



TCTAP – Angioplasty Summit 2012

Dr Prathap Kumar,
Meditrina hospital
Trivandrum- India.

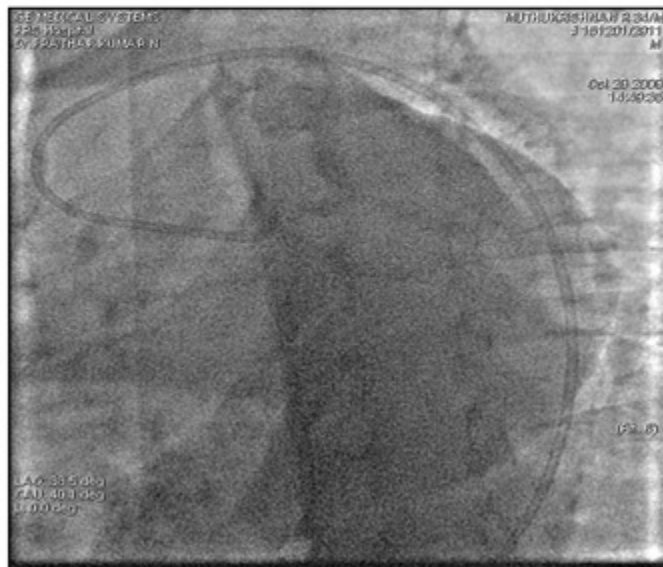
Clinical Information

- Patient Initials:
 - Muthukrishnan R 34 / M
- Relevant Clinical History & Physical Exam:
 - Unstable Angina
 - 2 months class III
no h/o DM, HTN, or IHD strong family history.
 - clinical exam - CVS normal
- Relevant Test results Prior to Catheterization
 - ECG - WNL
 - TMT - strongly positive
 - ECHO - normal

Relevant Catheterization findings

- CAG
 - LMCA –distally tapering
 - LAD - Ostial 70%
 - LCX - Ostial 100%
 - RCA- Anomalous origin , proximal 95%

Diagnostic angiogram





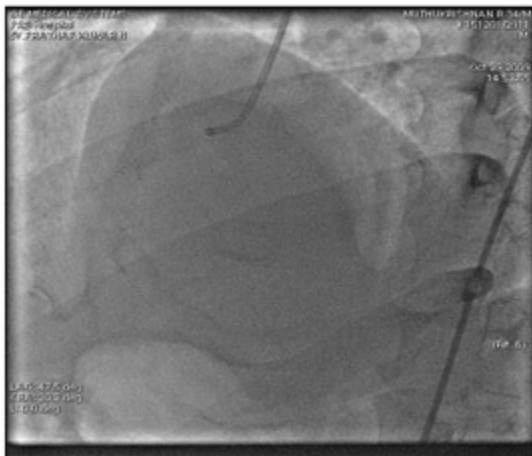
REMEDIAL SYSTEMS
PFC 30-pan
COPPATHAP YUMAR N

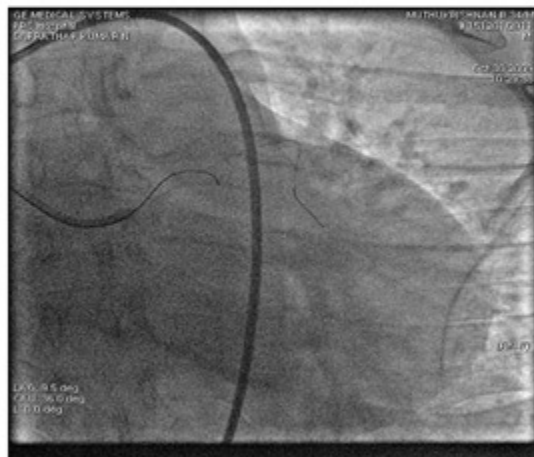
MUTHUKRISHNAN R 04/11
91010172010
71

oct 25 2009
14:49:22

(52.5)

