

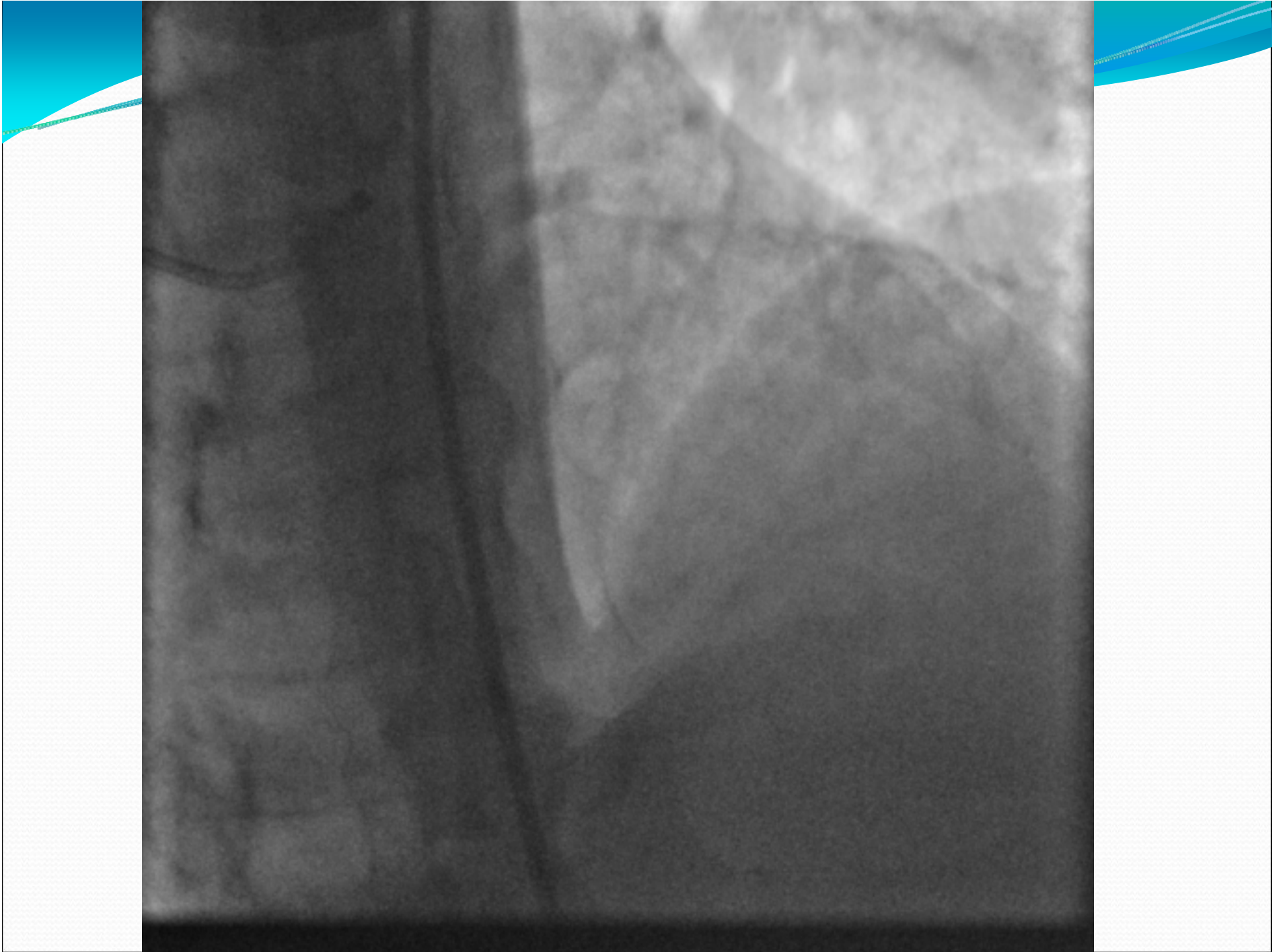
# Bifurcation PCI made simple

## A Case report raising many questions

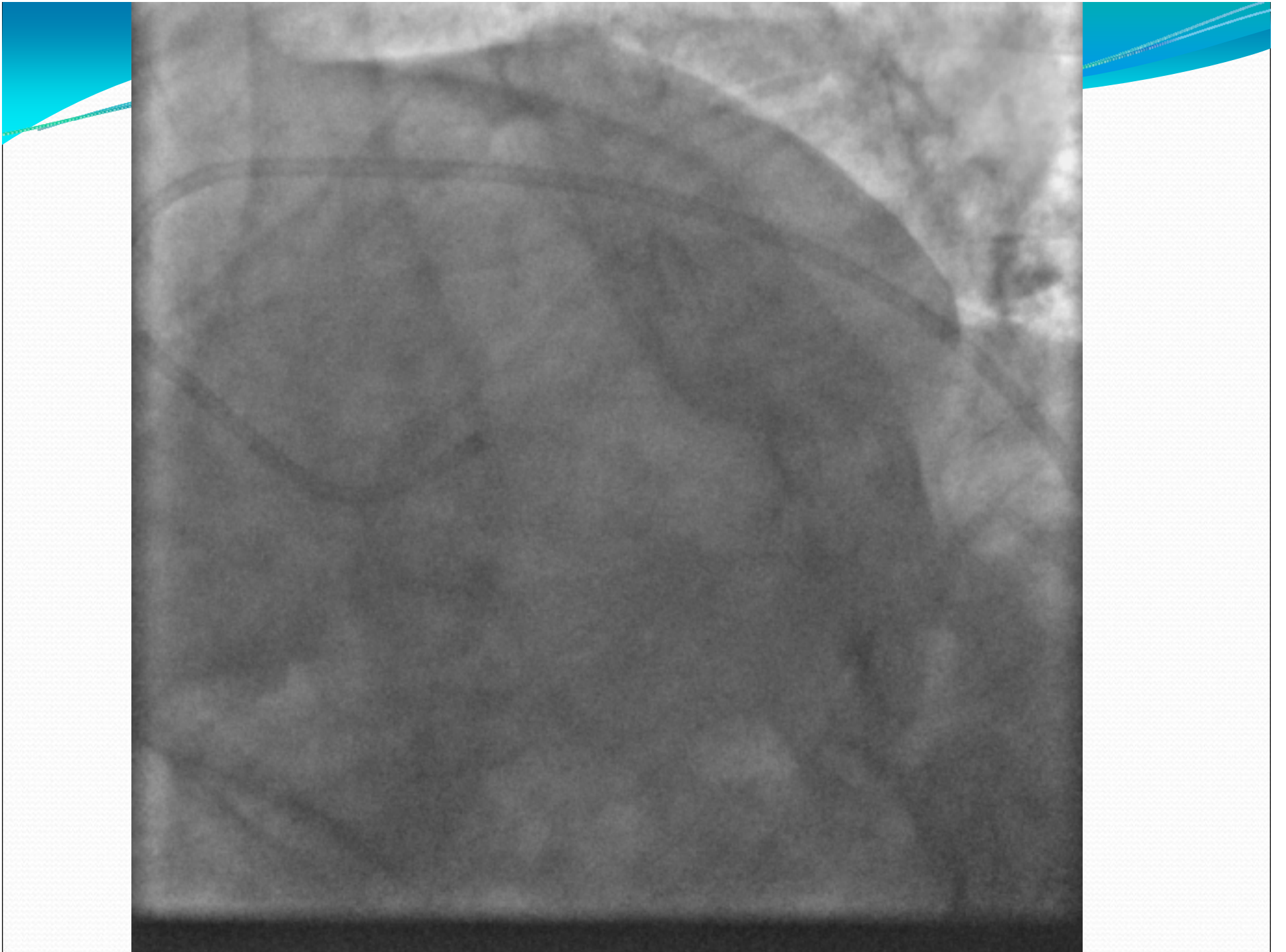
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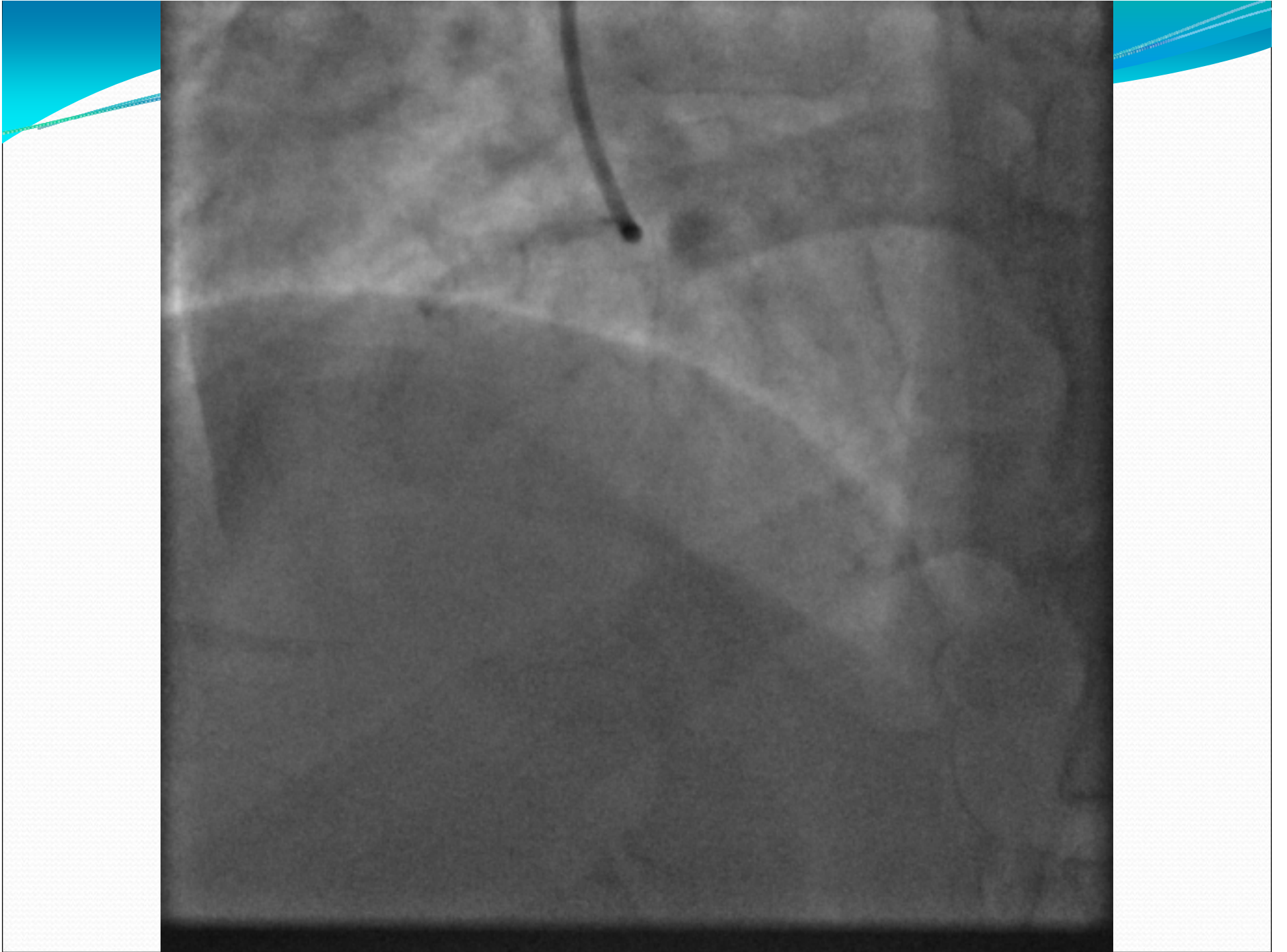
# Case report

