

*A Successful Case for Severe Angled
Bifurcation Lesion with Combination of
“Reverse Wire Technique” and “Jailed Balloon
Technique”*

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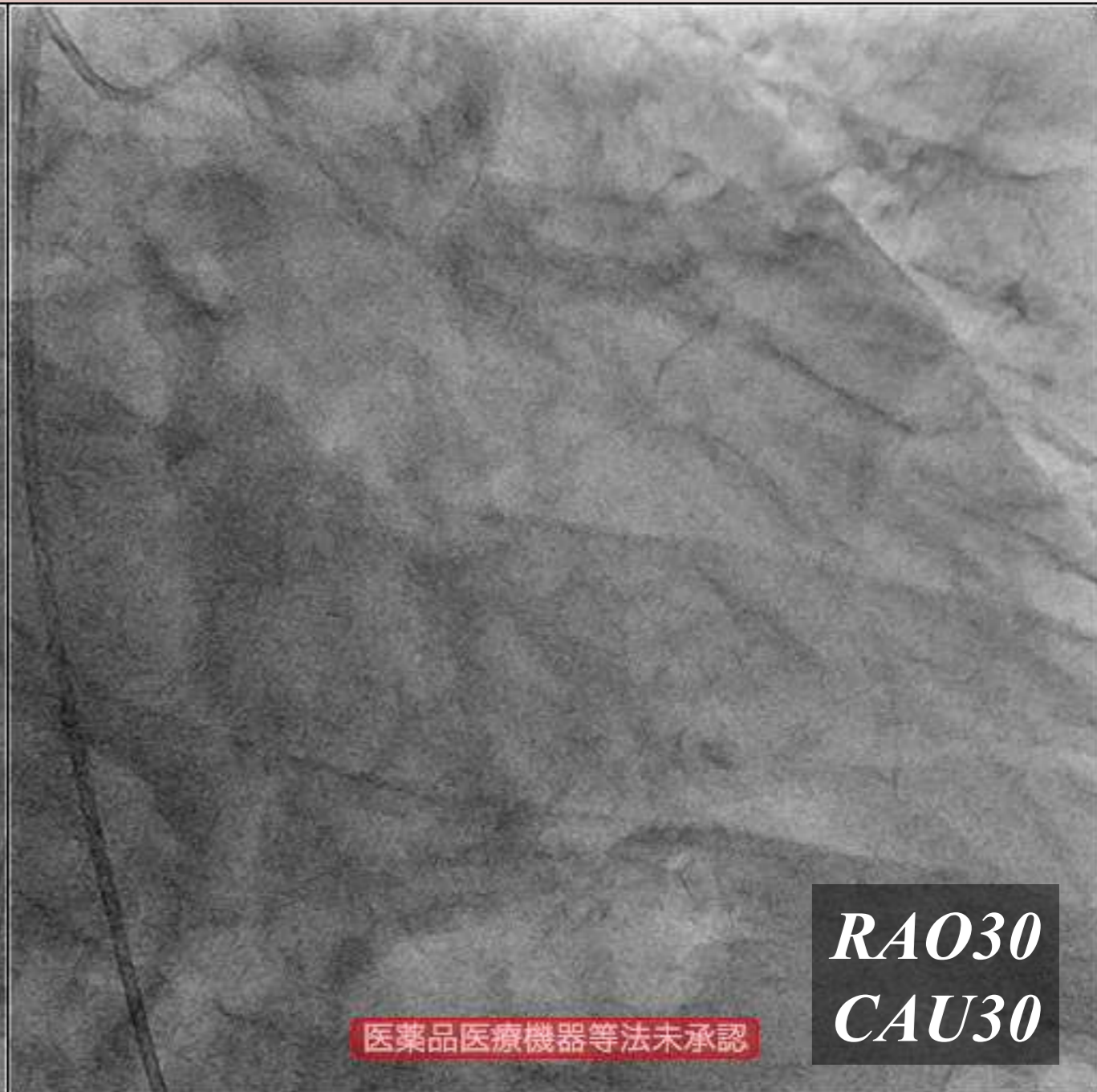