RAO: 7.3 deg
CAU: 40.7 deg
L: 0.0 deg





- LCA cannulated with XB 3.5 guide
- Tried with miracle 4.5 , and 6 guidewire to open the LCX,

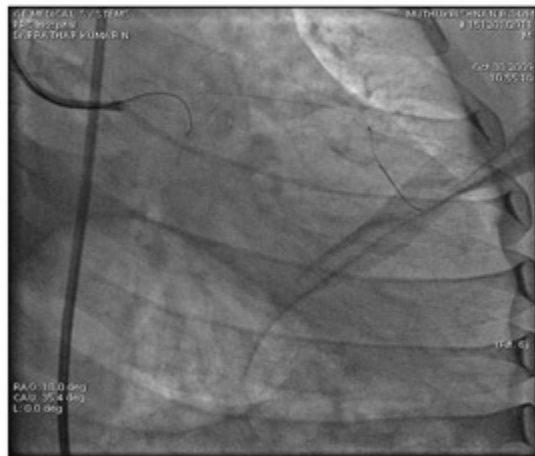
GE MEDICAL SYSTEMS
EPI MGRPH
C/EP/TX/T/P/0/0/0

MULTIPLANAR D 3434
151201211
W

04/01/2015
10:47:15

12/1/15

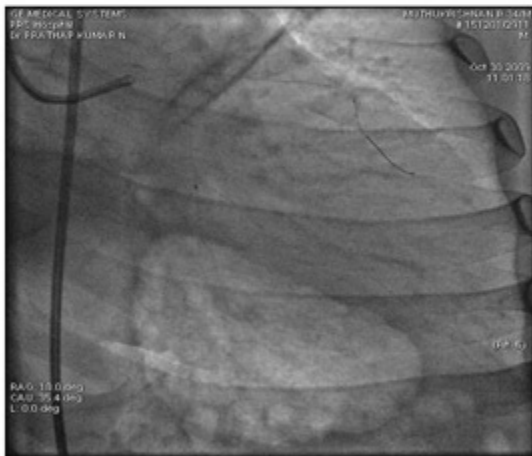
RAO: 10.0 deg
CAU: 35.4 deg
L: 0.0 deg



- then tried with conquest pro 12 with the help of a OTW balloon.



- Removed conquest pro wire



- Dilated with OTW



GE MEDICAL SYSTEMS
EPIC Imaging
Dr. PRADEEP KUMAR N

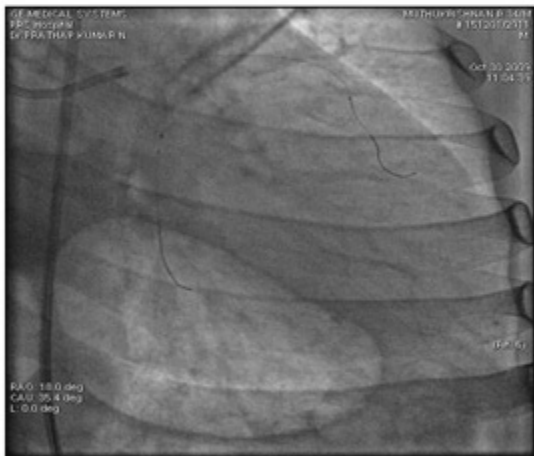
MR. HEMU KISHAN B. SAINI
1512010211
M

Oct 30 2024
11:01:44

(R, 6)

RAO: 18.0 deg
CAW: 35.4 deg
L: 0.0 deg

www.ge.com



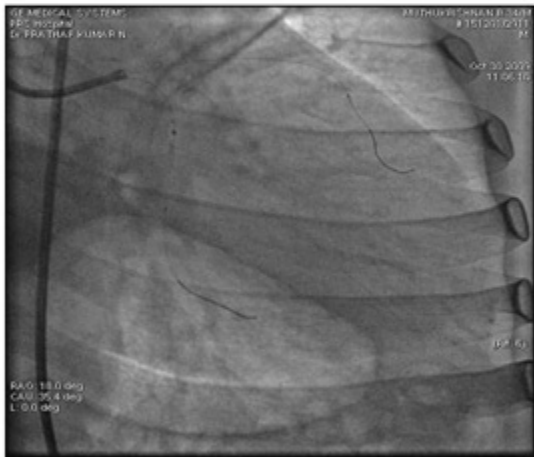
GE MEDICAL SYSTEMS
EC: mcpknl
Dr. PRATHAP KUMAR N

