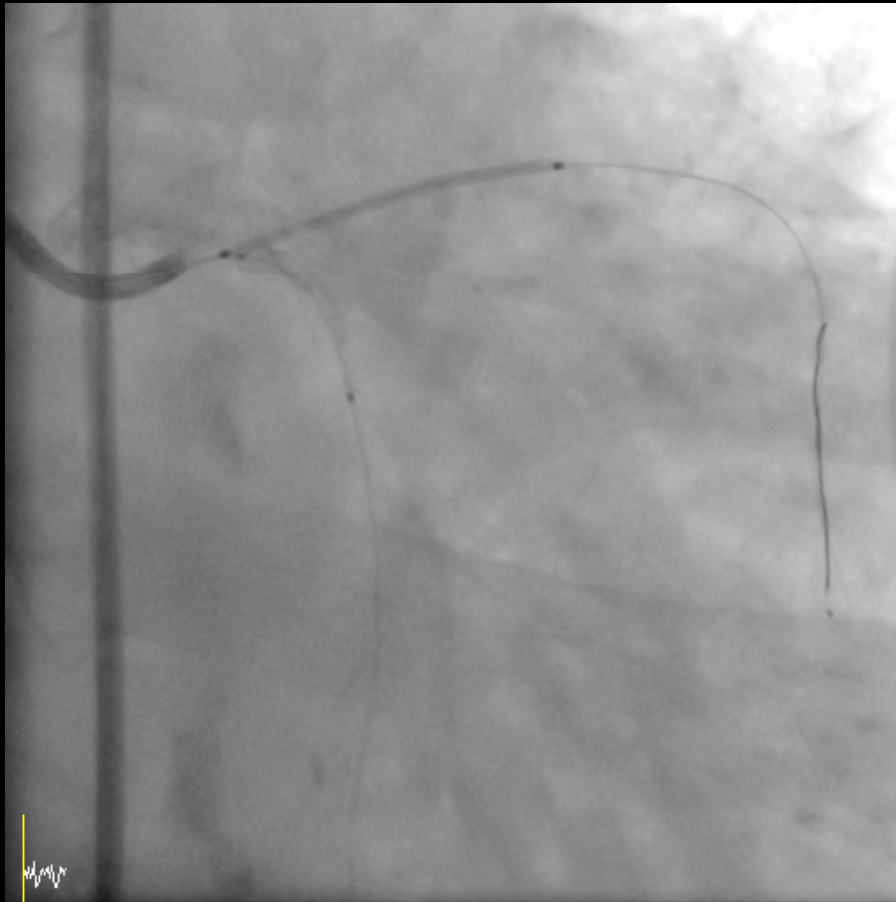
# 2 stents strategy (Kissing stents)

The balloon anchoring through LCx for strong back-up support



# 2 stents strategy (Kissing stents)

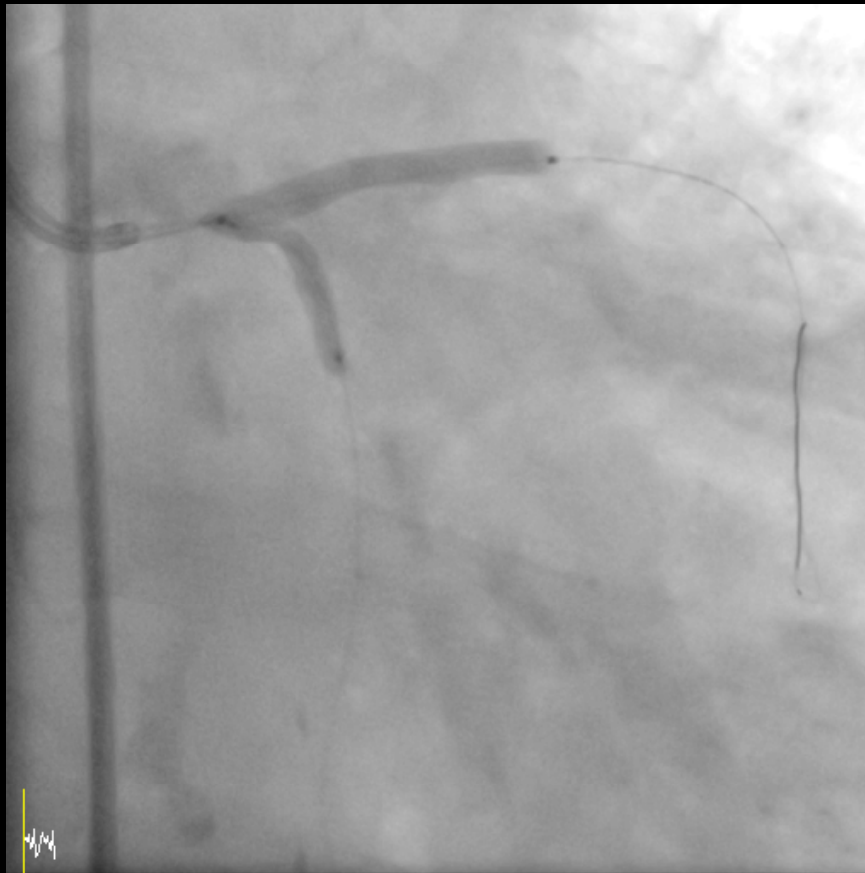
Not Simultaneous but sequential Kissing Stents with 7 Fr Guiding catheter system



