

# **OCT follow-up of a LAD in-stent CTO lesion successfully recanalized with DCB**

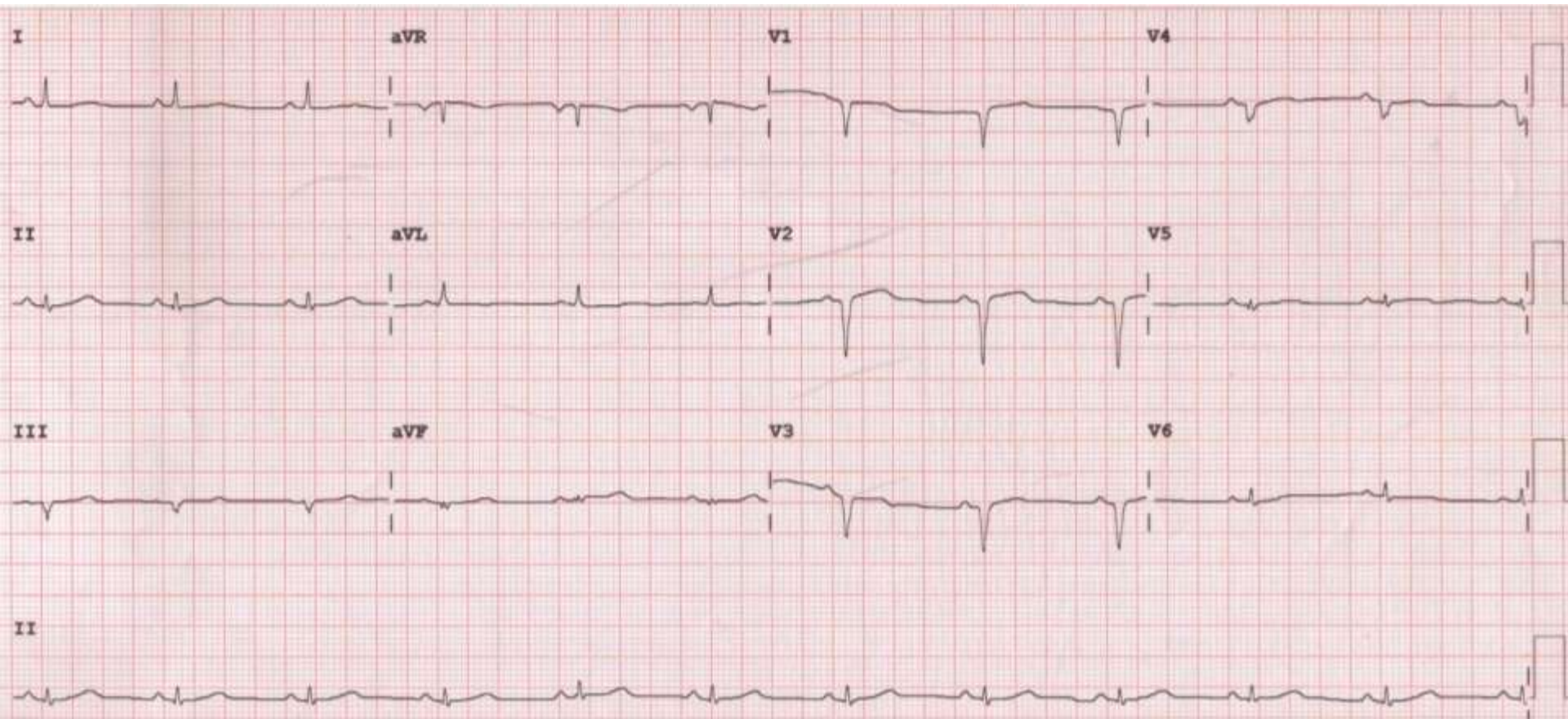
**Jun Jiang**

**Second Affiliated Hospital**

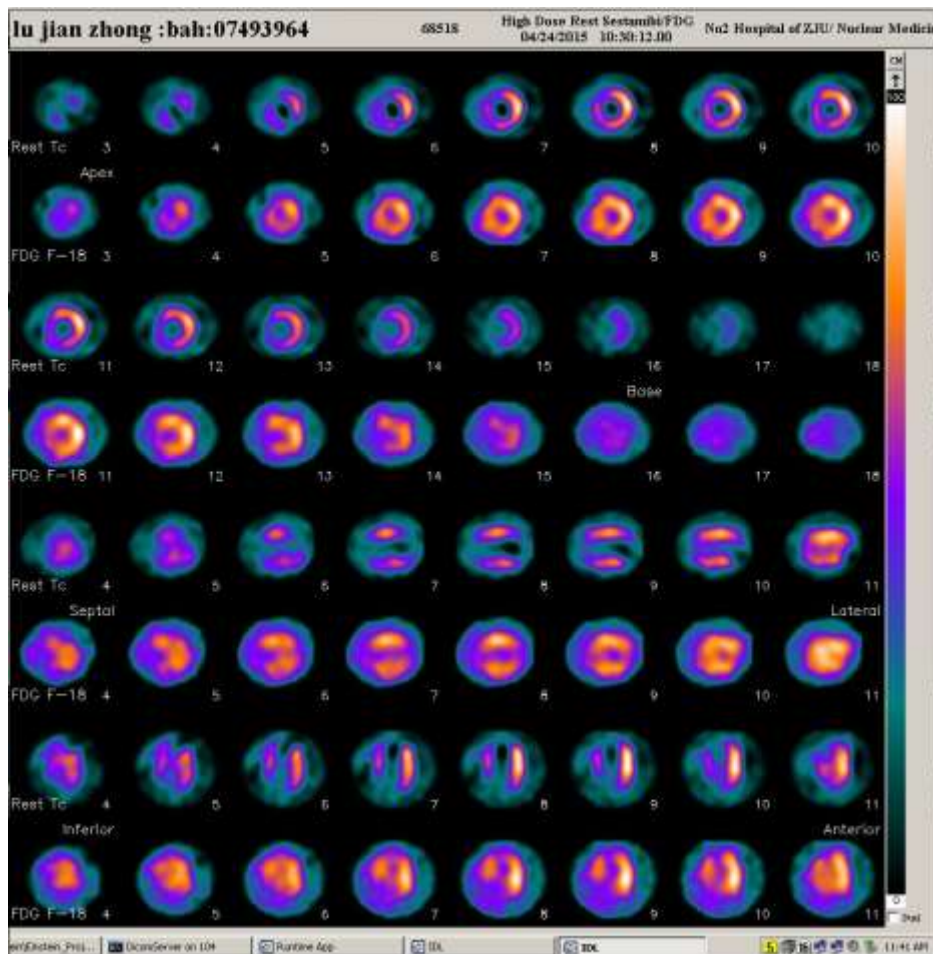
**Zhejiang University College of Medicine**

# History

- Male, 61 years old, farmer
- Chief complain: recurrent chest discomfort on effort for 2 years
- Risk factor: smoking 1 pack/day\*30 years
- Lab(2013.7.5): Tnl (-), LDL-C 2.64 mmol/L, Hcy 17.7umol/L, Cr 52umol/L
- Echo: enlarged LA(3.78), thinning and hypokinesis of LV septum and apex, apical ventricular aneurysm(2.6\*1.7cm), LVIDd 5.23, EF 46%



# ECT (DISA with MIBI and FDG)



- Anterior and apical myocardial infarction (9.91%) with viable myocardium inside (2.43%)

