

# Left Main Ostial Stenosis after Aortic Valve Replacement

*Treated with Stenting*

***Seung-Jung Park, MD, PhD, FACC***

**Professor of Internal Medicine  
Asan Medical Center, *Seoul, Korea***

# Incidence of LMCA Ostial Stenosis After AVR

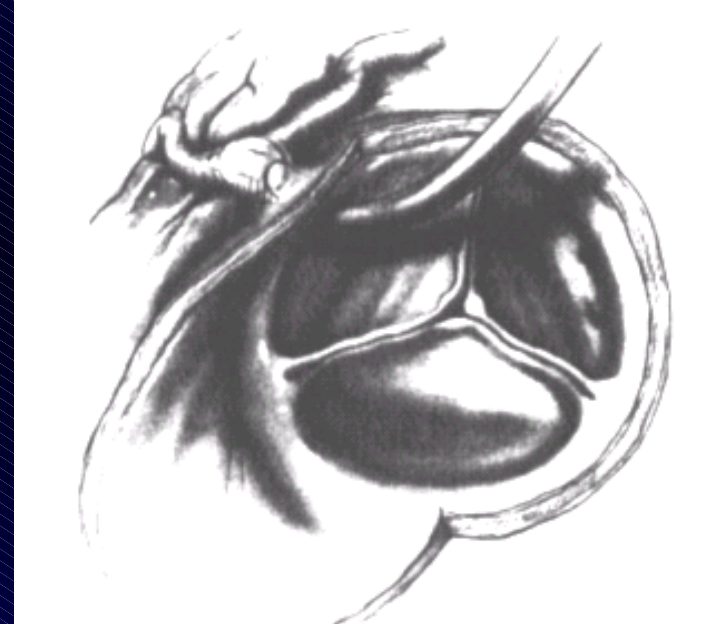
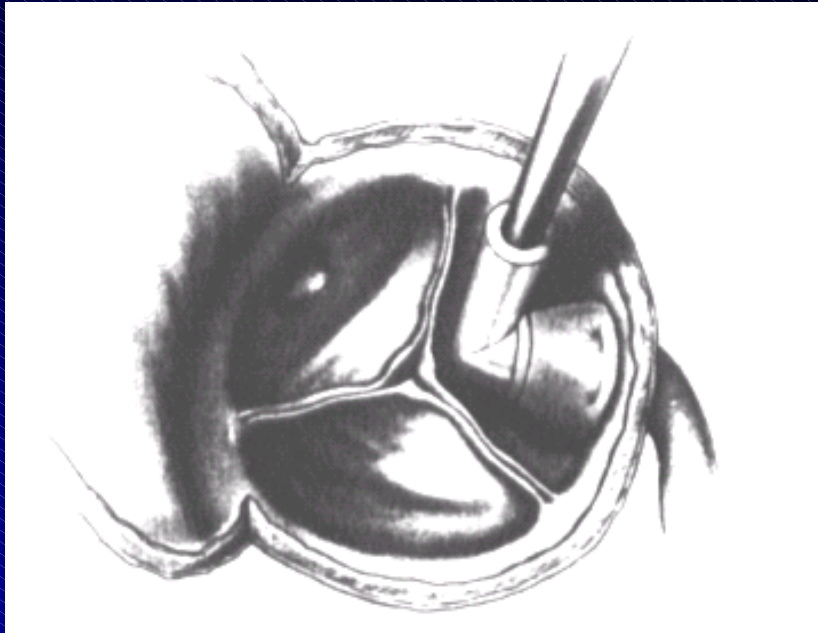
- The incidence is not known exactly
- It has been reported in 1-5% after AVR
- However, the incidence may be higher than documented cases in previous reports
- Most of cases were treated with bypass surgery

# Causes of LMCA Ostial Stenosis After AVR

- Related to myocardial perfusion technique
- Coronary ostial narrowing resulted by inadequate closure technique of prosthetic aortic valve
- Coronary ostial closure by prosthetic AV itself
- Other unknown causes

# Direct Ostial Myocardial Perfusion during AVR

*Antegrade cardioplegia via direct ostial cannulation*



**Potentially stimulate intimal hyperplasia**

## Unprotected Left Main Stenting

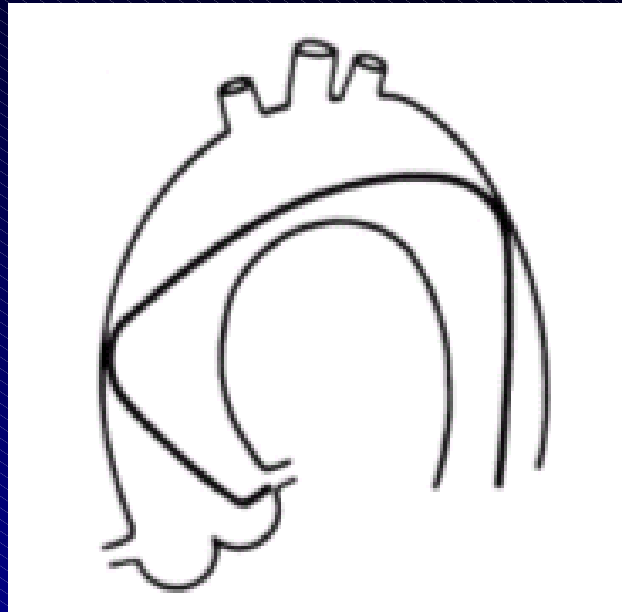
*How do we do ?*

Ostial lesion after AVR

## LMCA Ostial Stenting after AVR

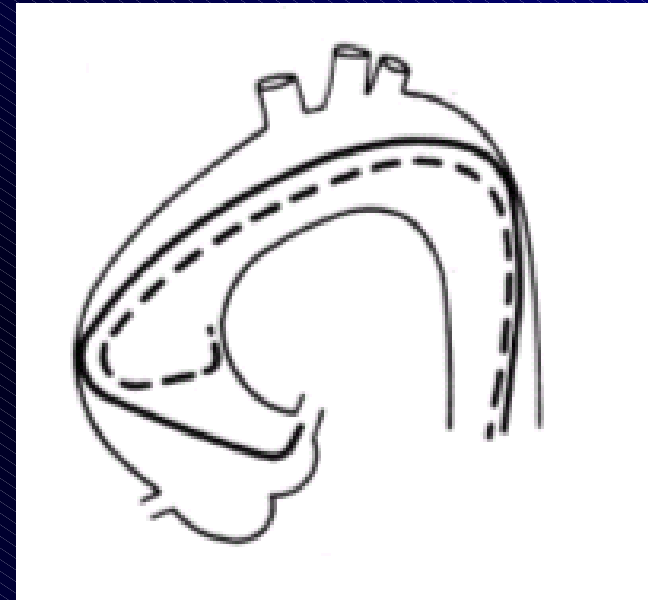
# *Preferable Guiding Catheters*

*3.4 cm or 4 cm curve*



**Normal size aorta**

*5 cm or 6 cm curve*



**Dilated aorta  
due to AV disease**



# Role of IVUS

- It is not essential because patients with normal left ventricular function are tolerant to ischemia during balloon occlusion.
- However, IABP should be prepared for cases in emergency and with depressed left ventricular function for prevention of hemodynamic collapse.