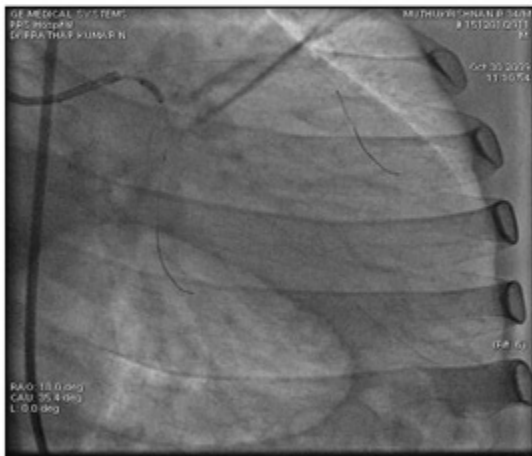
83760493000000000000
1512012111
M

04/30/2012
11:06:10

MVA

RAO: 58.0 deg
CAU: 35.4 deg
L: 0.0 deg





- Proximally dilated with 2mm balloon





- Dilatation with 2.5 mm balloon



- Large CX & OM seen



- One more wire in OM and other wire in main CX

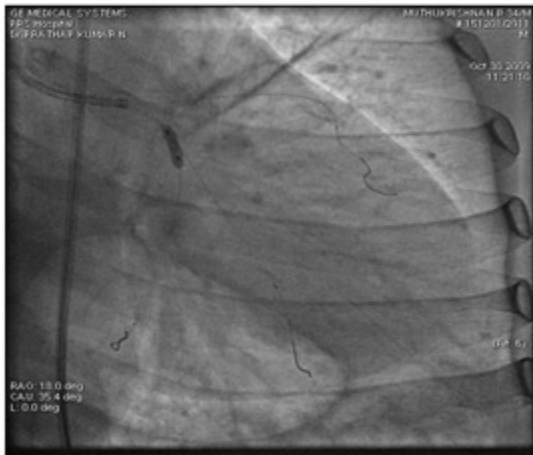
GE MEDICAL SYSTEMS
EPI INSPIRE
SIRIPATHAKUMARIN

MR. THIRUPATHAN P. SATHI
3512012111
M

Oct 30 2009
11:21:10

0.7 67

RAO: 18.0 deg
CA: 35.4 deg
L: 0.0 deg



GE MEDICAL SYSTEMS
FC: mcpkms
LTPA THA F KUMS R N

MR THUKPORNEN B 341M
3512012111
H

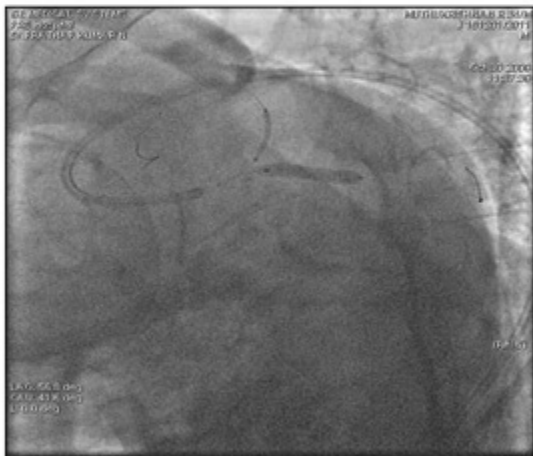
Oct 30 2015
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IT 1.50

