

#### ANGIOPLASY SUMMIT 2011 TCT ASIA PACIFIC



Seoul, Korea: 27 - 29 April 2011

Coronary Session 3: Left Main & Bifurcation Summit

# Technical approach for left main disease

Speaker - 12'

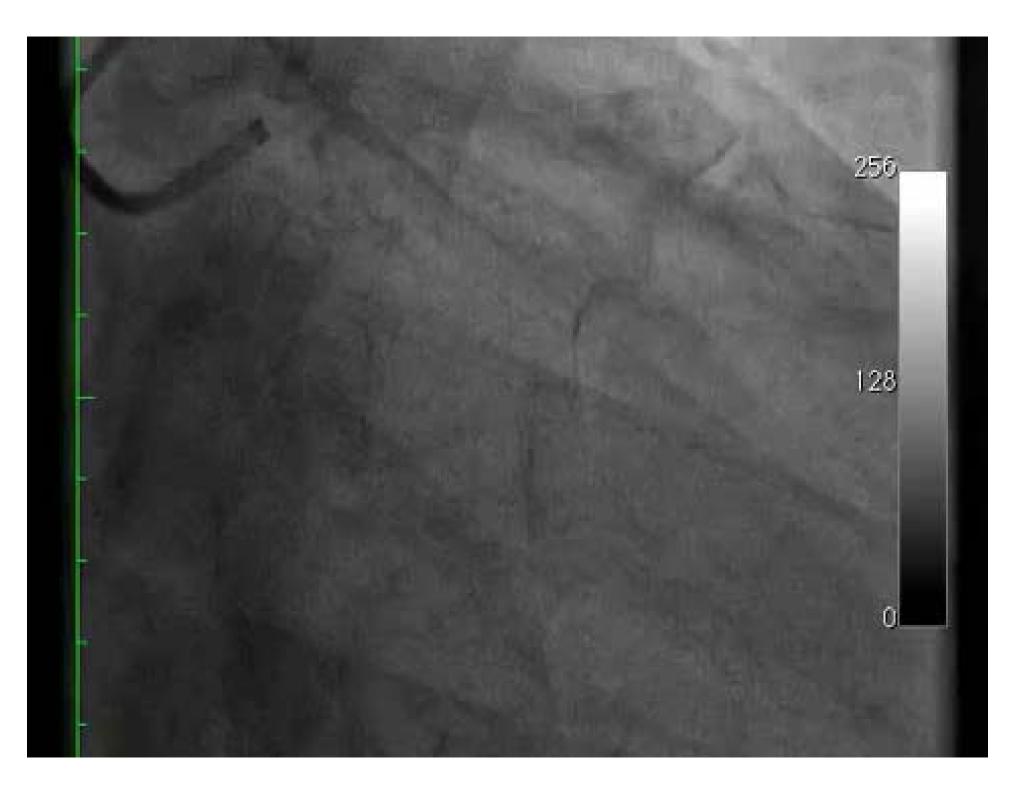
#### Antonio Colombo

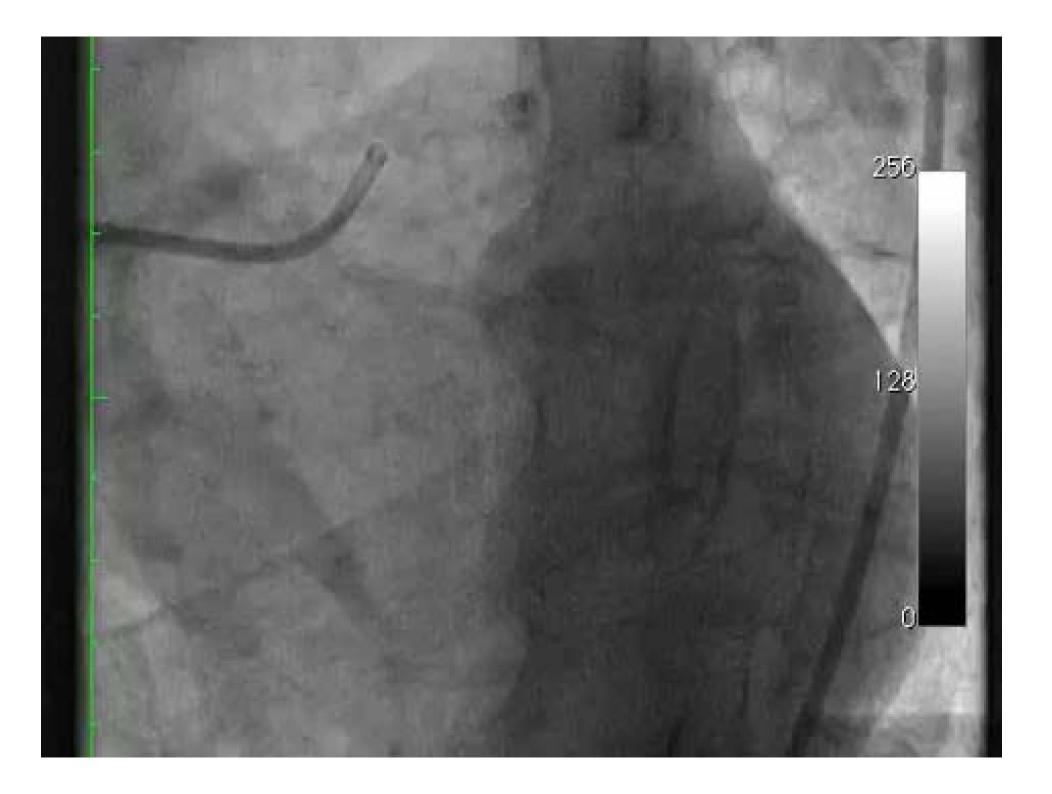
Centro Cuore Columbus and S. Raffaele Scientific Institute, Milan, Italy