- Mr IM a 50 year old heavy smoking tourist guide without other risk factors, severe de novo effort angina.
- Coronary angiography on 4/4/2011, a bifurcation LAD/D1 stenosis and a critical ostial (bifurcation)PDA stenosis.
- Patient referred to CABG.









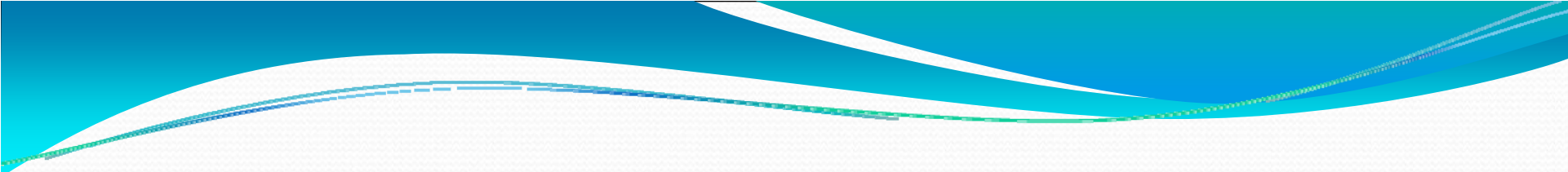
# Patient asks questions, Doc A answers

- Q: Is there any other option than having surgery?
- A: Yes, we “can” perform stenting, but is risky and expensive.
- Q: More risky than surgery?
- A: Yes!
- Q: Don't worry about the cost Doc, talk science to me, the price of my chest getting opened is very high in MY eyes.
- A: its better for you on the long term.
- Q: do you mind if I get another opinion?
- A: no, go ahead, good luck, call me anytime.