RAO 18.0 deg
CAW 35.4 deg
L 0.0 deg

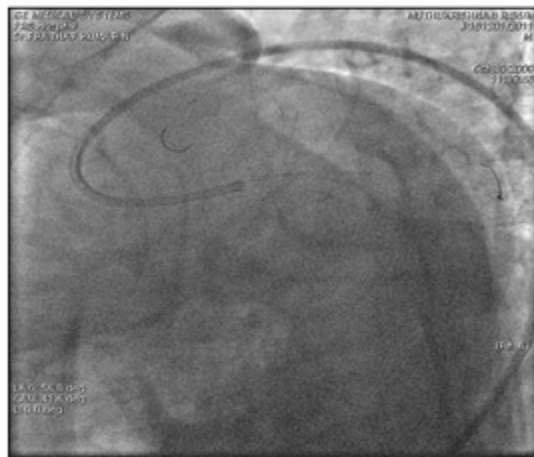




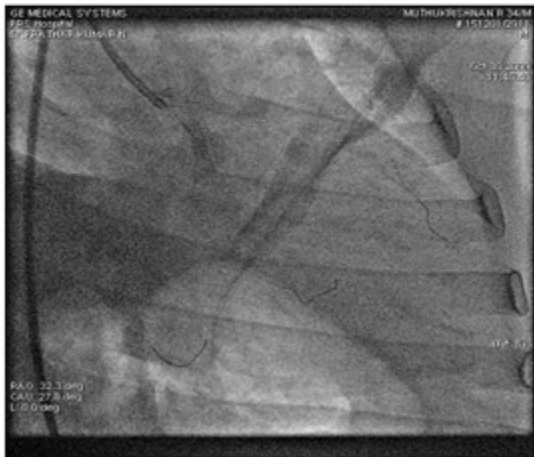




- Both inflated together



good result with TIMI 3 flow





GE MEDICAL SYSTEMS
EPC module
Sv PRATHAK KUMAR N

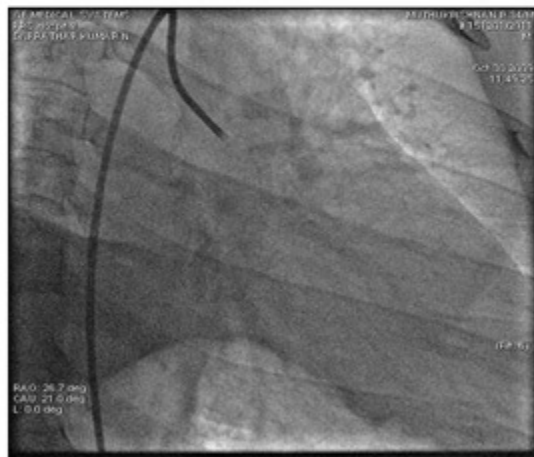
AT THEEKKONKUN B-0011
1512010211
M

06/05/2014
11:44:12

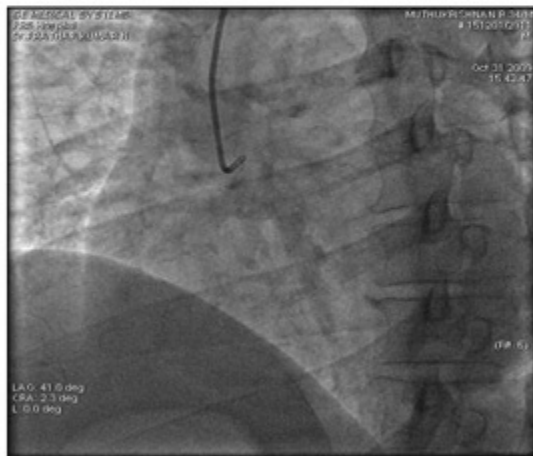
07/07

RAO: 16.2 DEG
CAW: 41.5 DEG
L: 0.0 DEG





- Trying to cannulate RCA with different catheter



- Finally cannulated with tiger catheter

Dr. MEDICAL COLLEGE