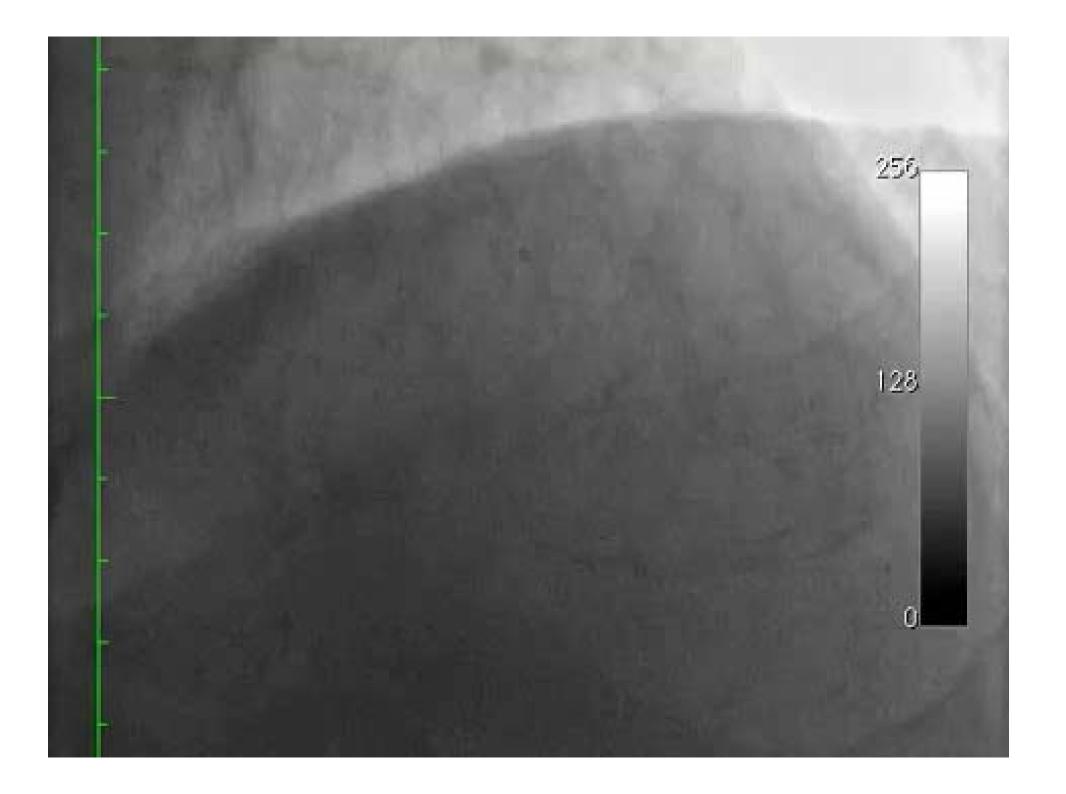




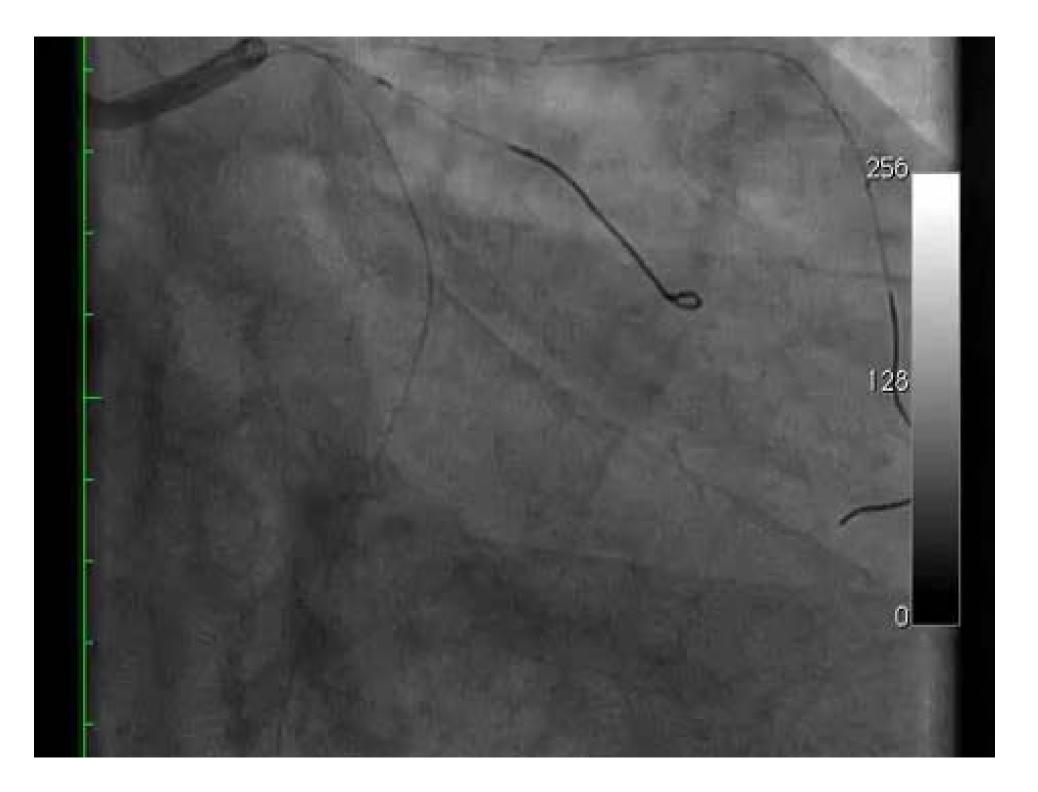
Antonio Colombo is a minor share holder of Cappella Inc., a Company