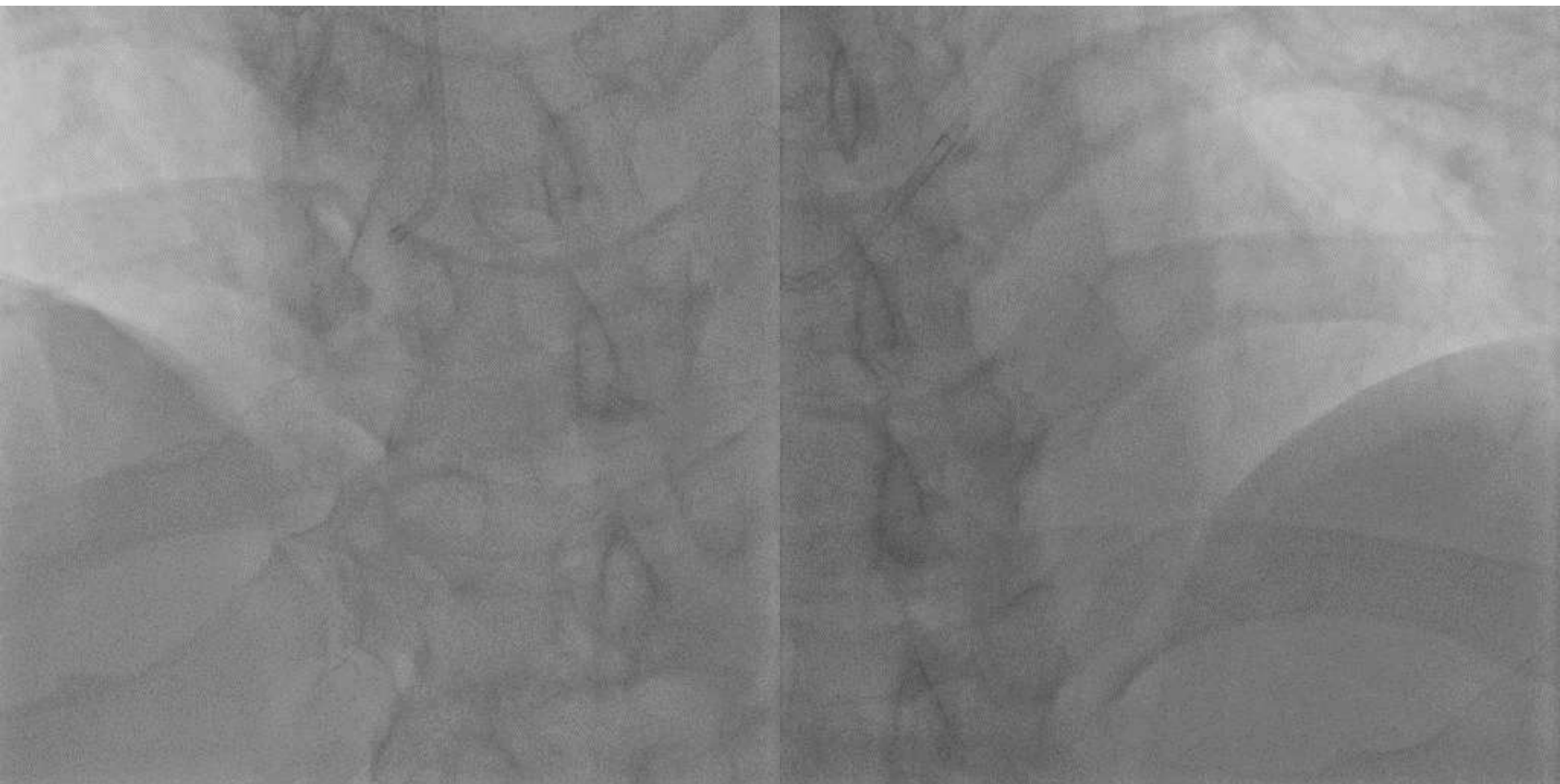
- Diagnosis:

Coronary heart disease

Old anterior myocardial infarction

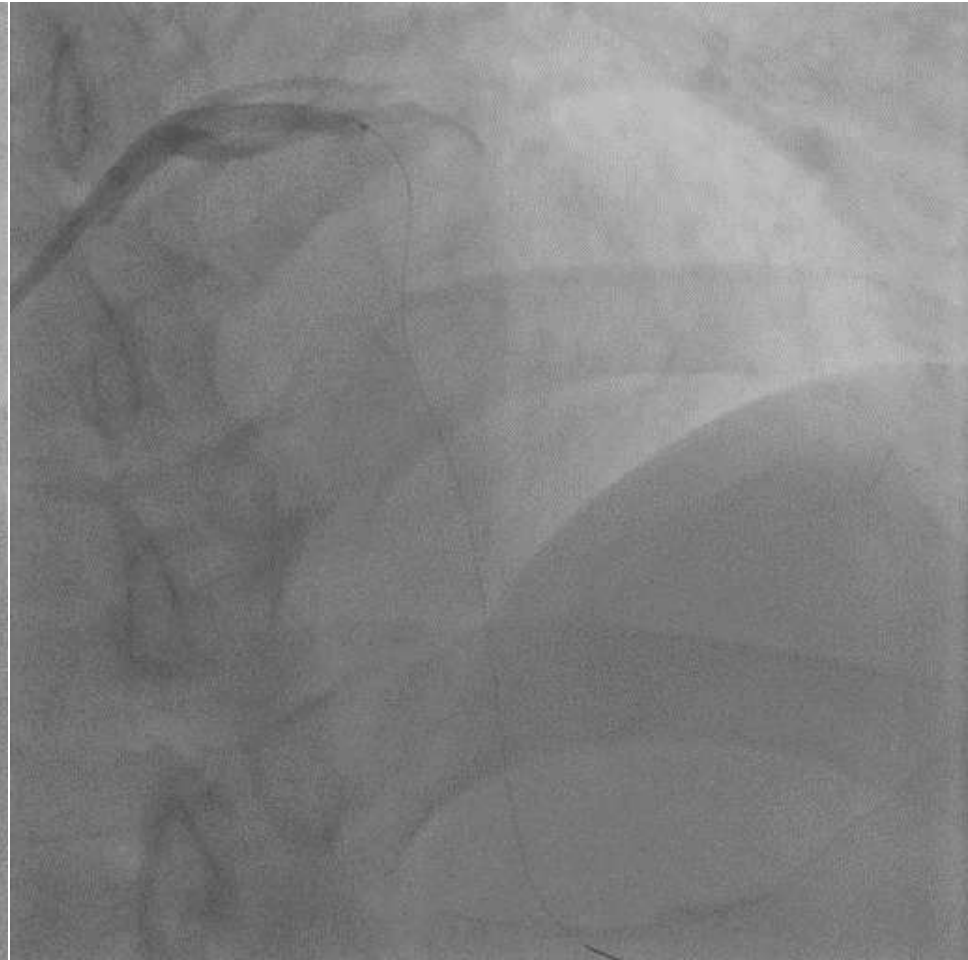
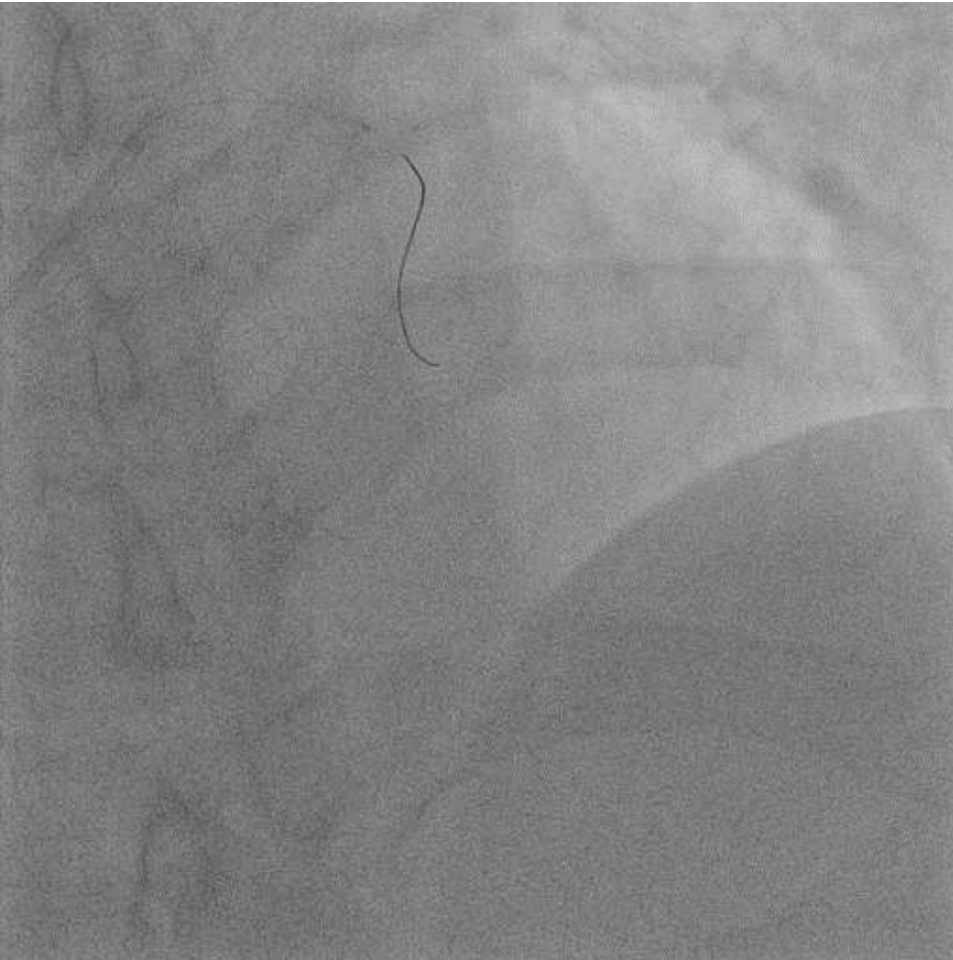
Stable angina