FC - Hospital
Dr. PRATHAP KUMAR N

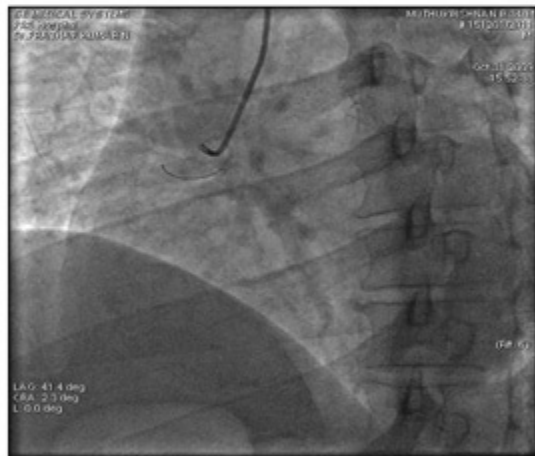
Dr. Praveen Kumar N
3512010211
M

Oct 31 2009
15:41:06

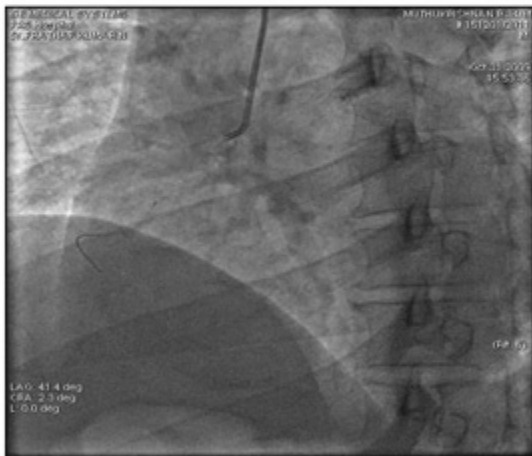
1/2/10

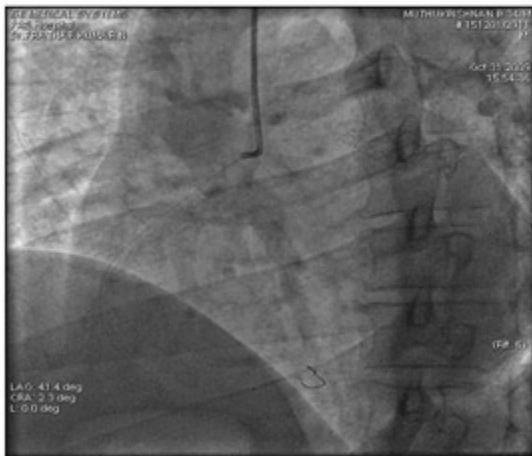
RAO: 35.4 deg
CRA: 2.3 deg
L: 0.0 deg

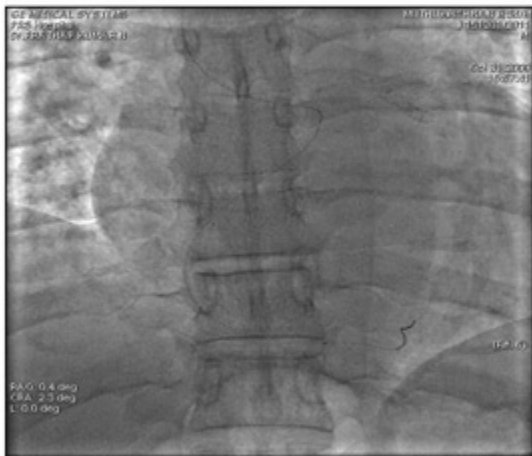




- By rotating the catheter , put a 300 cm whisper guidewire

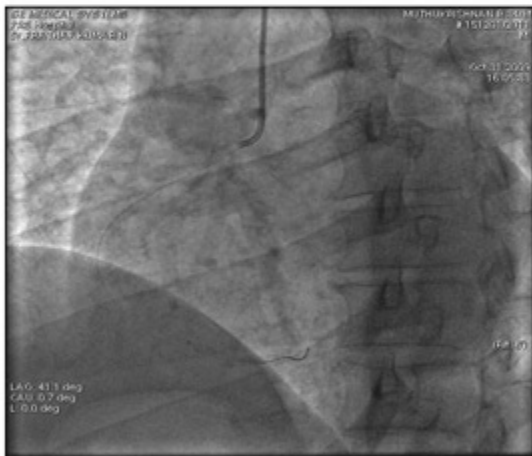


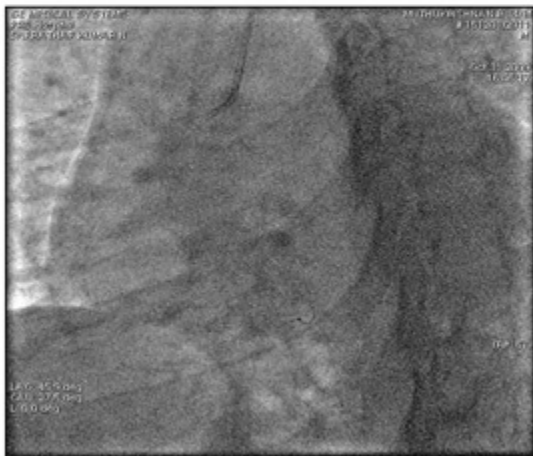


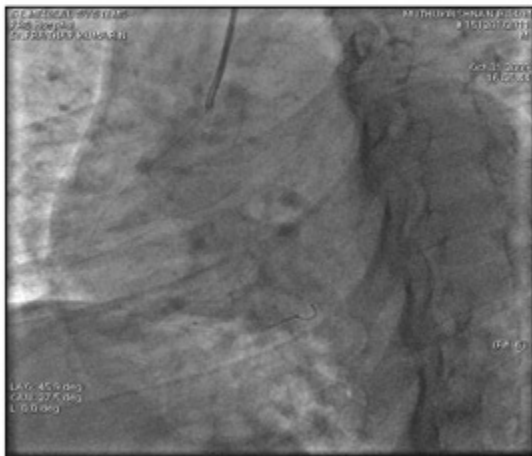


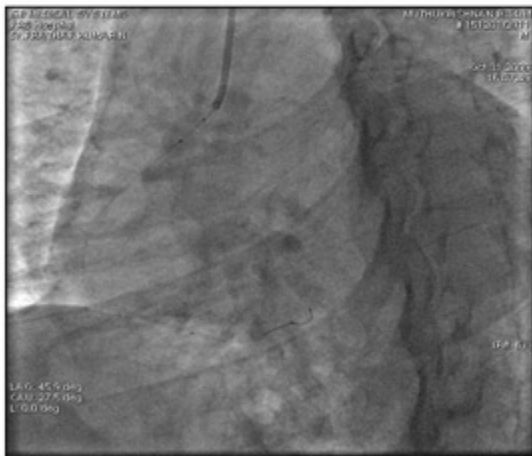