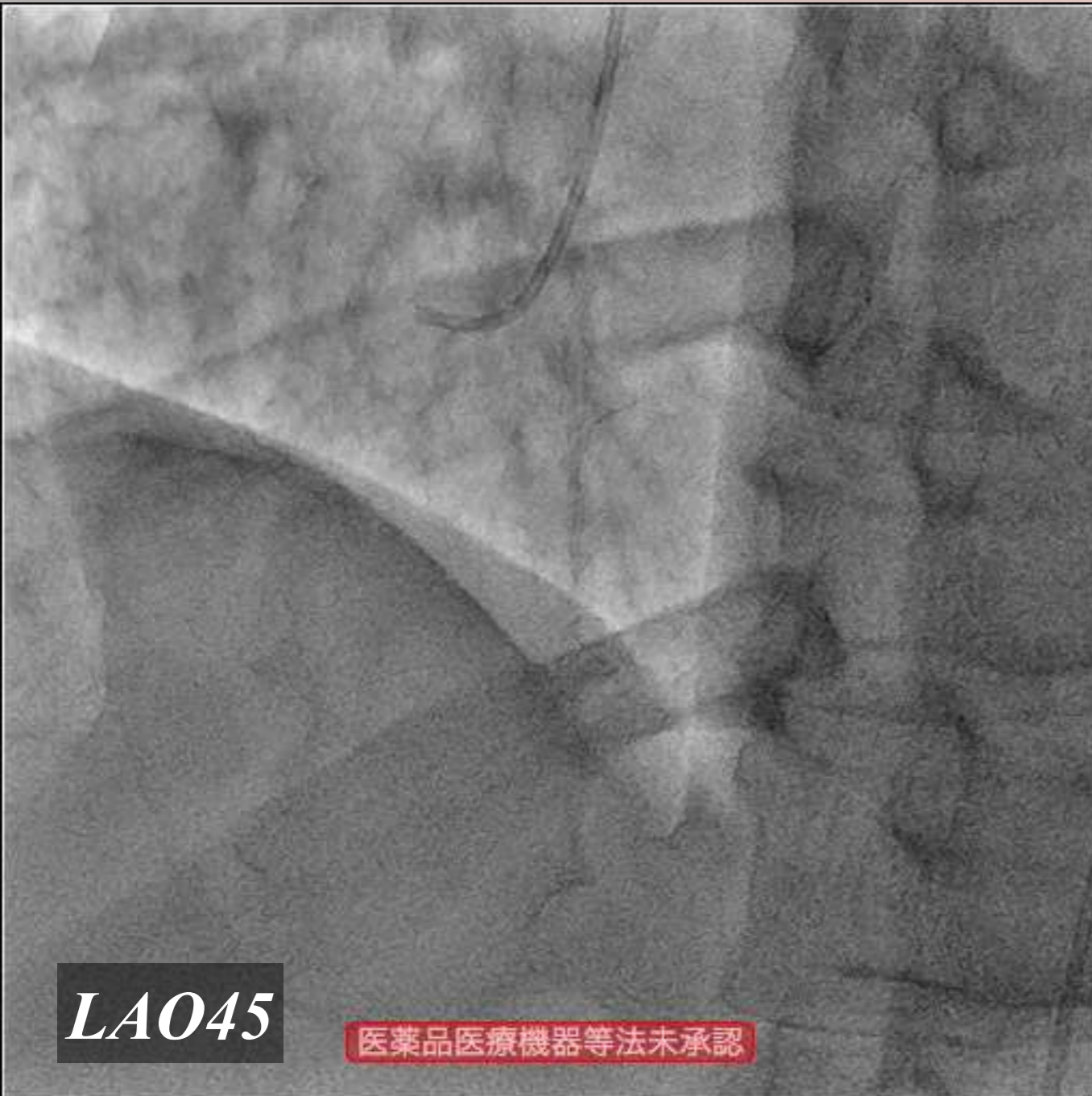
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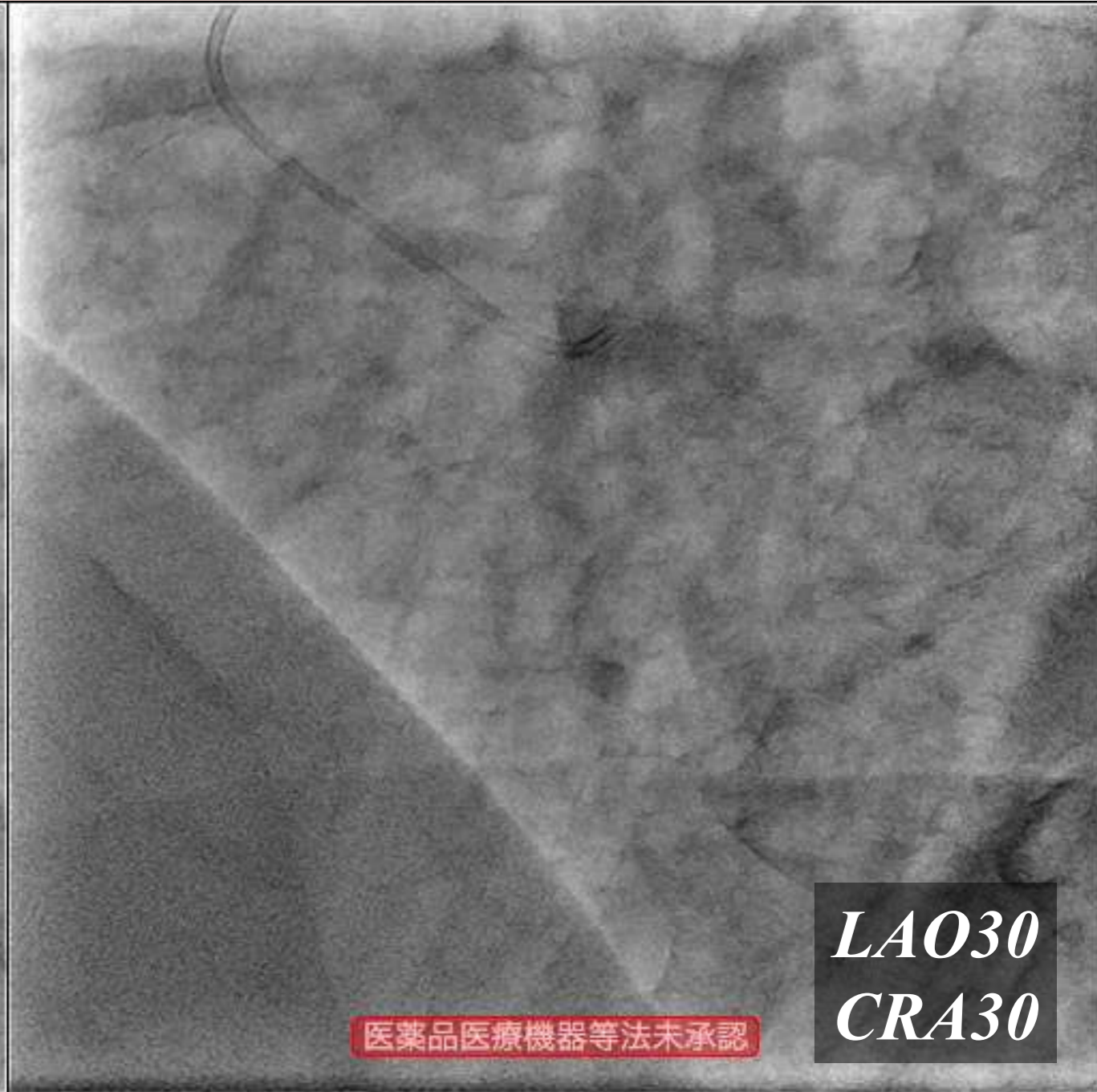
Case