2013.7.8

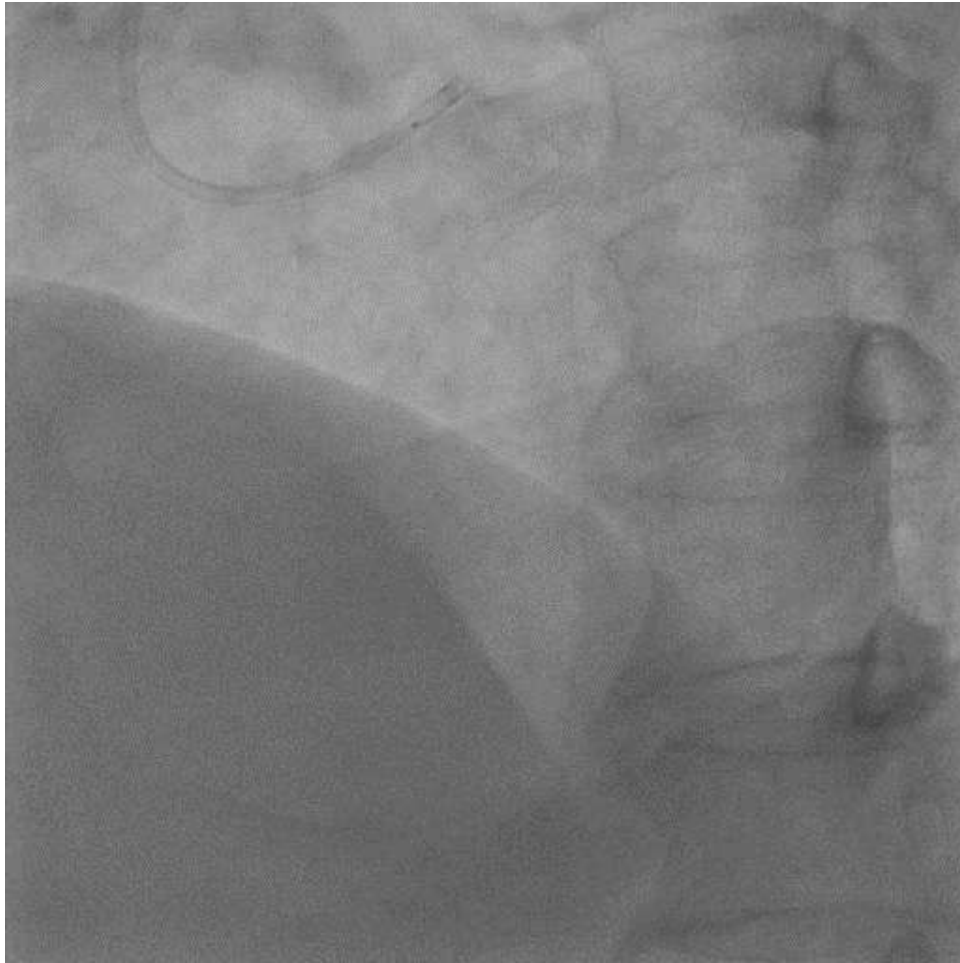


# Proximal cap penetration with miralcle 4.5 wire

## Lesion cross with sion wire



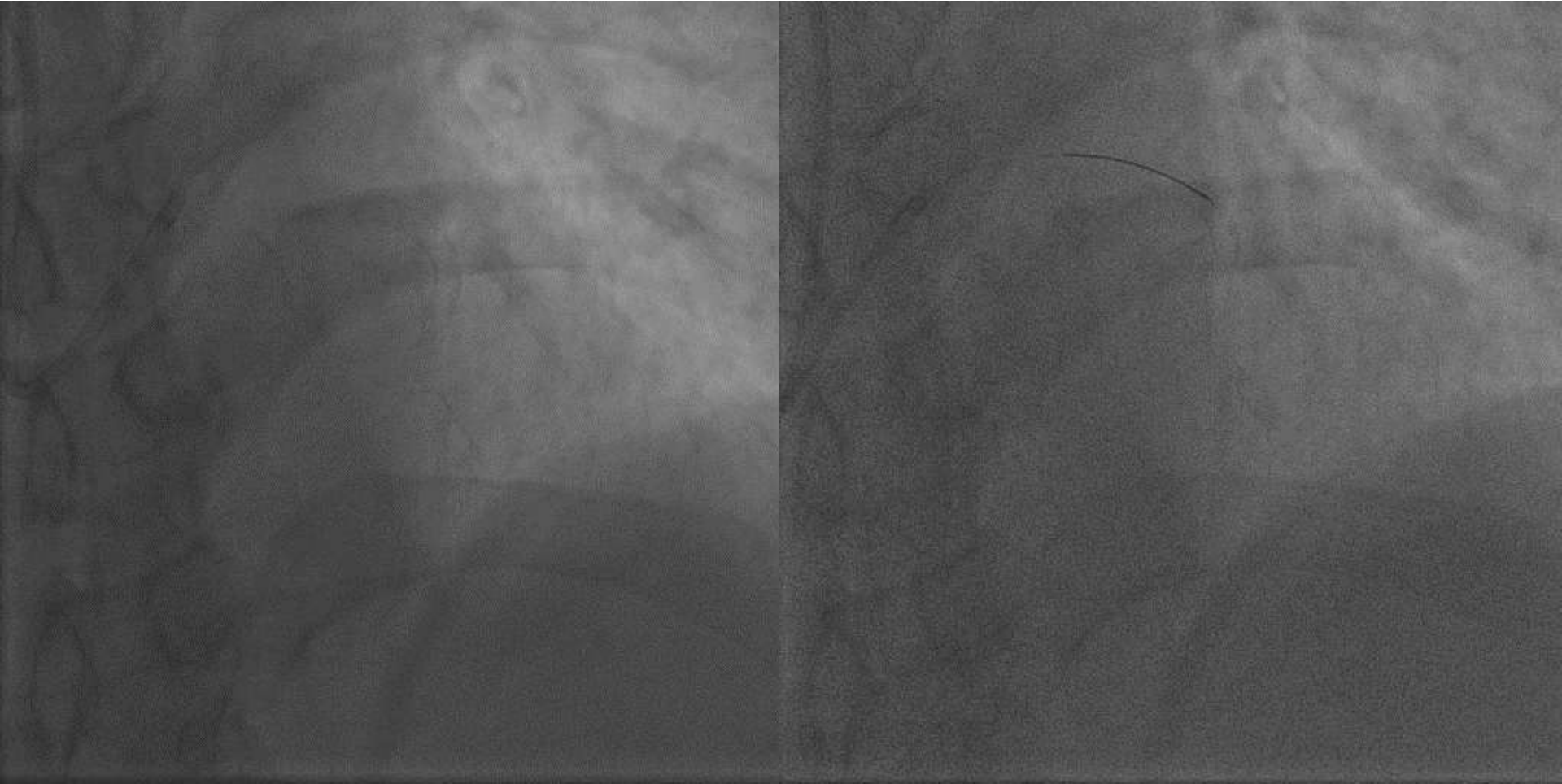
Endeavor resolute 2.5\*30mm、3.0\*18mm stent