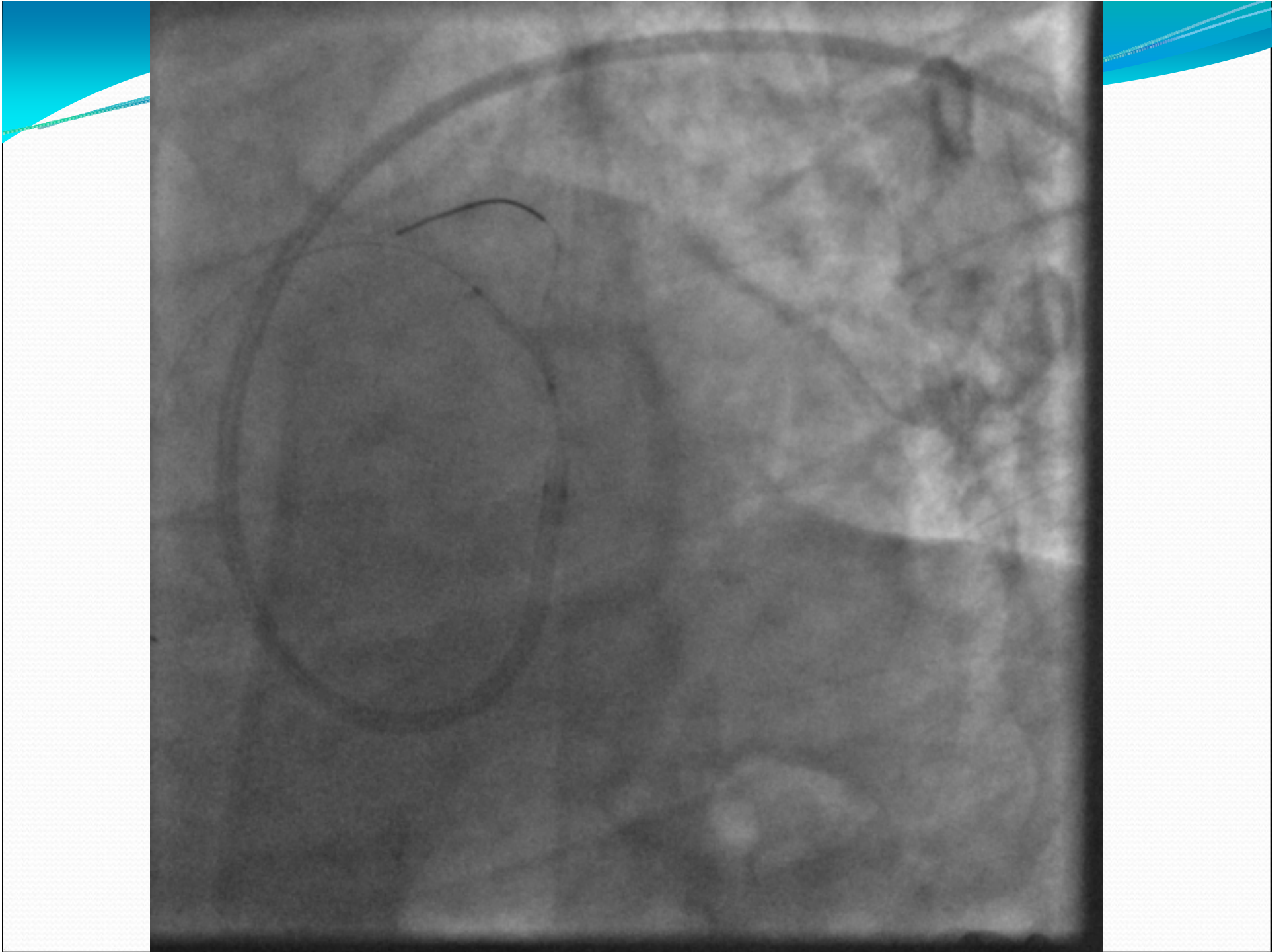


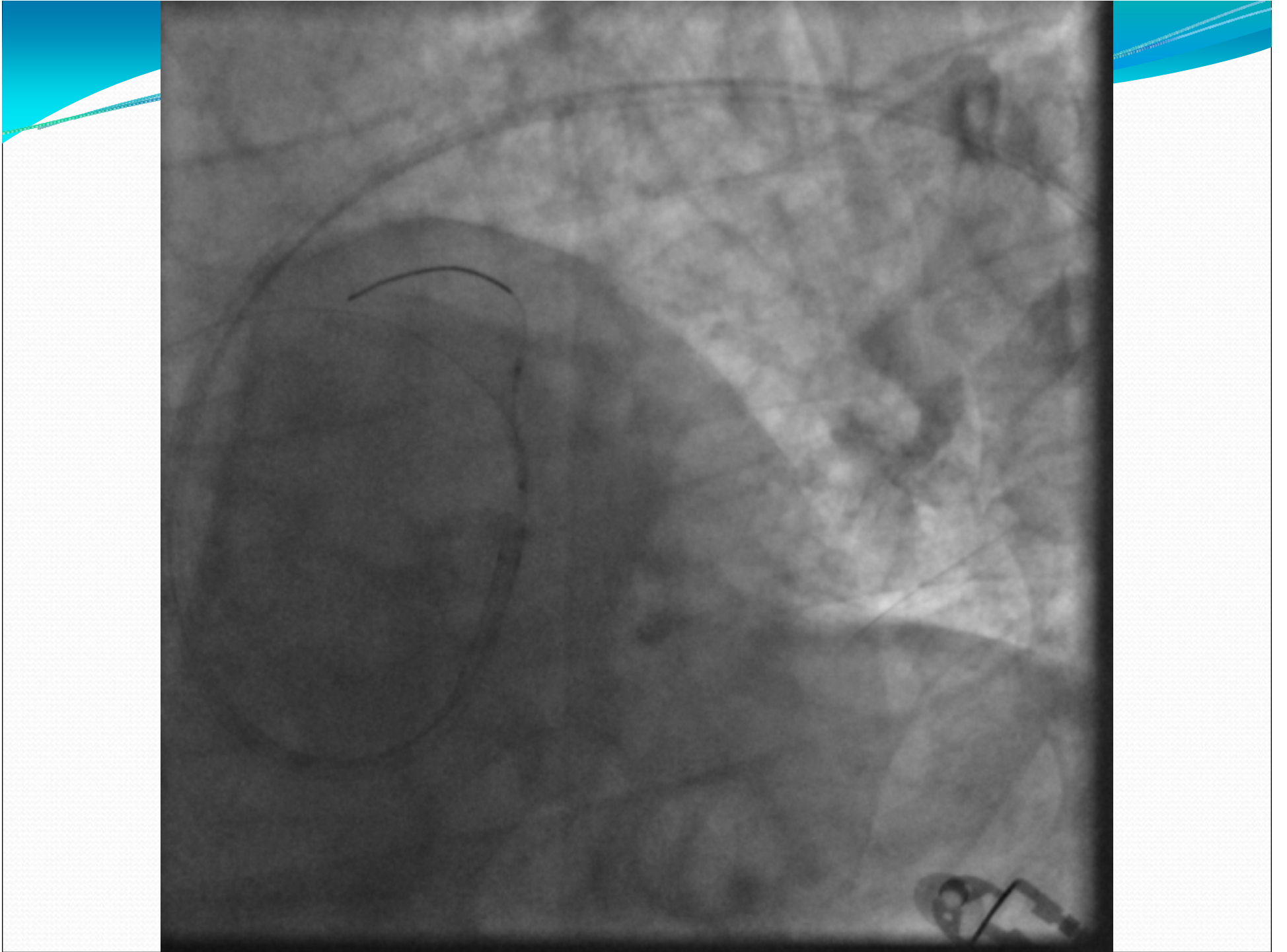
## Q&A to Doc B (me)

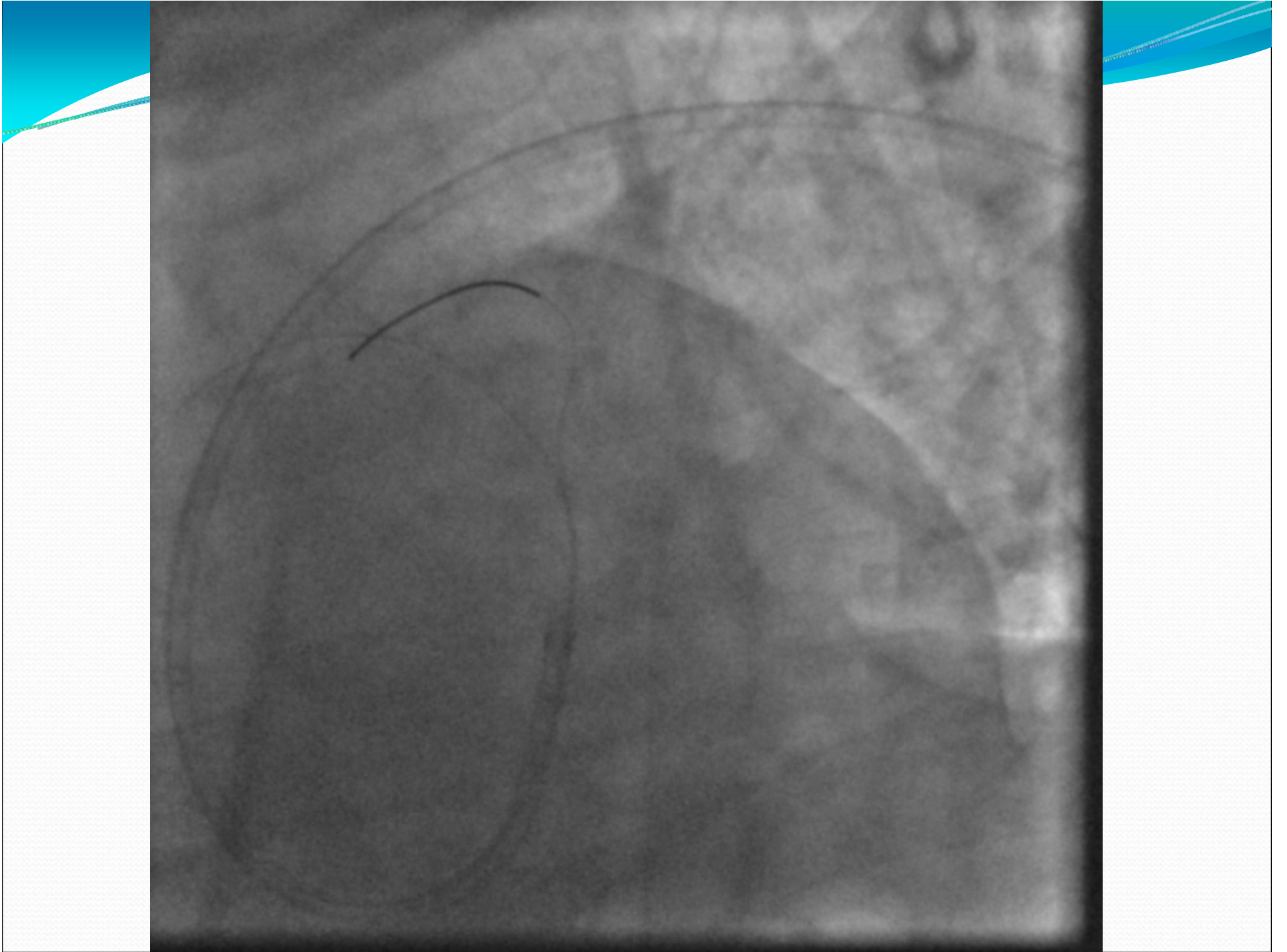
- Q: is there another alternative to surgery?
- A: yes, PCI with DES is a good alternative, CABG is the classical treatment, but PCI is a valid option in your case.
- Q: the Doc A said it was technically very difficult because it is branching points.
- A: It is not simple, but is doable, and yes the branching points pose some challenge, both long and short terms.
- What do you think is best for me Doc?