- √ *44-year-old, Male*
- √ *Coronary risk factors: HT, DyL (FH-)*
- √ *Clinical presentation: SAP (CCS III)*
- √ *Prior intervention: None*
- √ *EF: 56%(Teich), eGFR: 54ml/min/1.73m²*

Prior CAG



Prior CAG



Lesion vessel model & My strategy

LAD#6

✓ LAD#7 with bifurcation lesion (1-0-1)

✓ Severe angled bifurcation

Sep

#Dg

#7

Sep

CRA30

What do you select some strategy to protect #Dg?

PCI

Hyperion 6Fr PB3.5

Left radial access

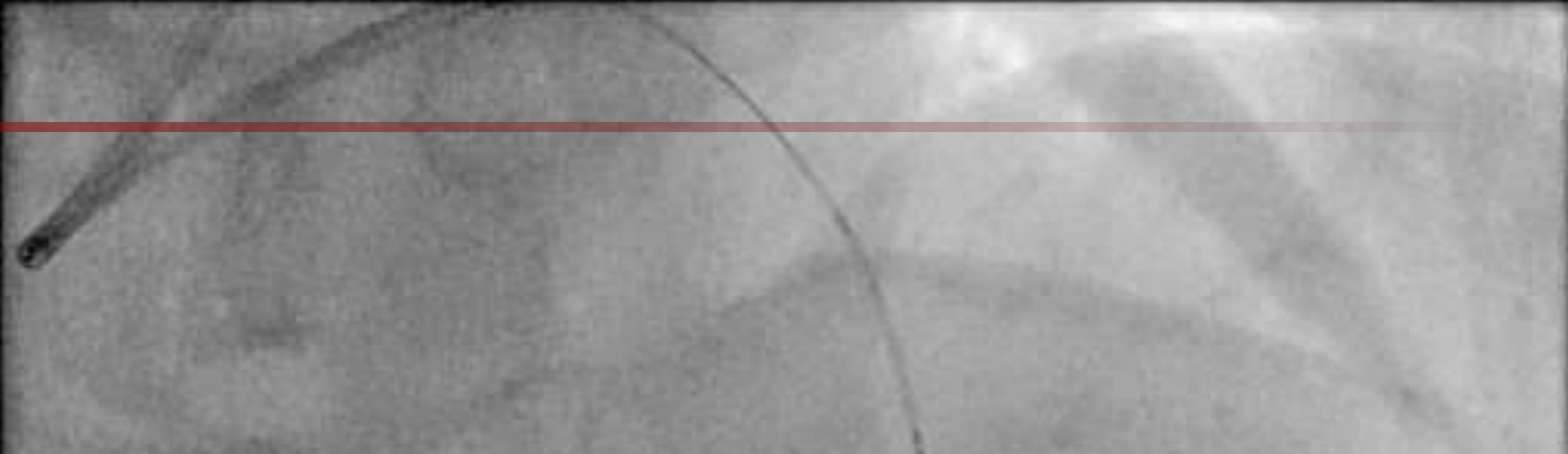
SION blue

CRA30

System

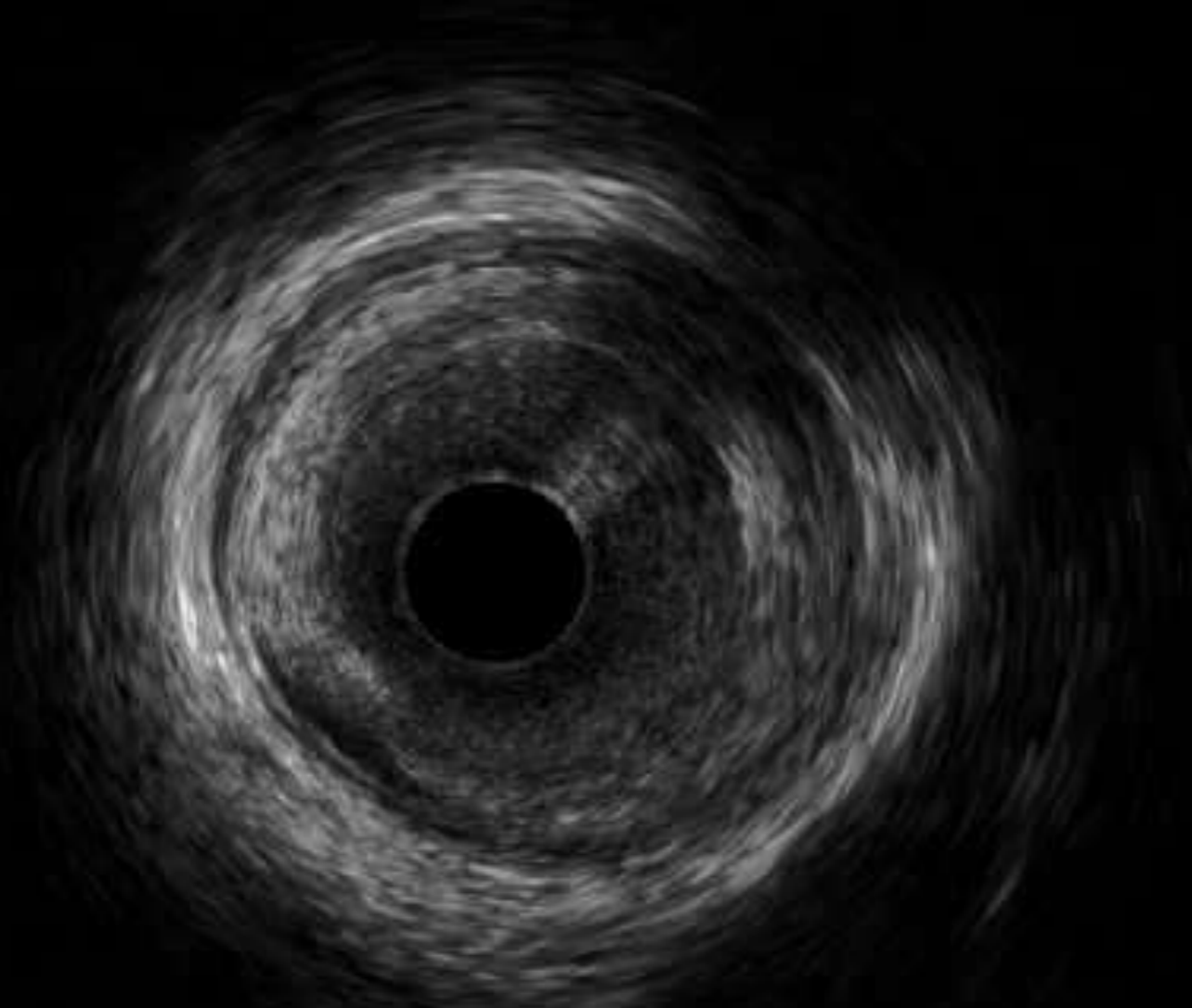
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PCI