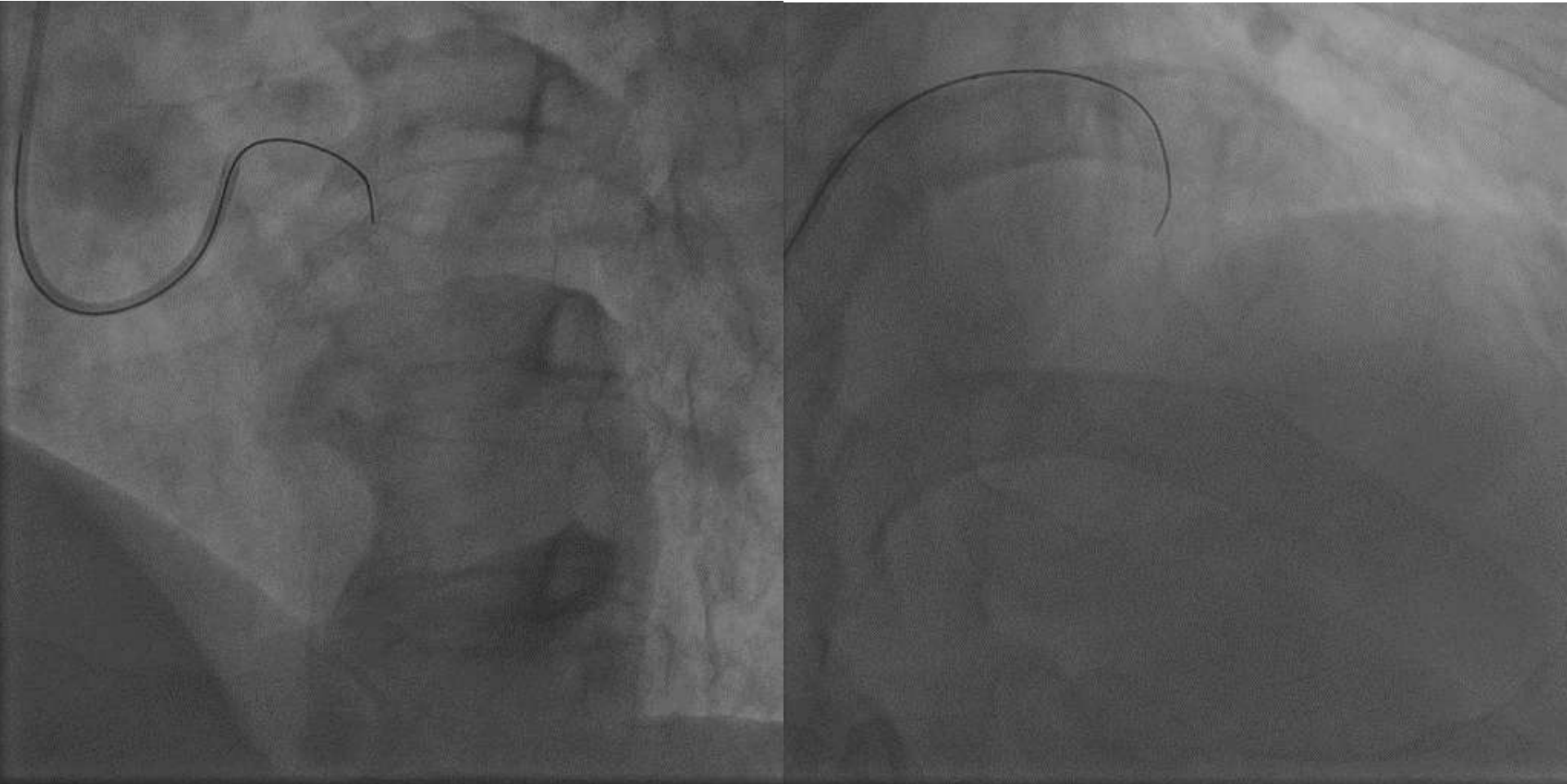


- Aspirin, Clopidogrel, Crestor, Metoprolol, ACEI
- Mild chest discomfort

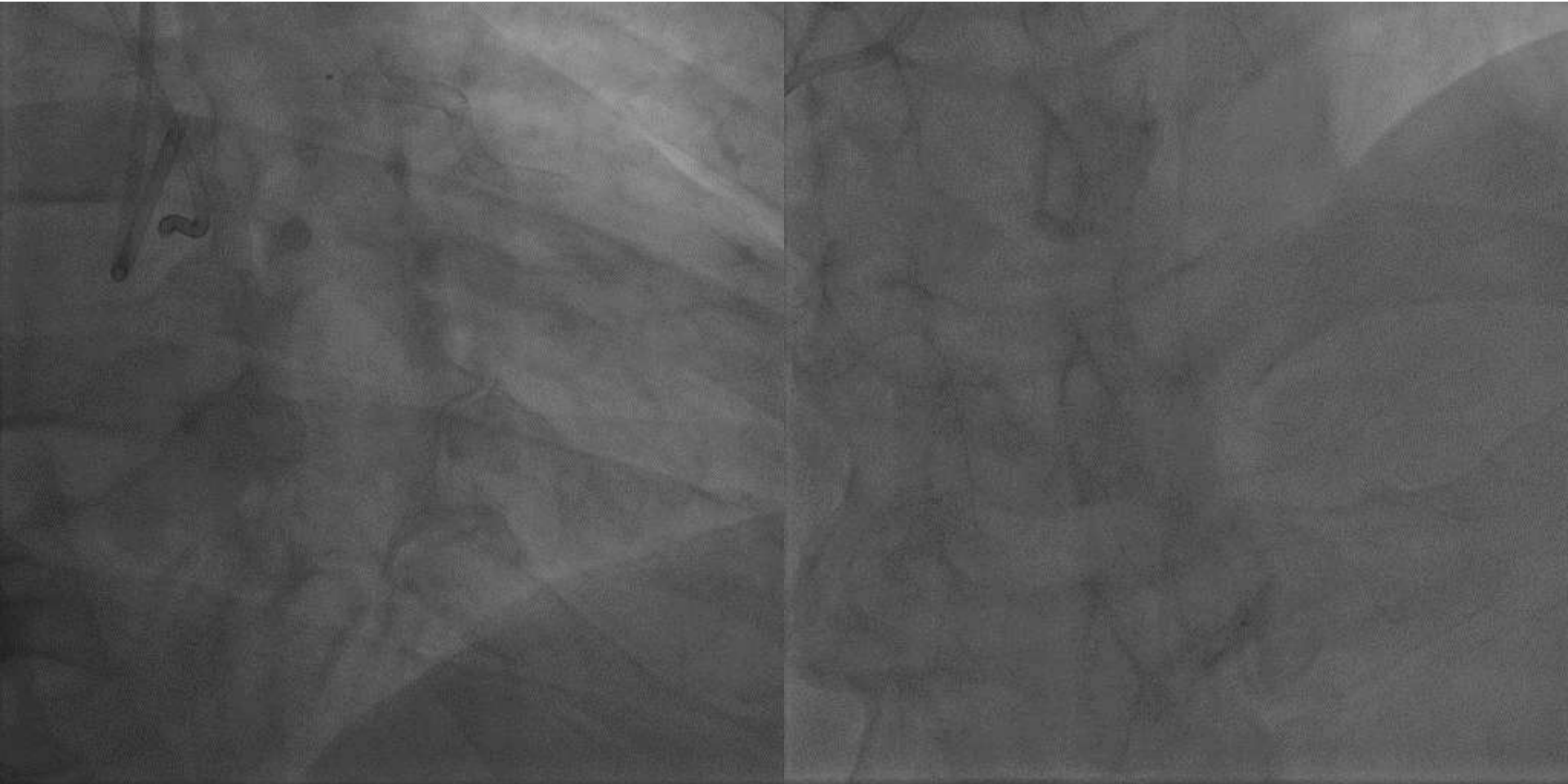
2015.1.20



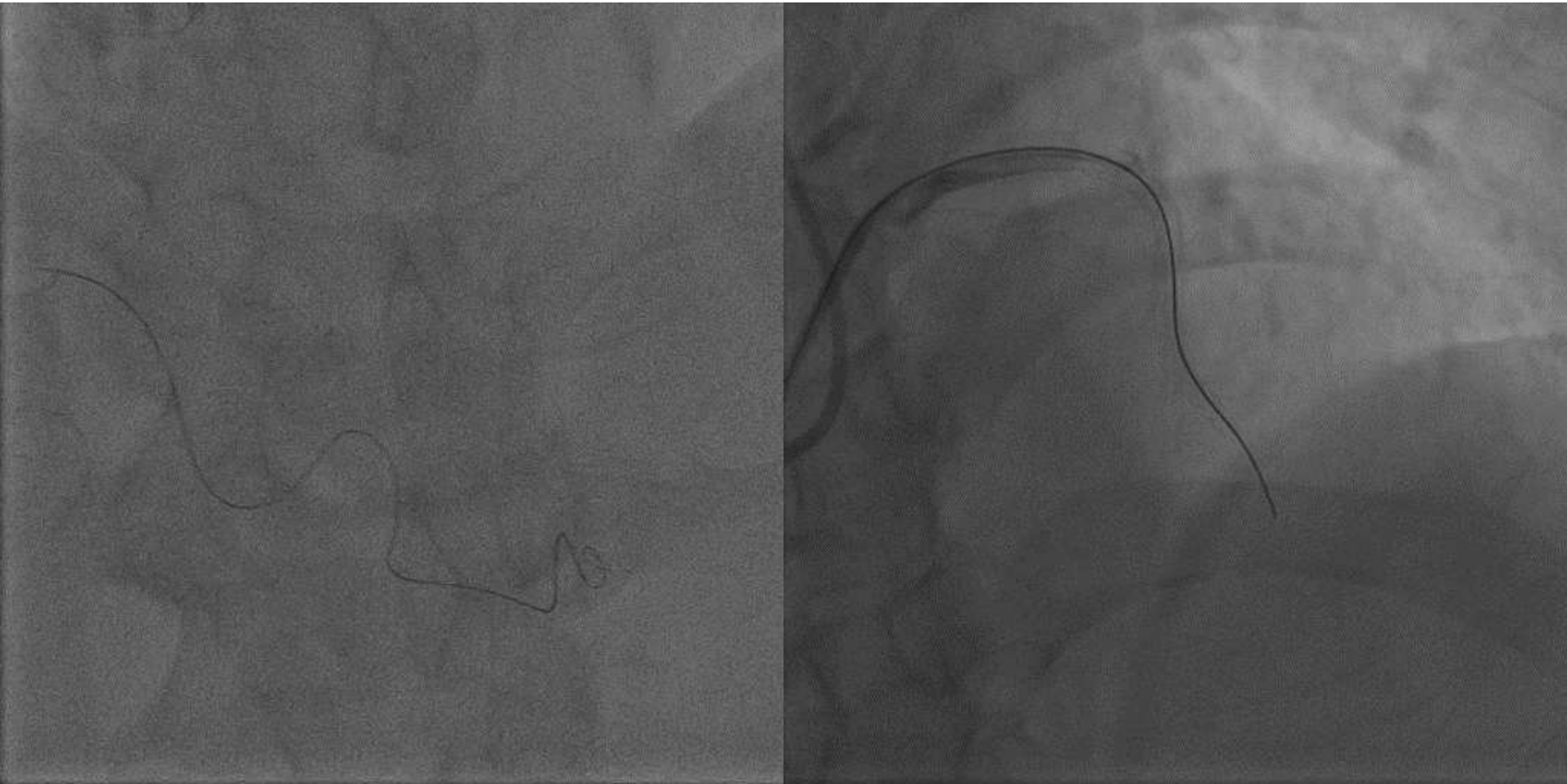
# Crosswire NT, Miracle 6, Conquest Pro wire