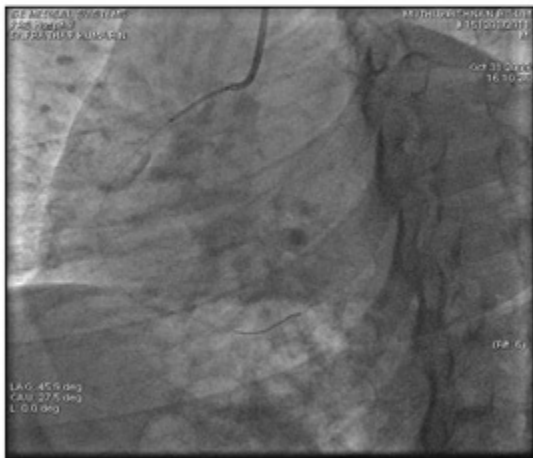


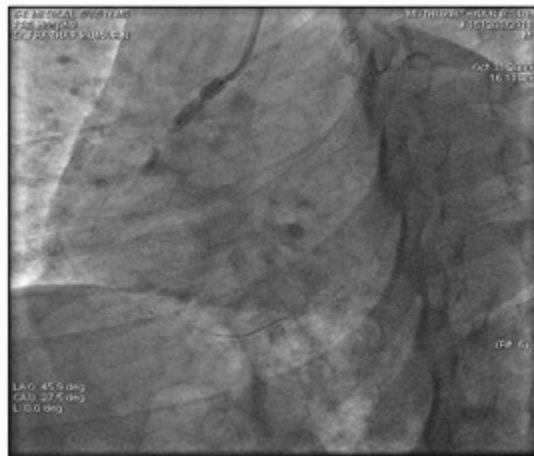








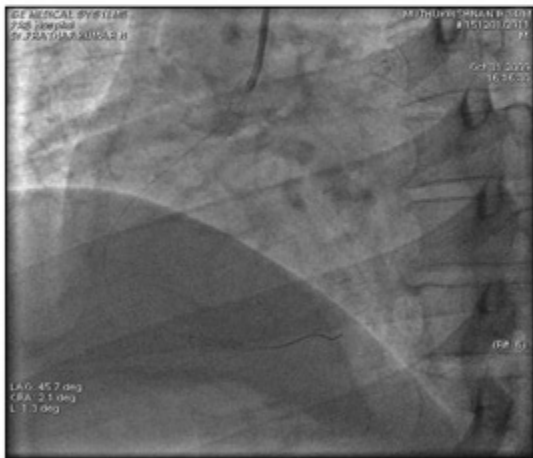


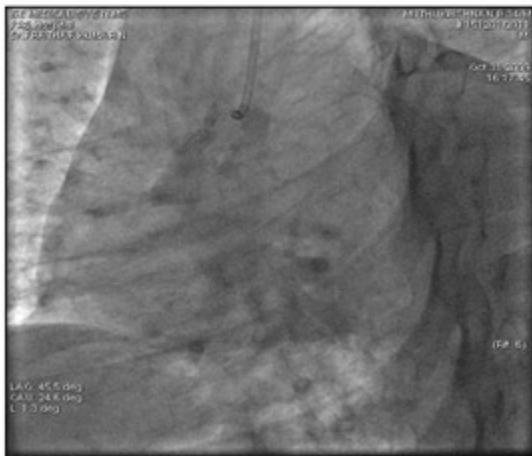


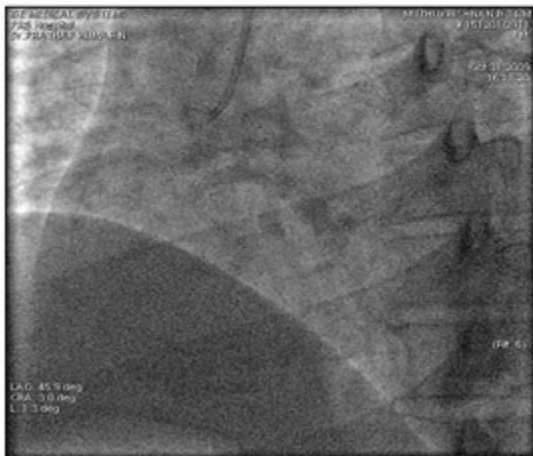
- Exchanged the diagnostic catheter to JR 6F guide and then dilated with 2.5 balloon











Interventional Management

- .
- Did Pre- dilation with series of balloons ranging from 1.5, 1.5., 2. and 2.5 mm. Then by putting a wire in the LAD, we dilated both LAD and LCX.
- Then 2 DES were deployed into LAD and LCX up to the ostium and produced an excellent result.
- RCA was cannulated with difficulty with a tiger 5F diagnostic catheter after exchanging nearly 11 catheters.
- Whisper guidewire of 300 cm put through diagnostic catheter then exchanged the diagnostic catheter for JR guide catheter and then lesion was dilated with balloon and then stented with a DES.
- Excellent result with TIMI III flow obtained

Conclusion

CTO of ostial CX is tough to do, but possible.
Usage of diagnostic catheter with a long guide wire
useful in stenting anomalous coronary artery