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- Doc B: you have to decide, btw, did anyone tell you that even surgery poses a risk of repeat procedures albeit less than that of PCI?
  - Patient: no, I thought surgery was a permanent solution.
  - Doc: no its just statistically better on long term.
  - Patient: can you do the PCI, I simply can not bear the thought of my chest getting opened and cant afford to be off work for one month.

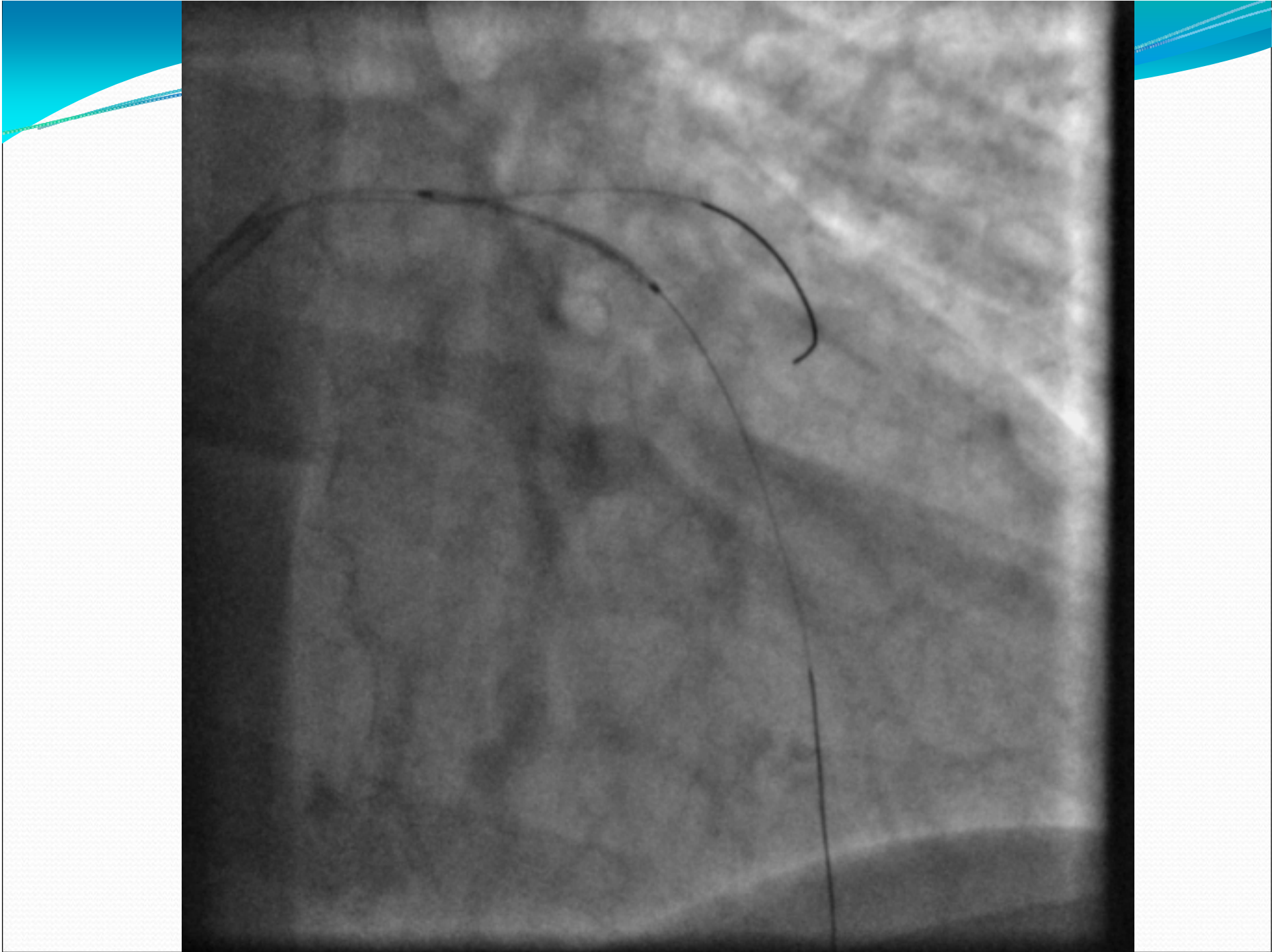


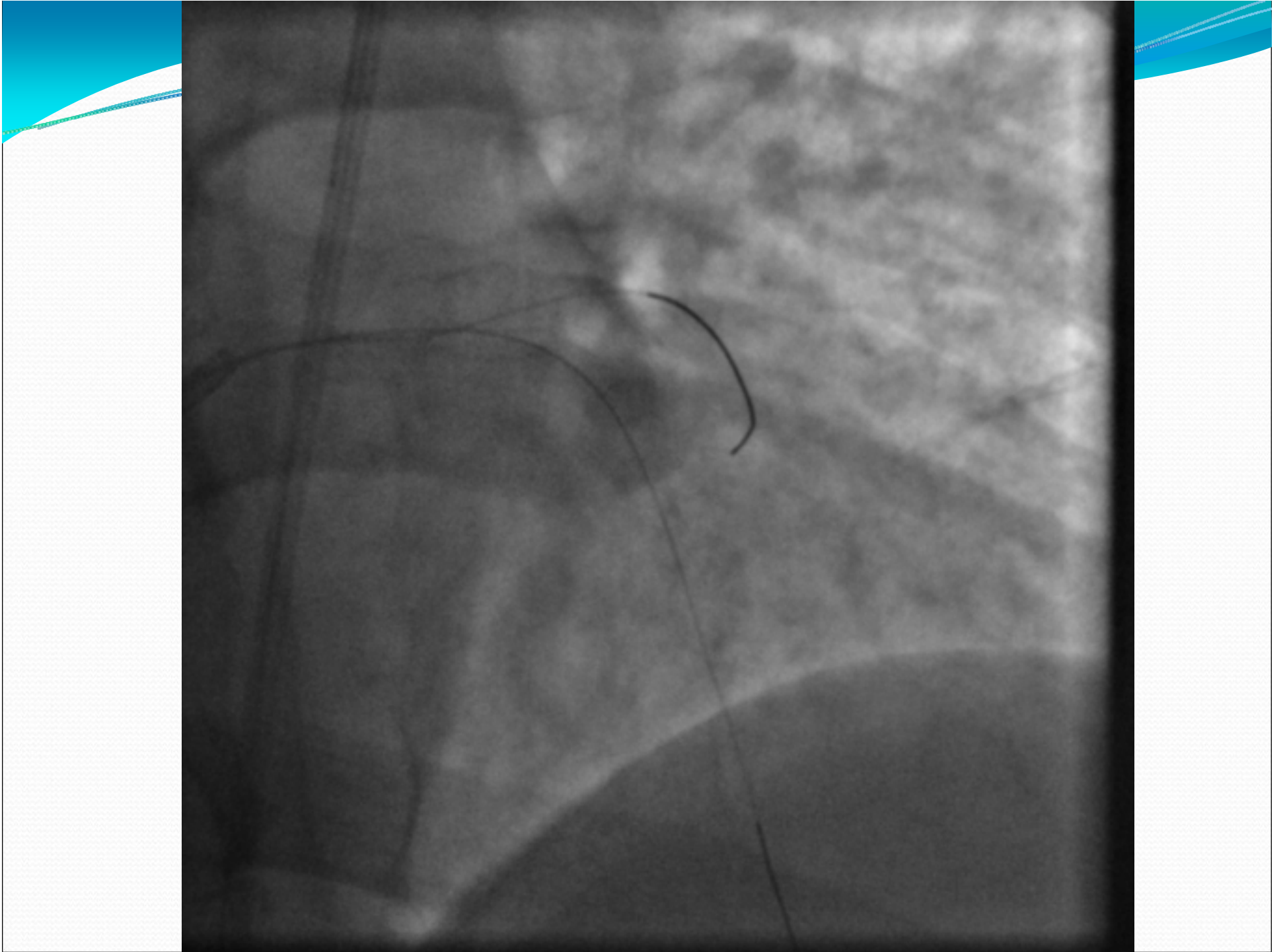


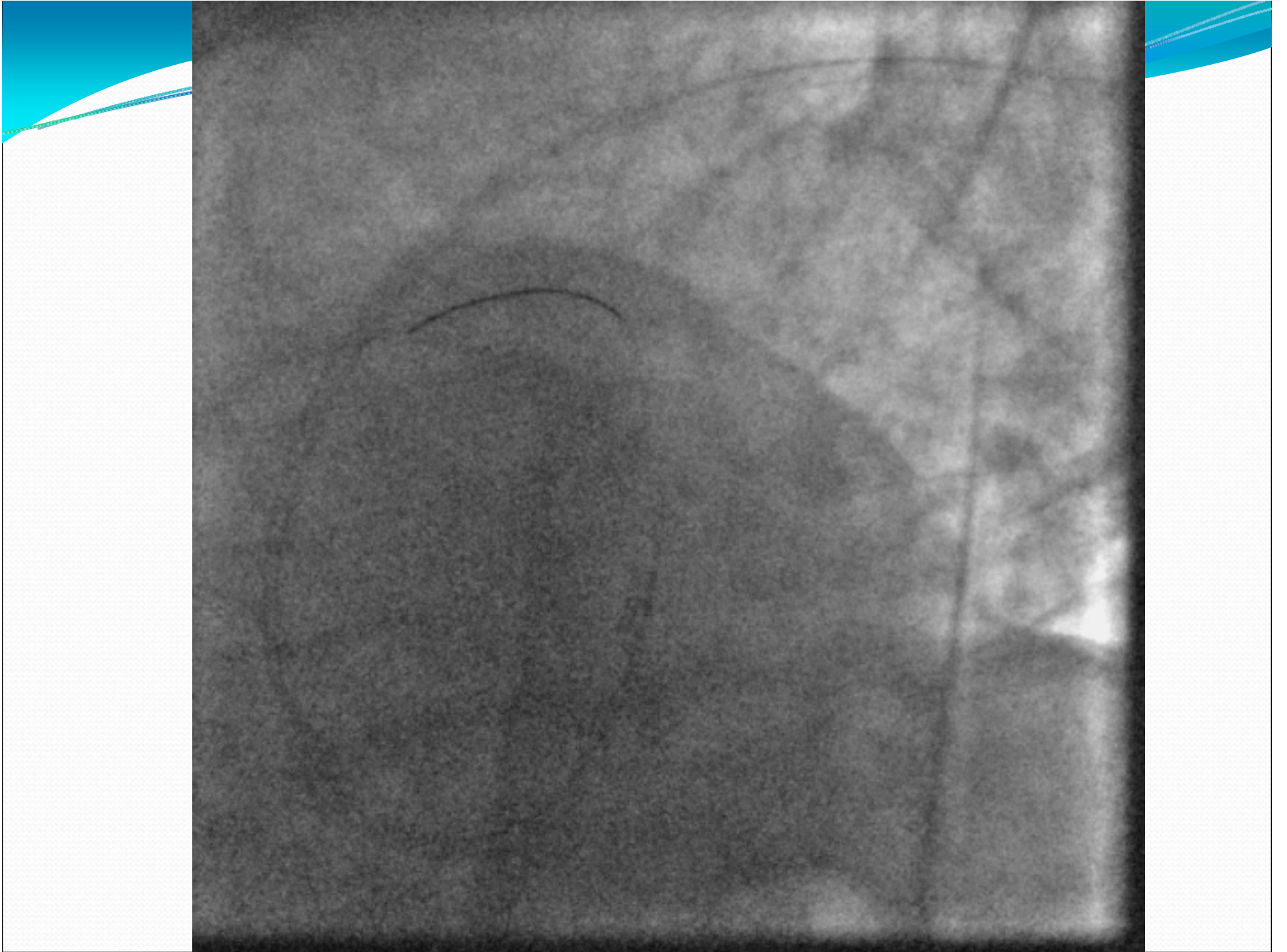




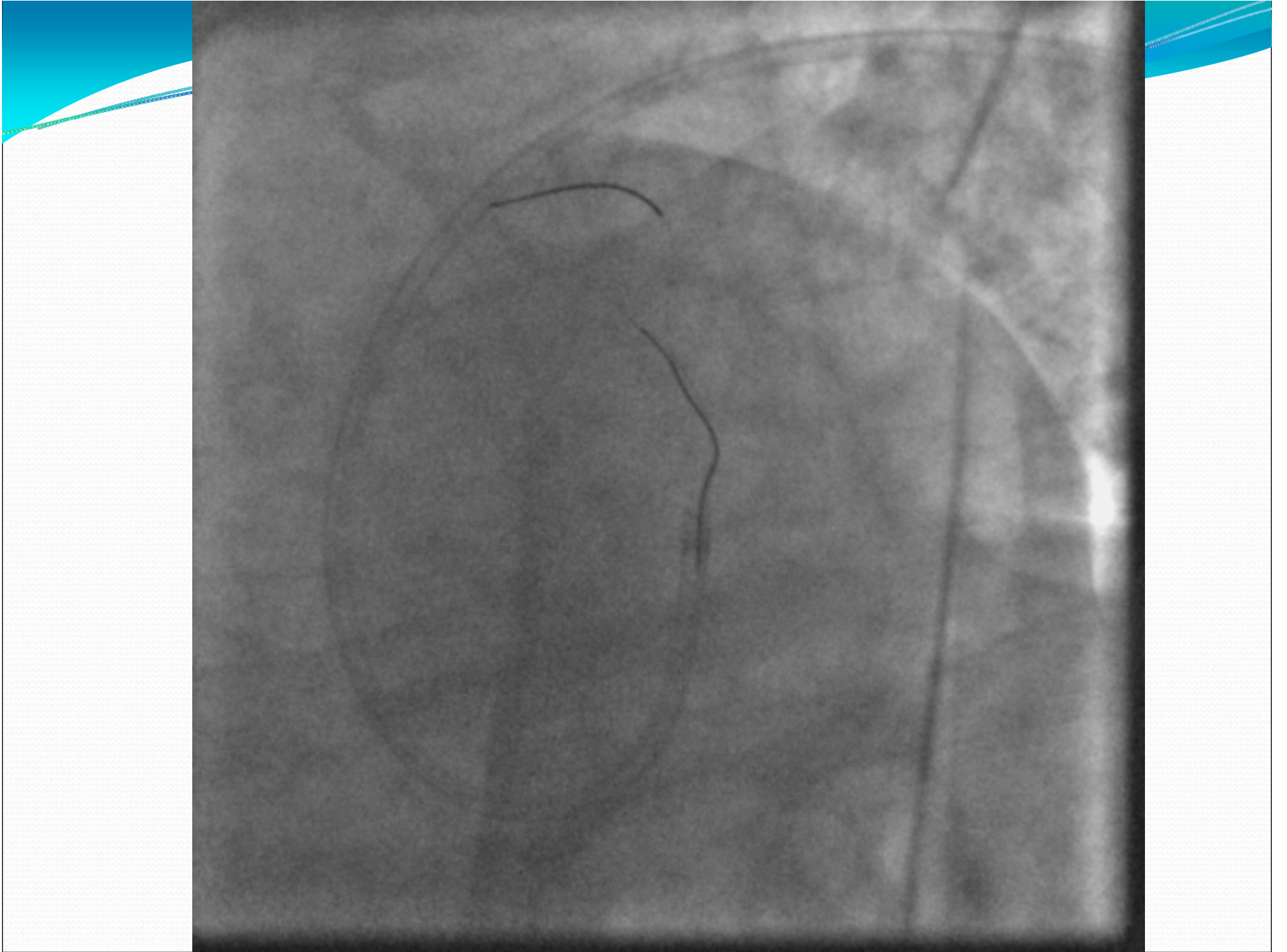


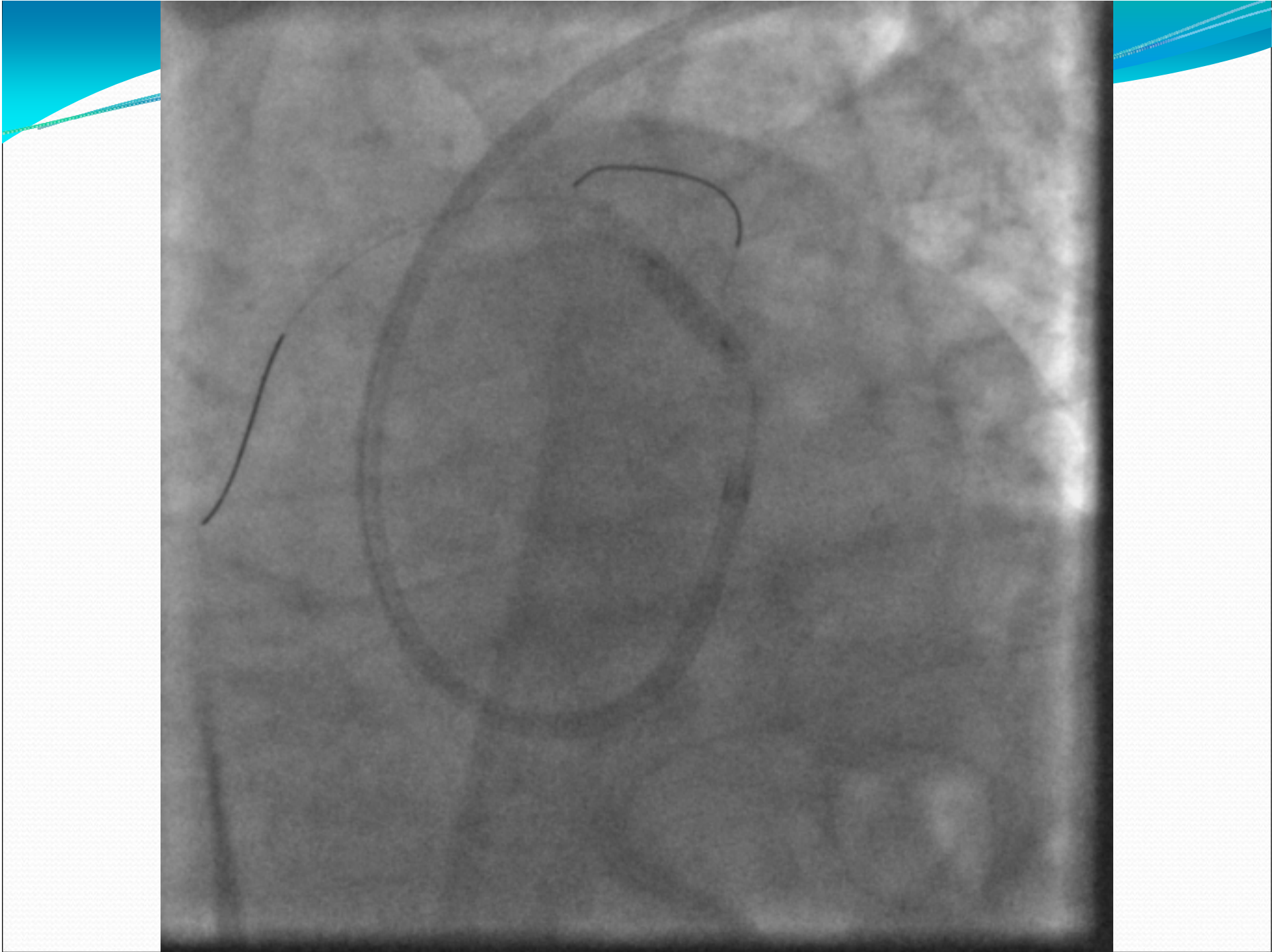


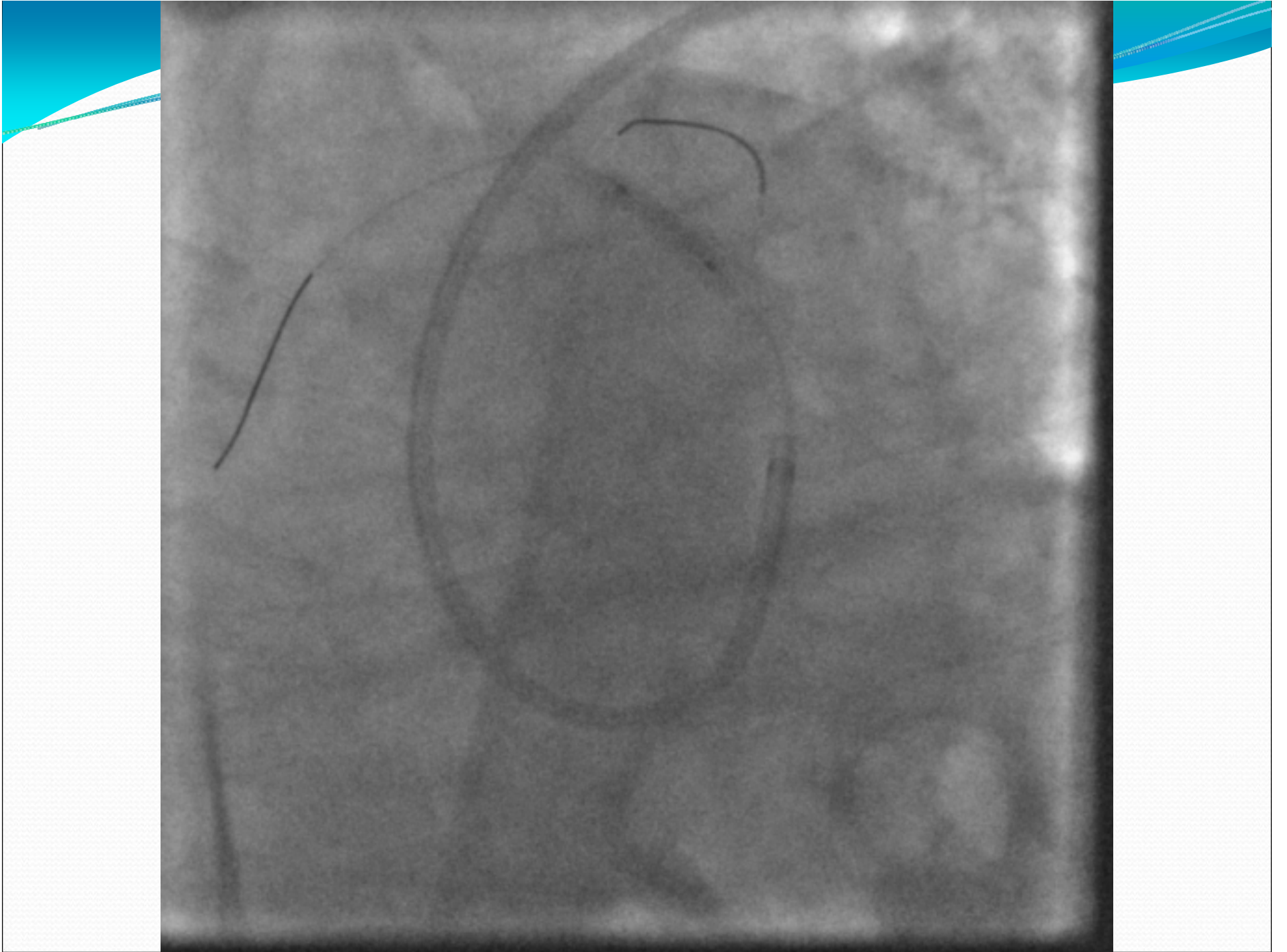




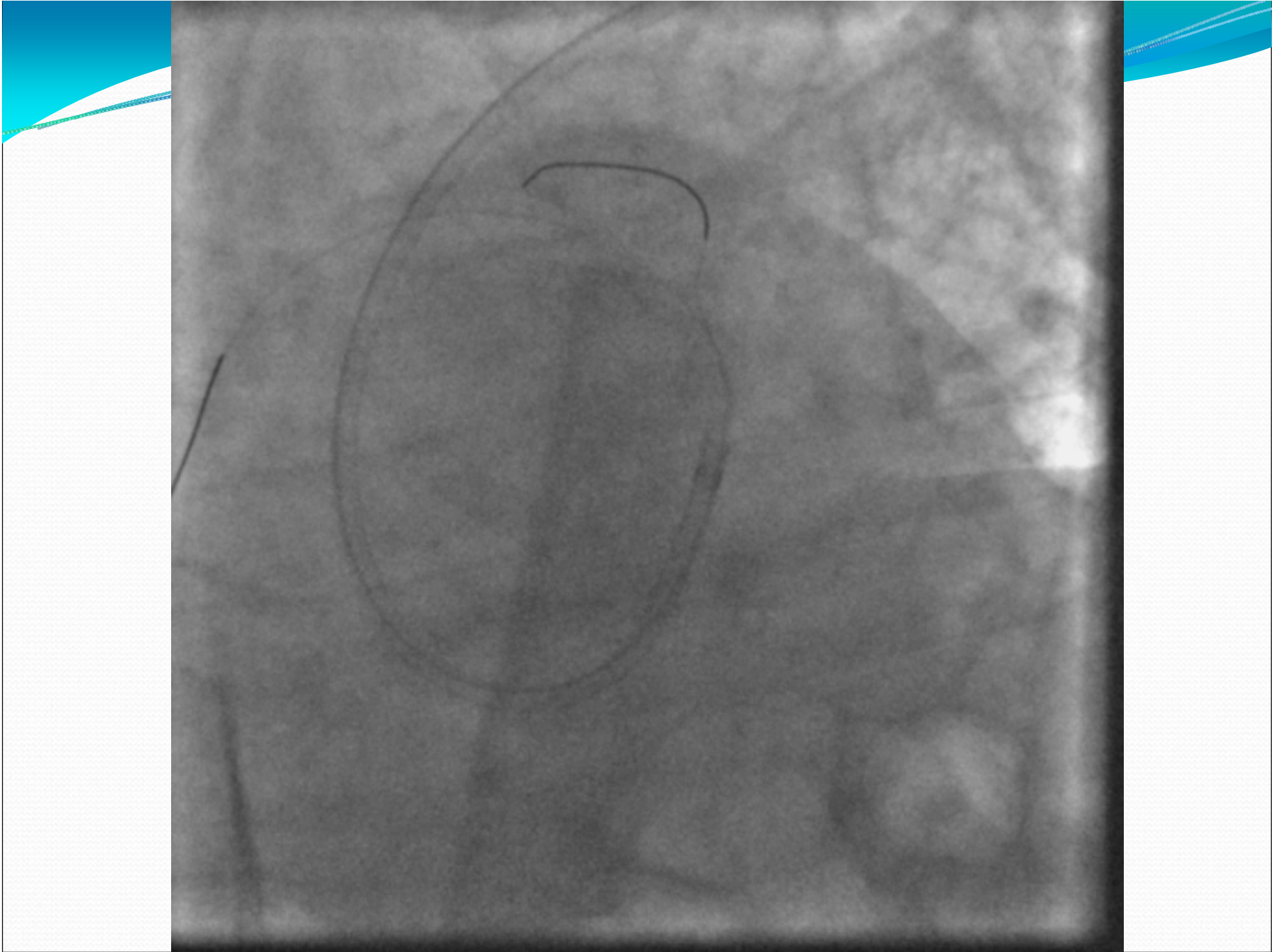


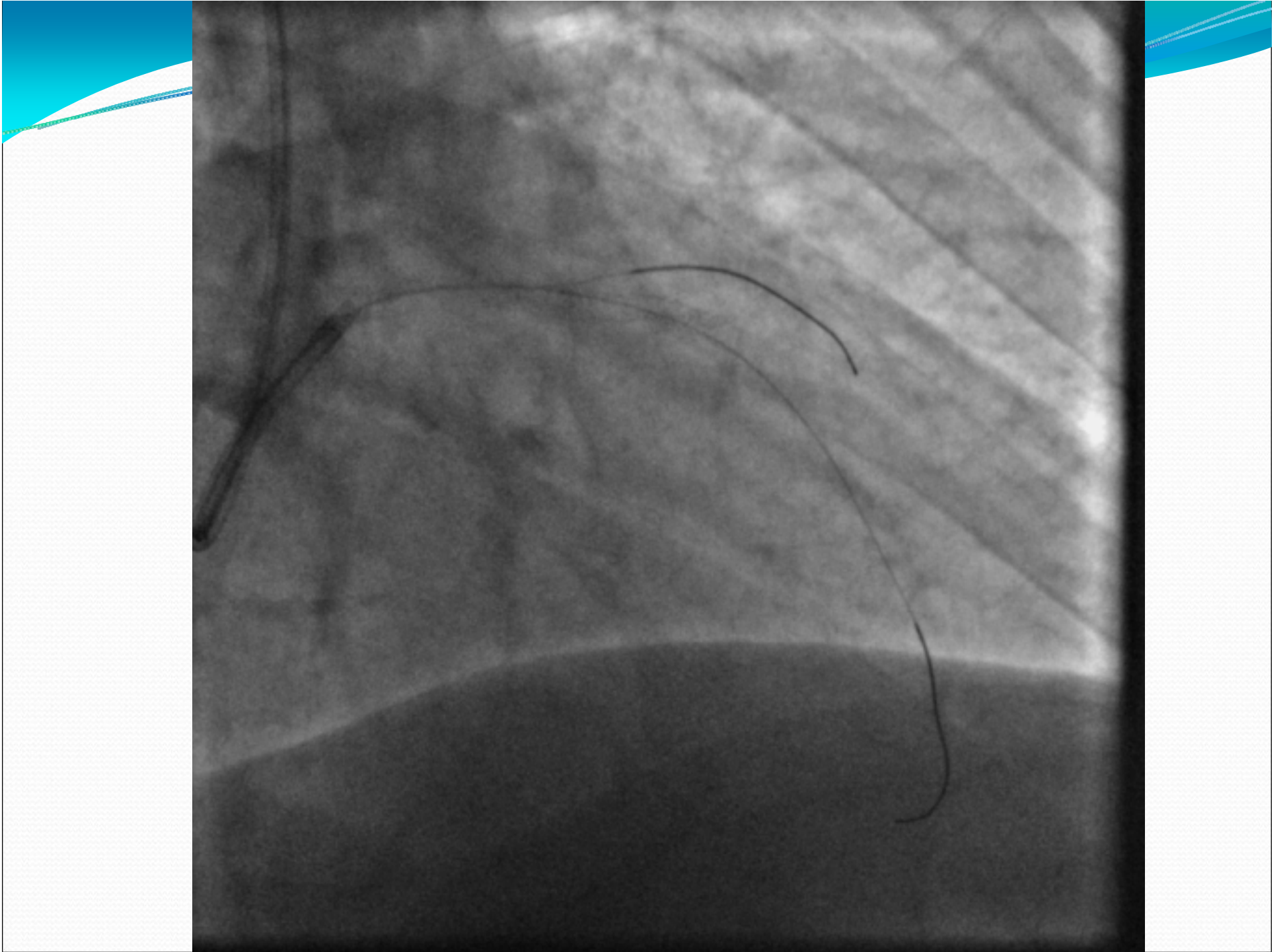


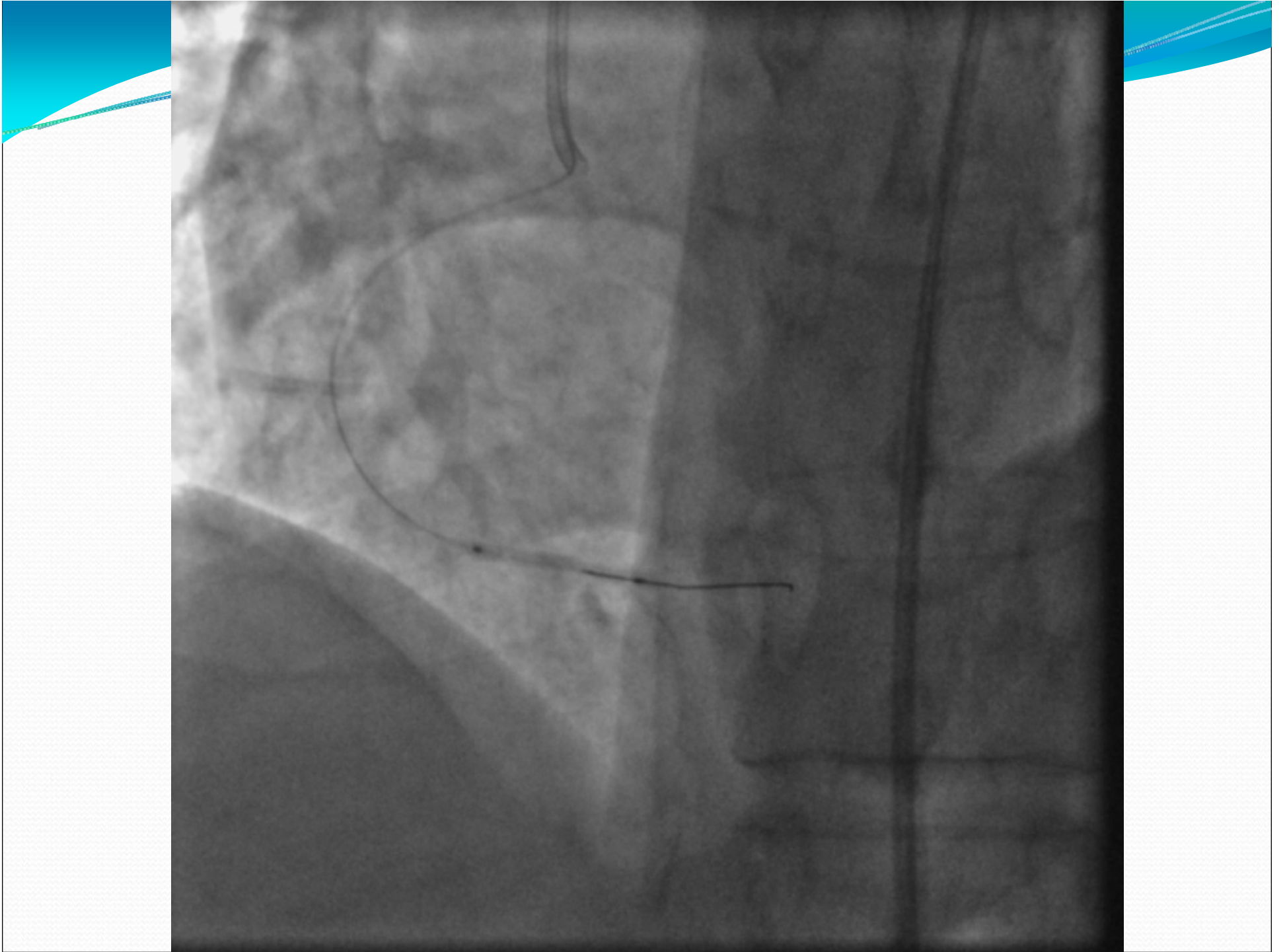






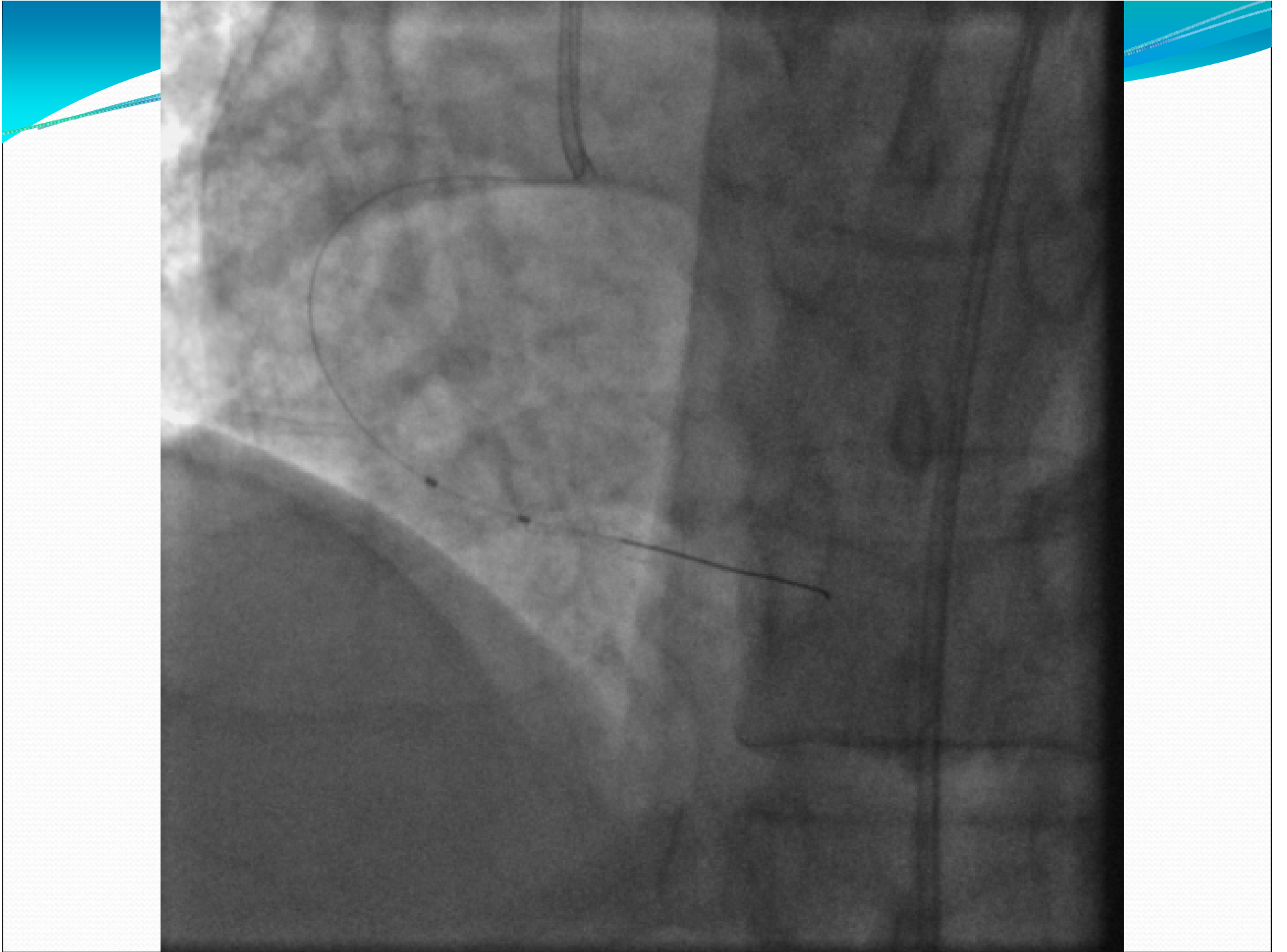