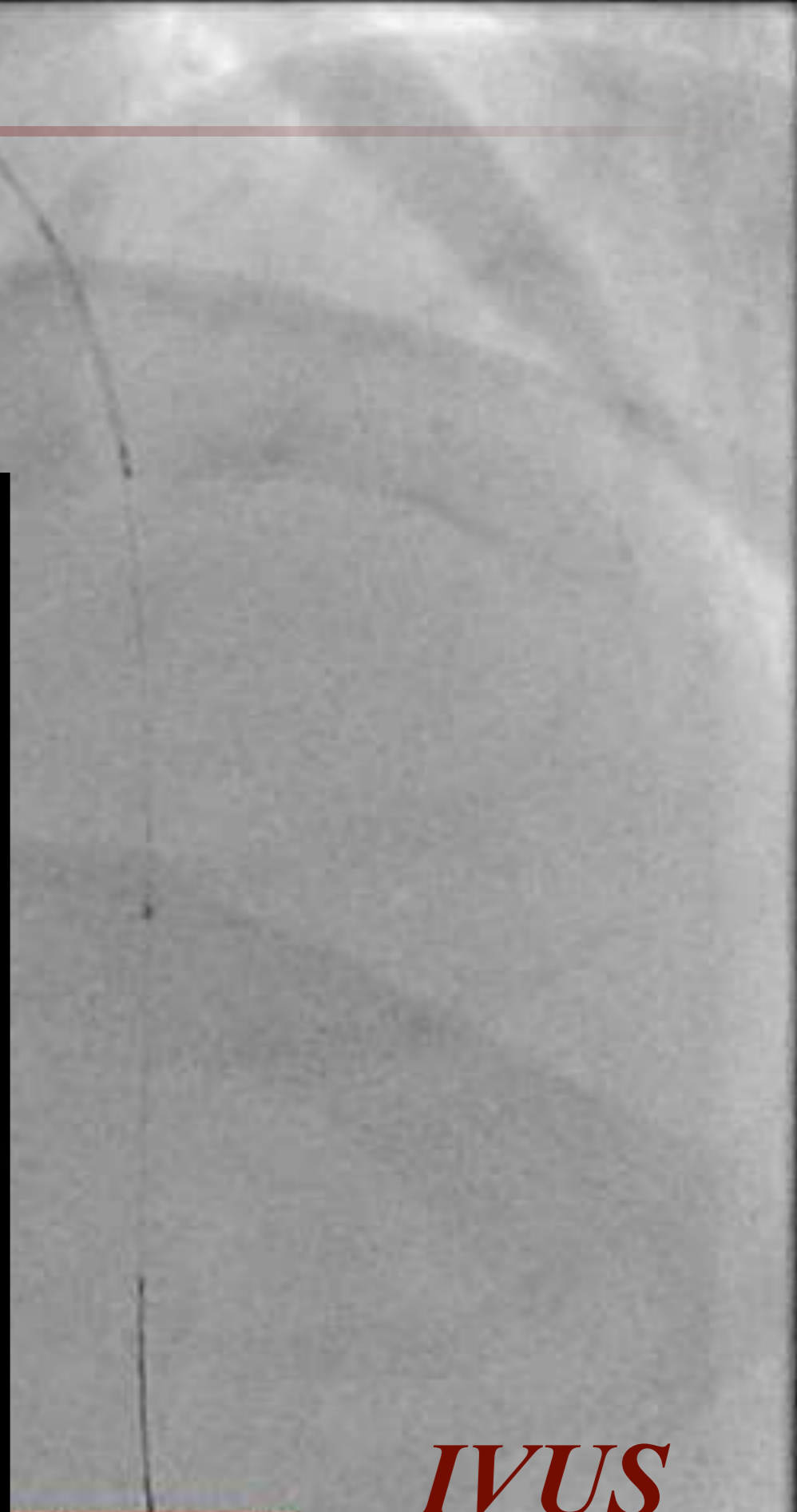
AltaView

Frame 267



IVUS

器等法未承認



PCI

Crusade Type R

SION black

Reverse Wire Technique

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PCI

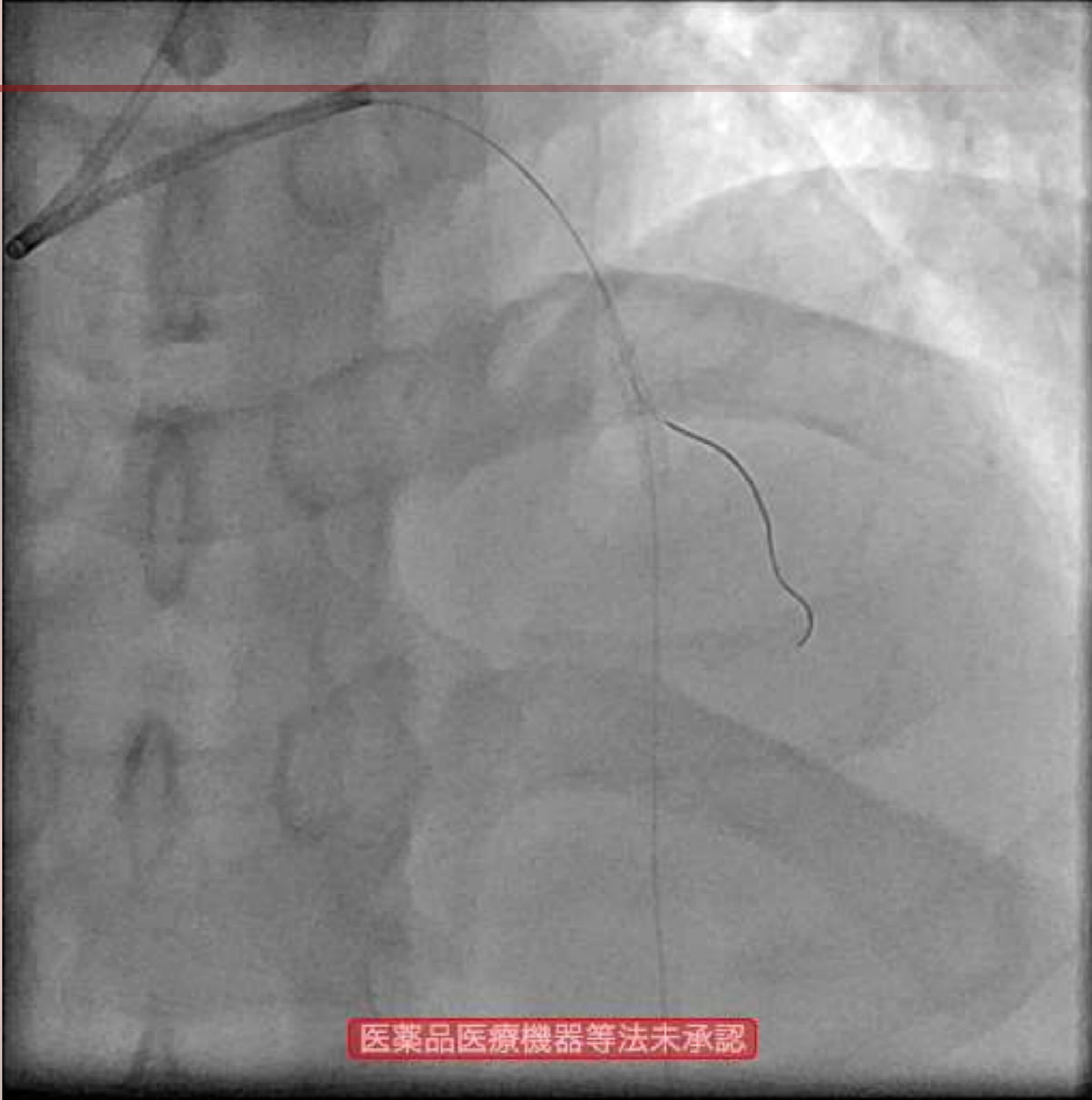