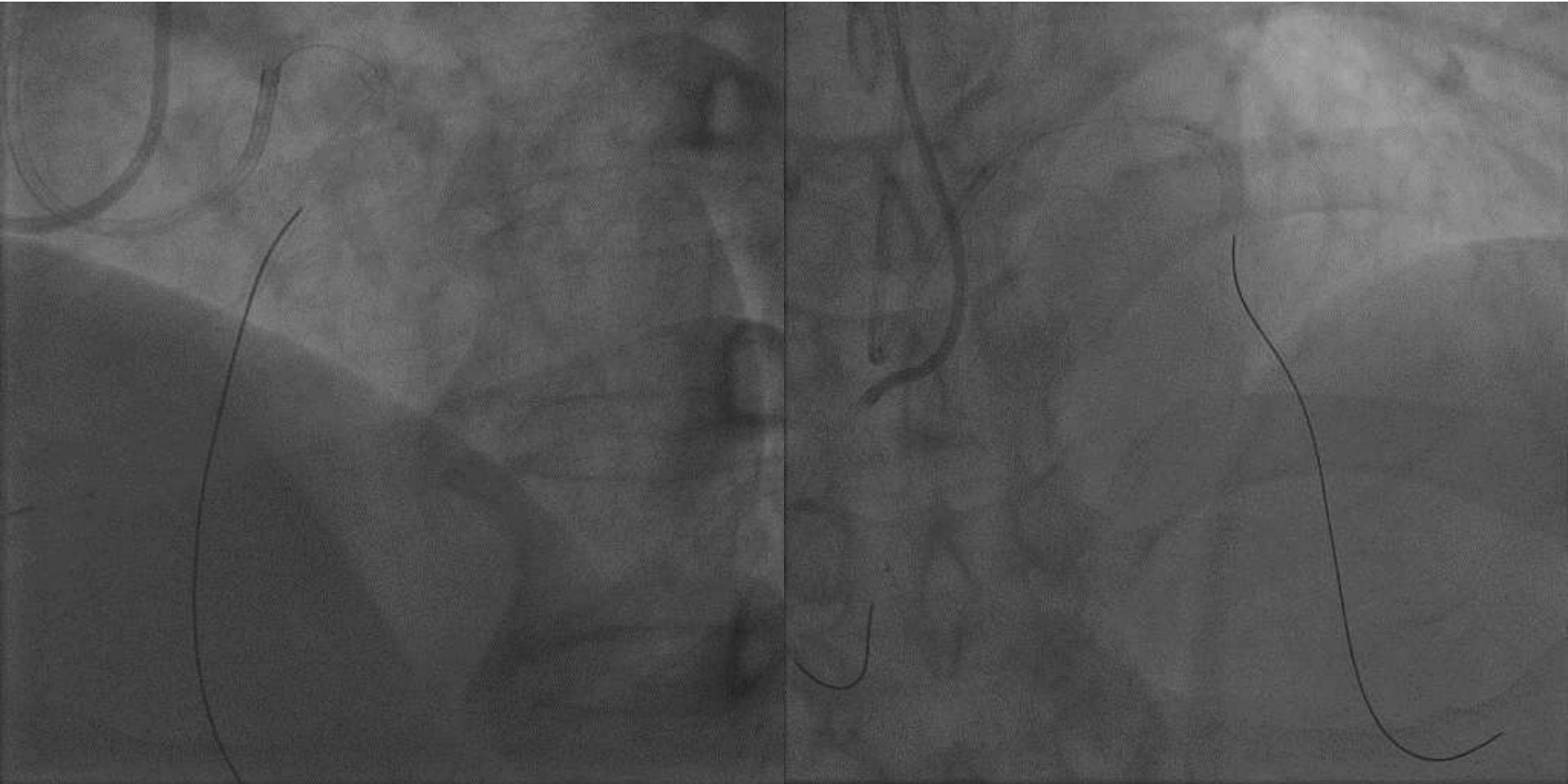
# Try retrograde



# Fail collateral cross with Sion and Fielder XT Antegrade Miracle 6



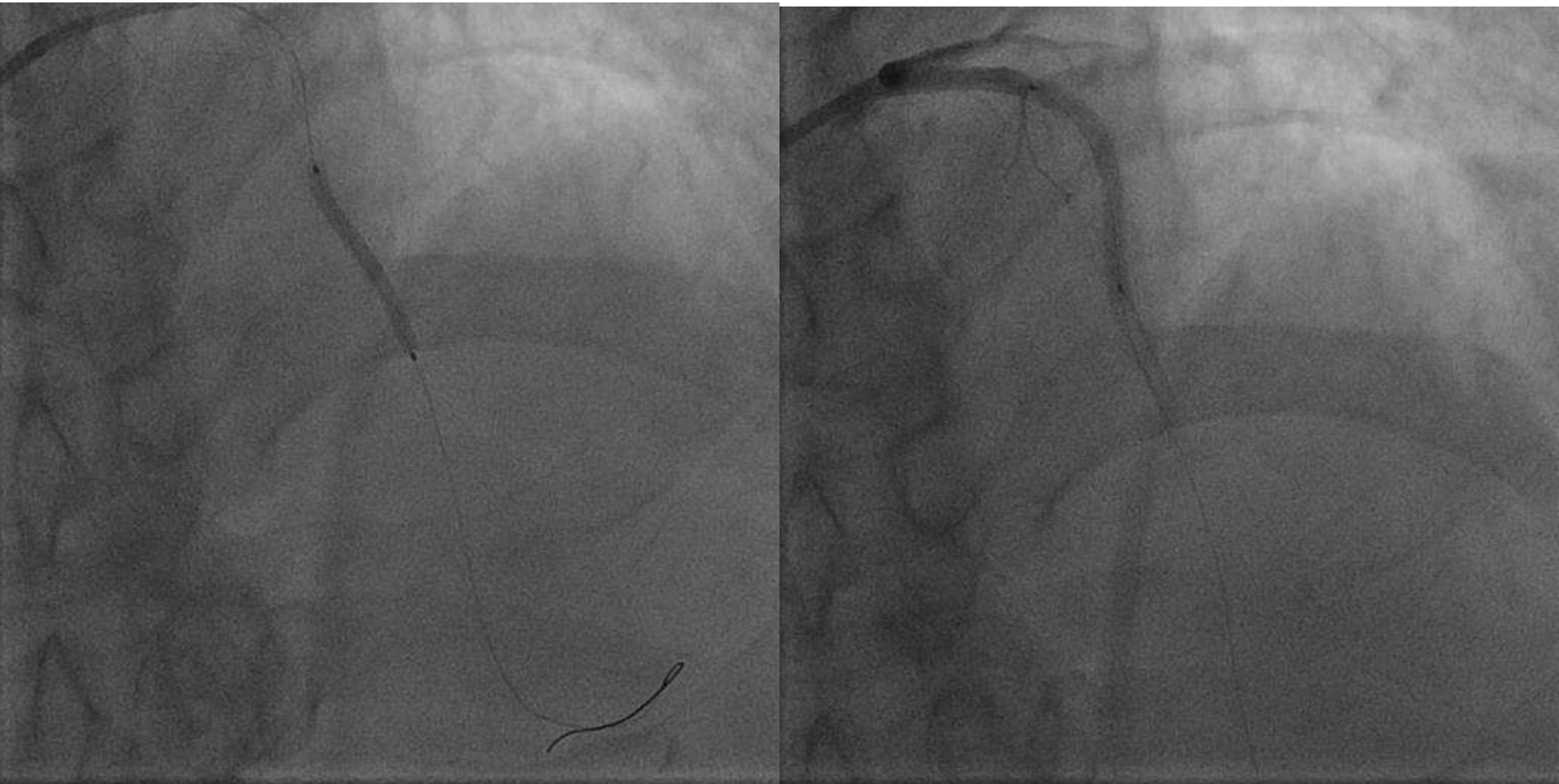
# Sprinter 1.25mm balloon not cross



Tornus also failed  
5 in 6, Corsair cross



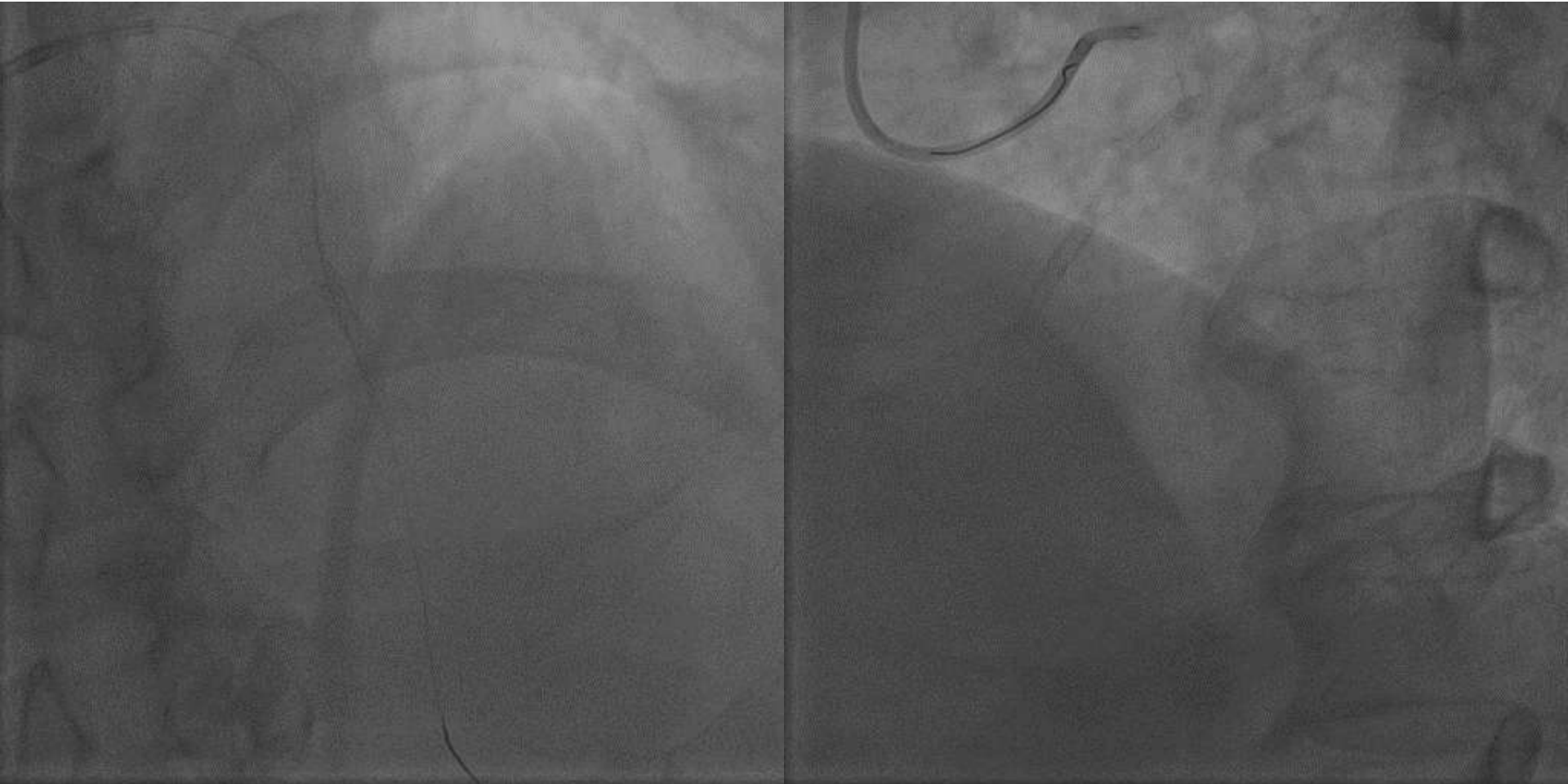
PE 2.25\*28mm stent  
Sequent Please 3.0\*30 DCB