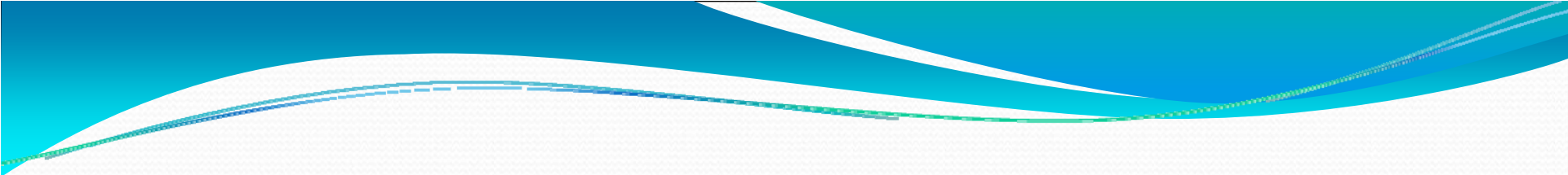






# More Questions:

- How did it go?
- Really, very well? In 40 minutes? It's really over?
- Is this really it? Now you tell me its as good as CABG?
- YOU MEAN YOU WERE GOING TO ACTUALLY LET ME HAVE MY CHEST OPENED? I DON'T KNOW IF I SHOULD THANK YOU OR IF I SHOULD SUE YOU?!
- Comment: You doctors should be me more definitive about my treatment options, I am a patient, I don't feel very qualified to decide, honestly, I feel you and the previous doctor almost misguided me!

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- Why? Why did the previous doctor tell me it was technically challenging due to the branching? Obviously all those procedures have some degree of challenge and require skill.
  - Why were you both going to allow me to have my chest opened by a surgeon, when after 40 minutes of minimal discomfort if any, you now say that what I have is almost as good as surgery? I nearly accepted having the surgery and I am unhappy about that.
  - I feel there was a degree of randomness in the way that such an important decision was taken.



# Final Slide

- Do we have enough standardization to allow the patients to truly give an informed consent to what revascularization modality is truly best for them?
- Is that simply because we do not know ourselves what is best?