Resolute Onyx 2.75/15

Sapphire II Pro 1.5/15

Jailed Balloon Technique

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PCI



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PCI

Resolute Onyx 3.0/18

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PCI

Euphora 3.5/12

Sapphire II Pro 1.5/15

Kissing Balloon Technique

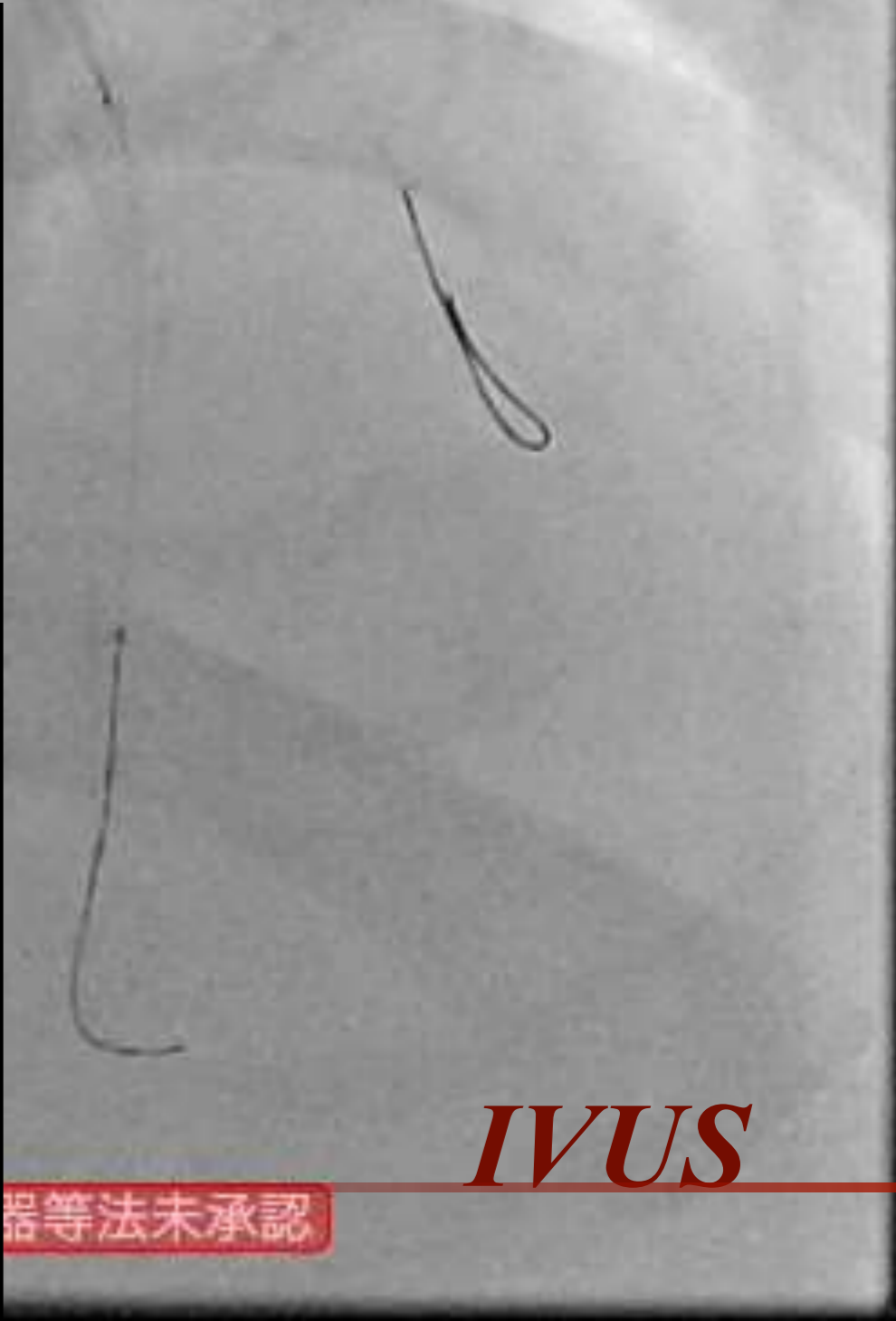
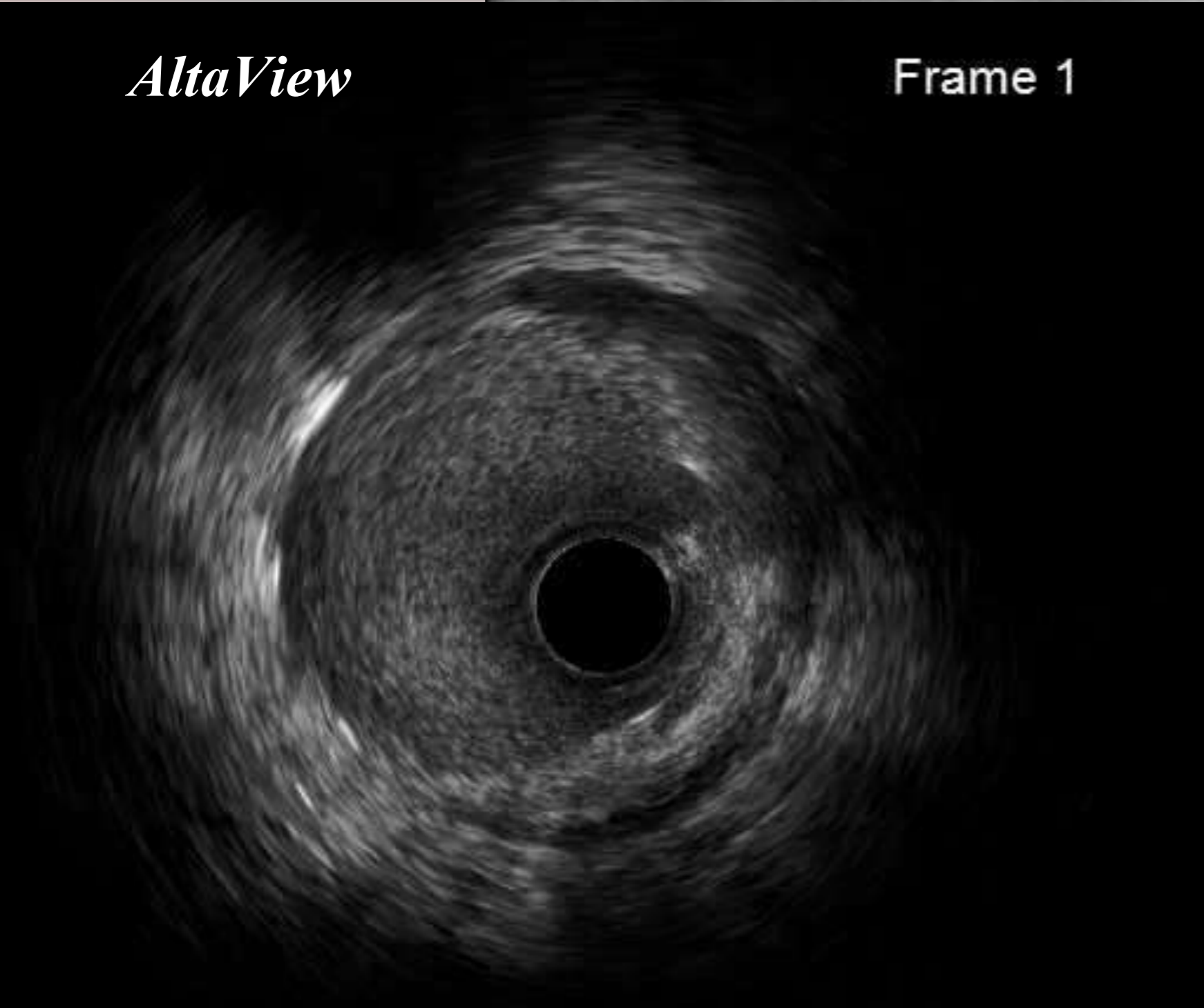
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PCI