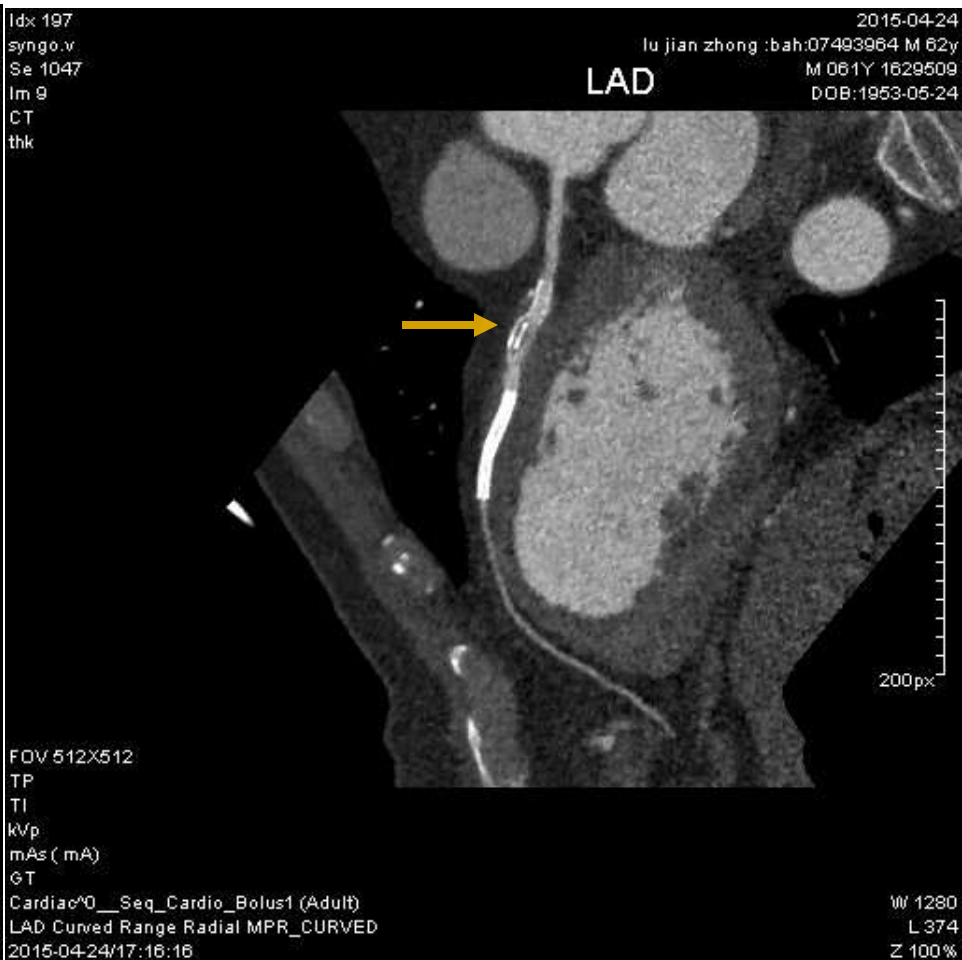


# Final Result

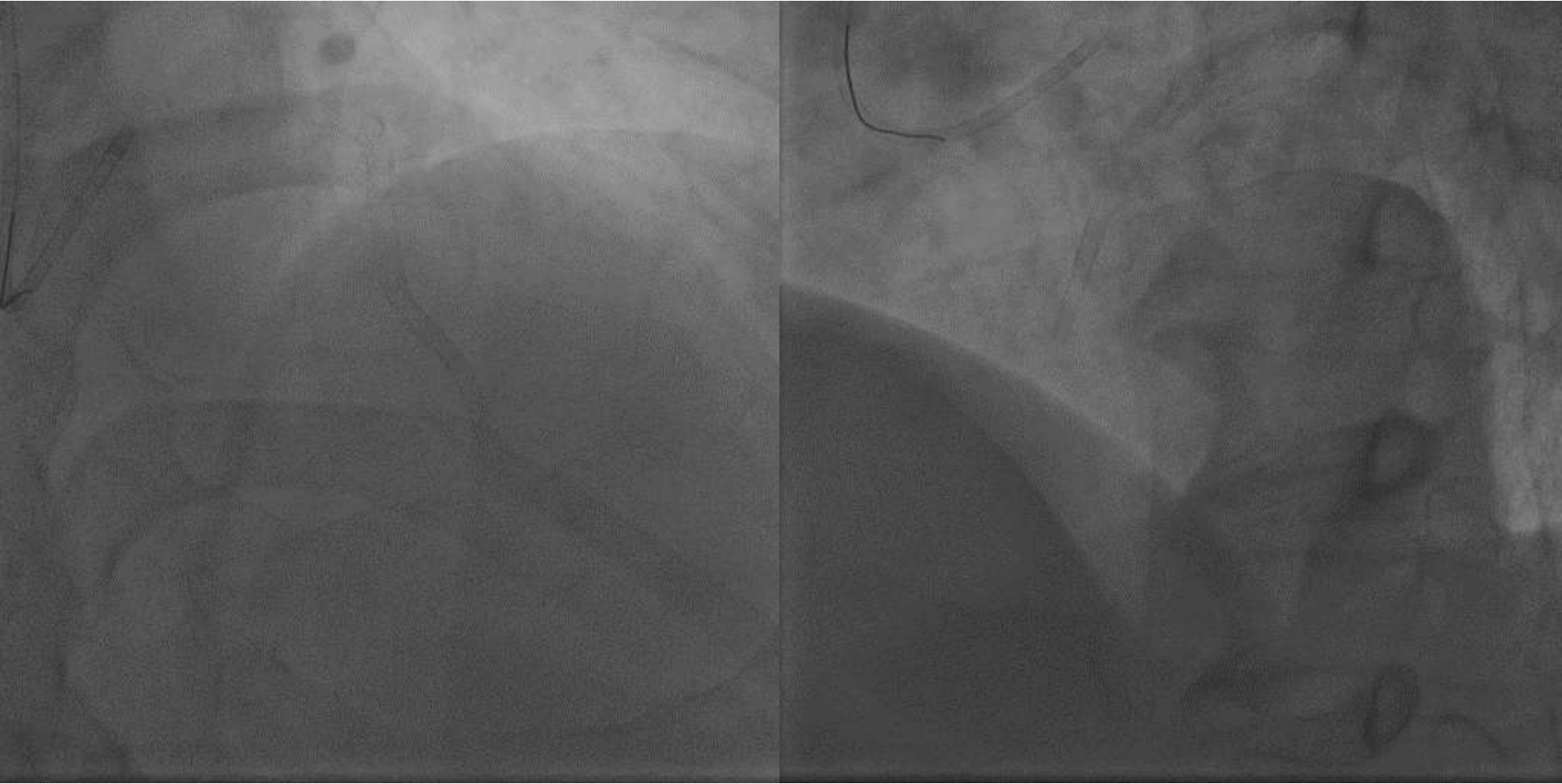