LAD stent position  
With anchor balloon  
technique  
(Endeavor R 3.0/30)

# 2 stents strategy (Kissing stents)

Not Simultaneous but sequential Kissing Stents with 7 Fr Guiding catheter system



Kissing stent balloon  
inflation

# 2 stents strategy (Kissing stents)

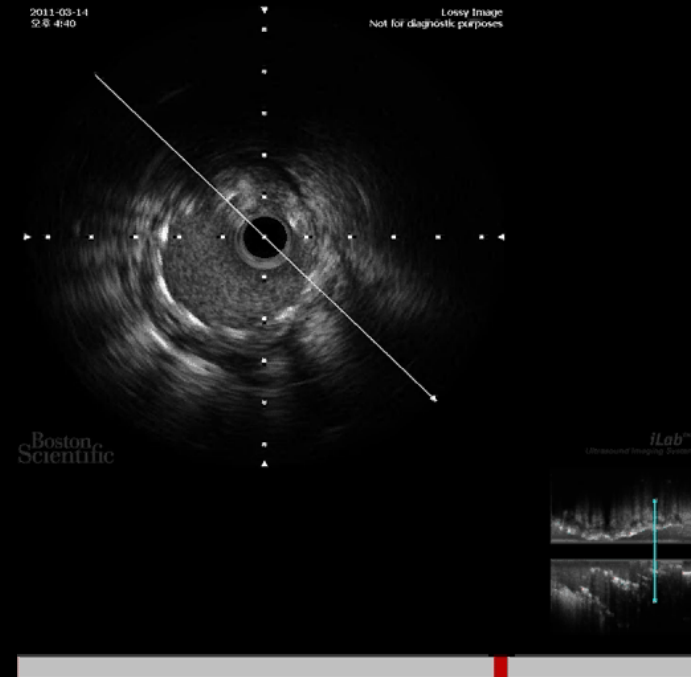
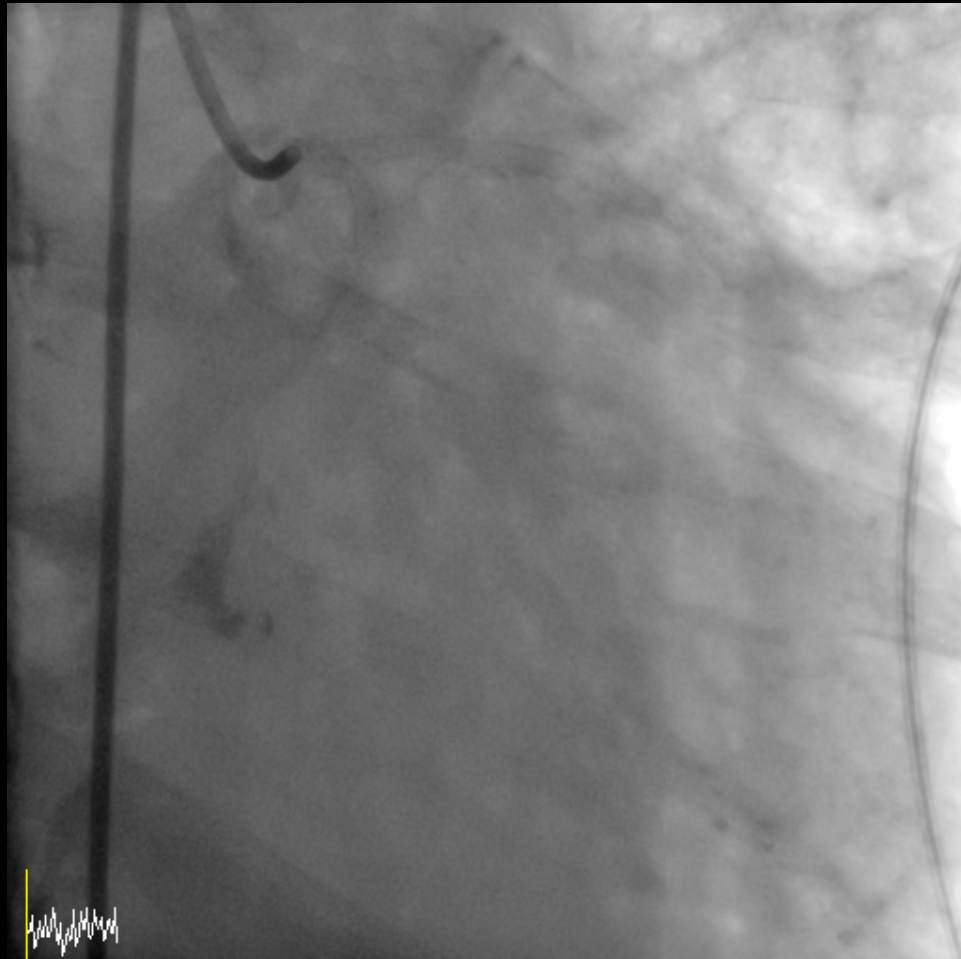
Additional stent at pm LAD to cover the distal lesion