AltaView

Frame 1



IVUS

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Final CAG

Procedural time: only 54 minute !

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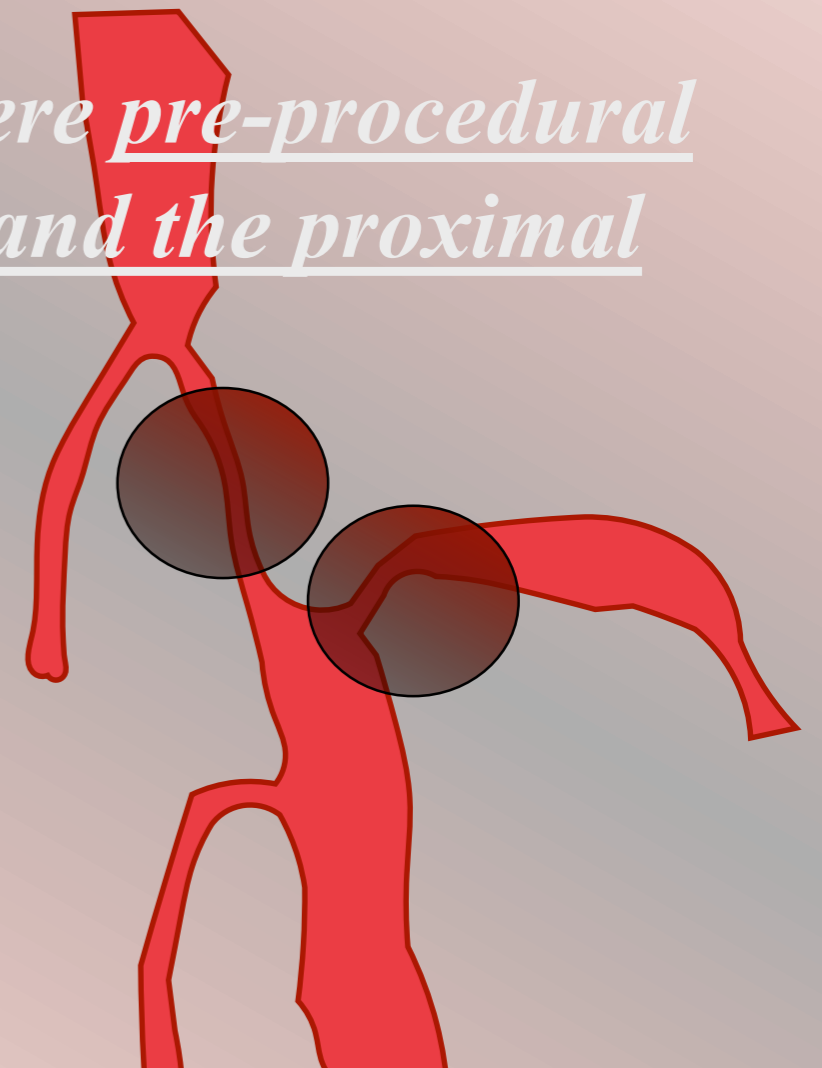
**LA030
CRA30**

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Predictors and Outcomes of Side Branch Occlusion After Main Vessel Stenting in Coronary Bifurcation Lesions

Results From the COBIS II Registry (COronary BIfurcation Stenting)

- ∨ *Independent predictors of SB occlusion were pre-procedural percent diameter stenosis of the SB $\geq 50\%$ and the proximal MV $\geq 50\%$, SB lesion length and ACS.*



CATHETERIZATION & CARDIOVASCULAR INTERVENTIONS

CORONARY ARTERY DISEASE

Modified jailed balloon technique for bifurcation lesions

Shigeru Saito MD, FACC, FSCAI, FJCC , Koki Shishido MD, ... [See all authors](#)

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Conclusion

- √ *We experienced a successful case for severe angled bifurcation lesion with combination of “Reverse Wire Technique” and “Jailed Balloon Technique”.*