Mistake: DCB segment outside the old stent

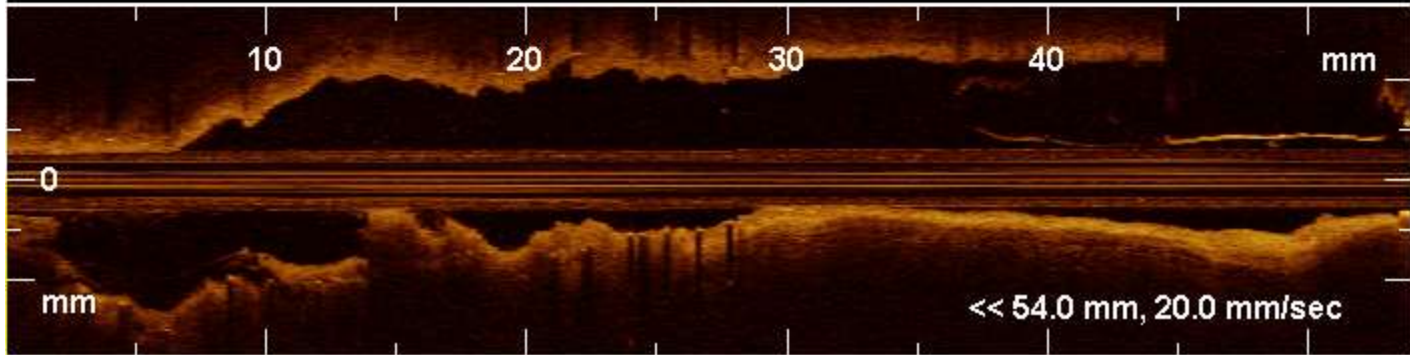
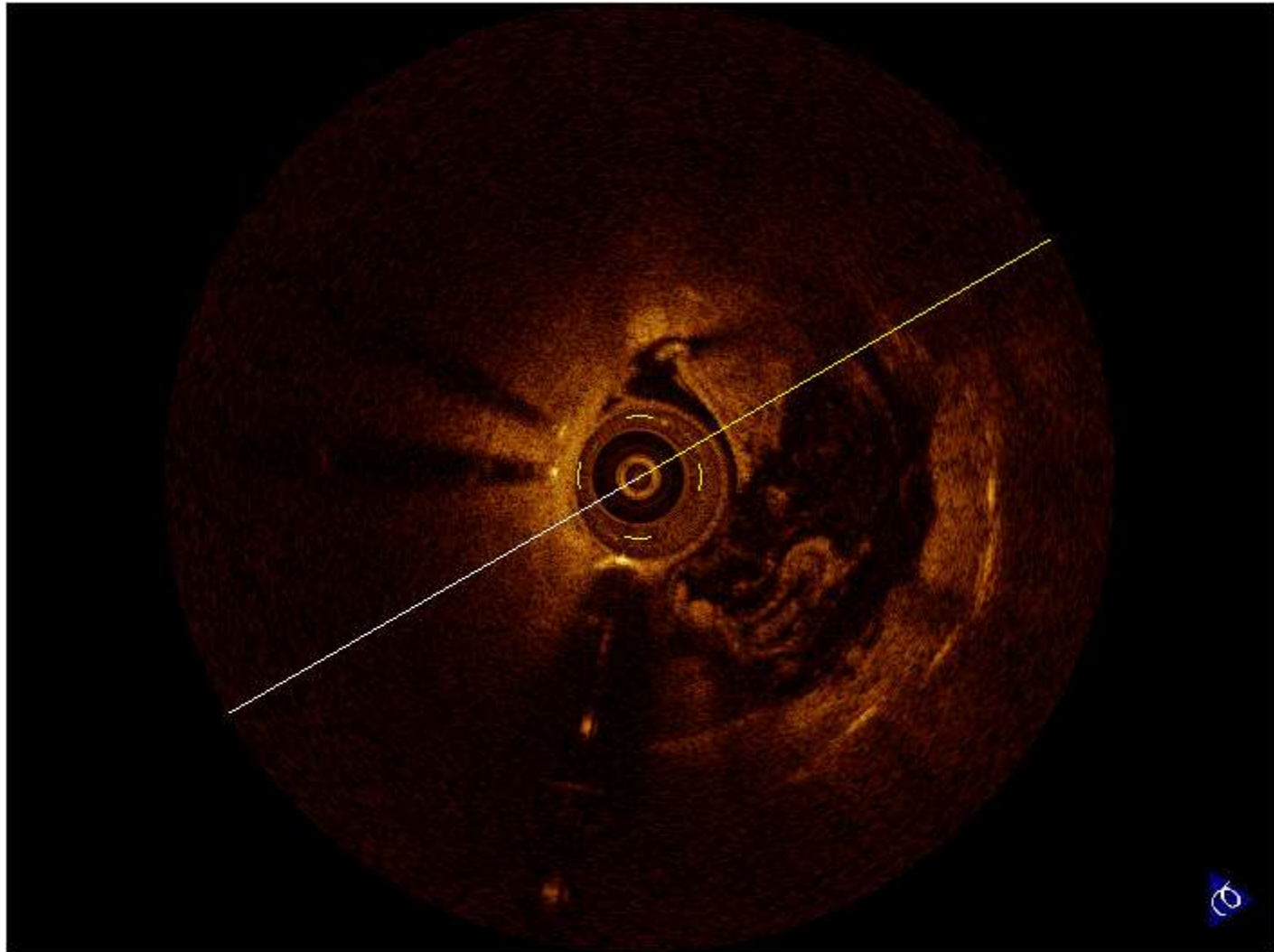