Additional mLAD stenting  
(Endeavor R 3.0/38)

# 2 stents strategy (Kissing stents)

Final result



# Post PCI 2days Echo FU

Recover over 3 days



JEONG, GI HYEON: 116140155  
PNUYH

23 Mar 11

1:57:30 pm

4V1c-S 42Hz

H3.75MHz 140mm

ADULT ECHO

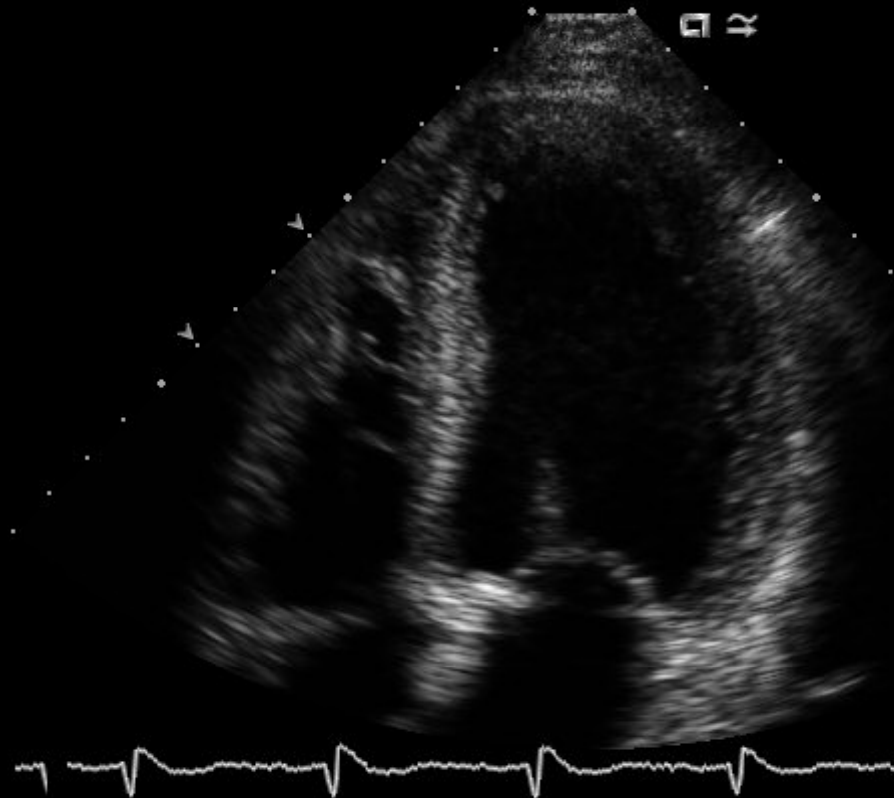
General

60dB S1/ 0/1/4

Gain= 20dB Δ=1

Store in progress

HR= 71bpm



EF 40%

Thank you for your attention