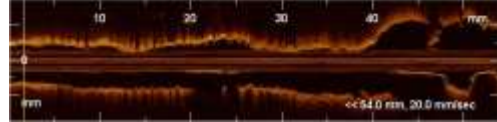
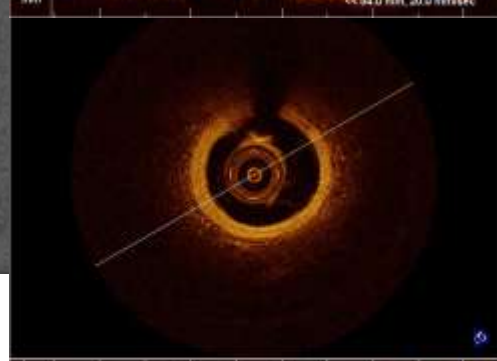
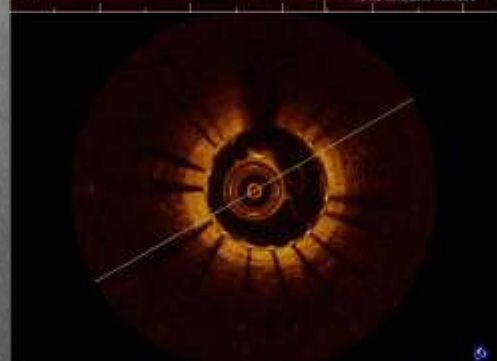
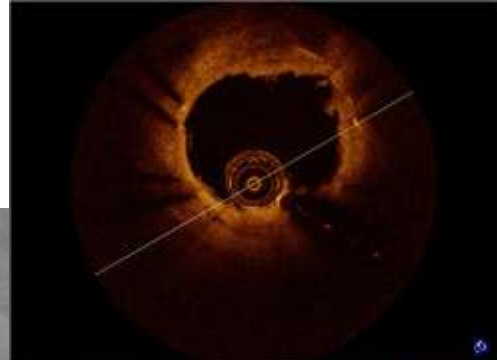
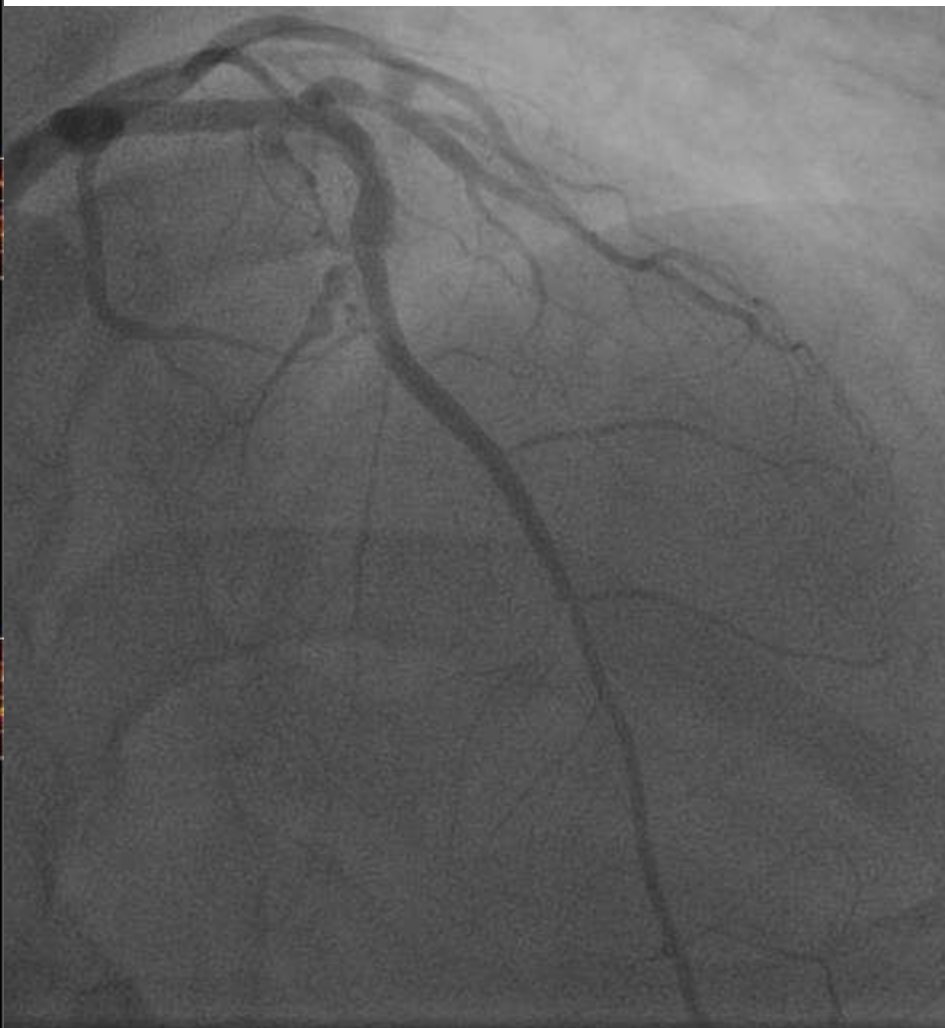
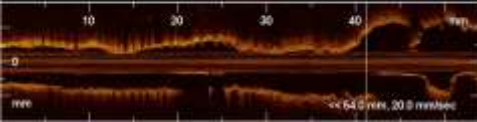
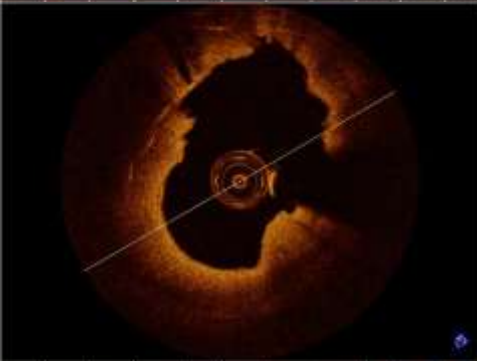
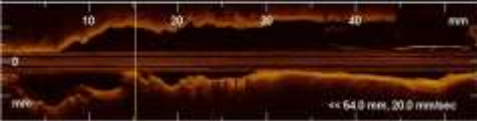
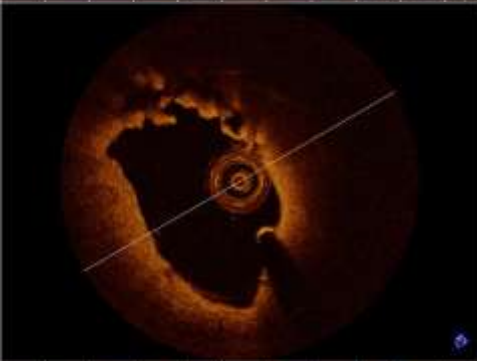
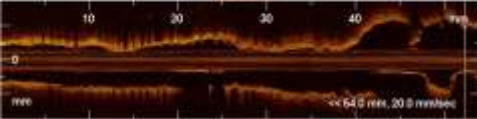
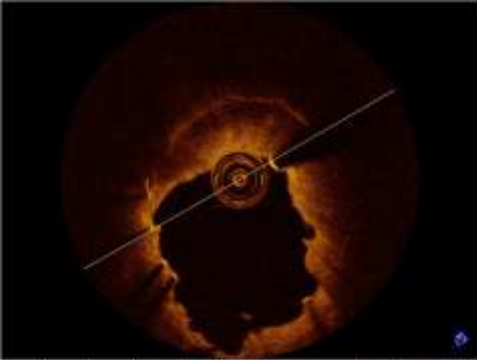
# Switch to ticagrelor CTA 3 months later



# Angiogram







# Summary

- Solution for difficult cap penetration
  - Enhance guiding catheter support
    - Guide extension
    - Anchoring technique
  - Wire escalation (Conquest Pro)
  - Corsair, Tornus
  - Rotational atherectomy
- DCB in in-stent CTO

谢谢