manufacturing a bare metal stent for ostial lesions

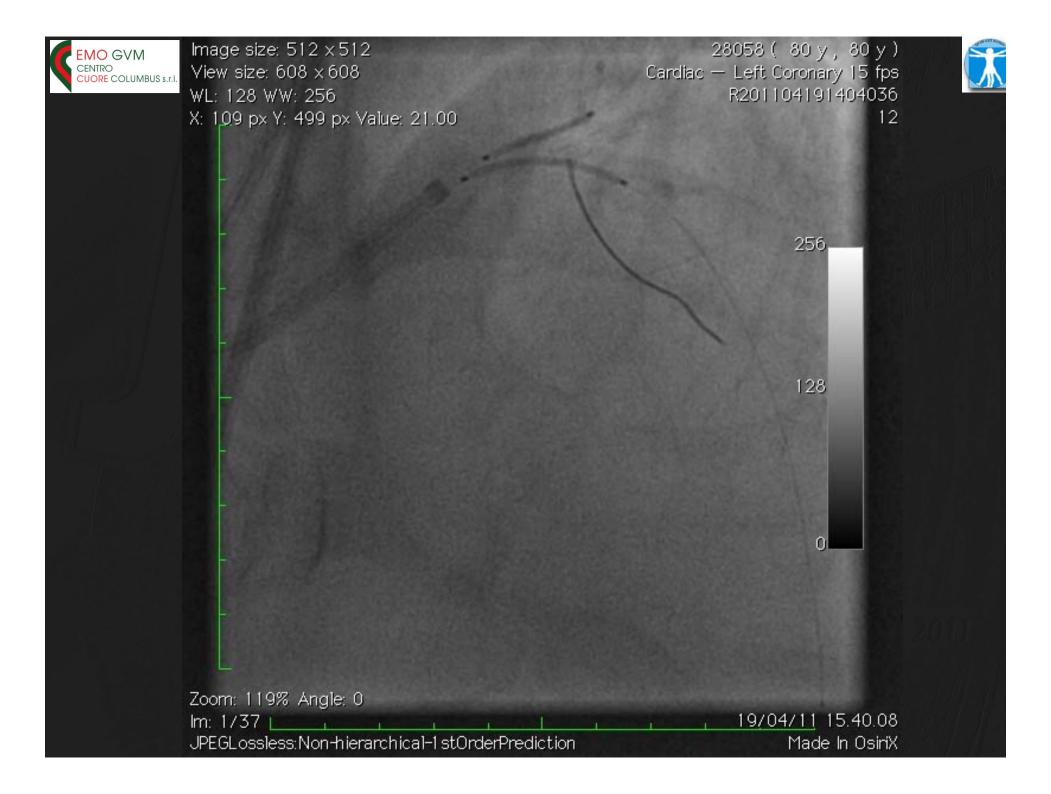


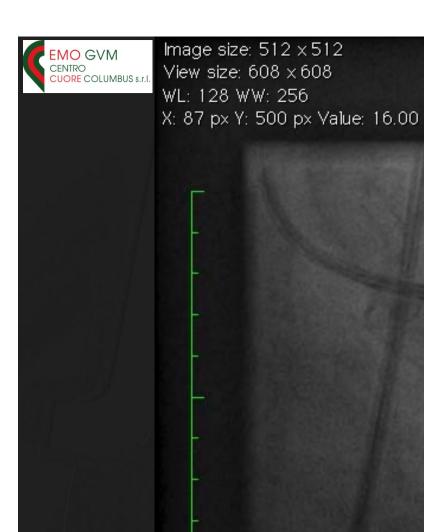










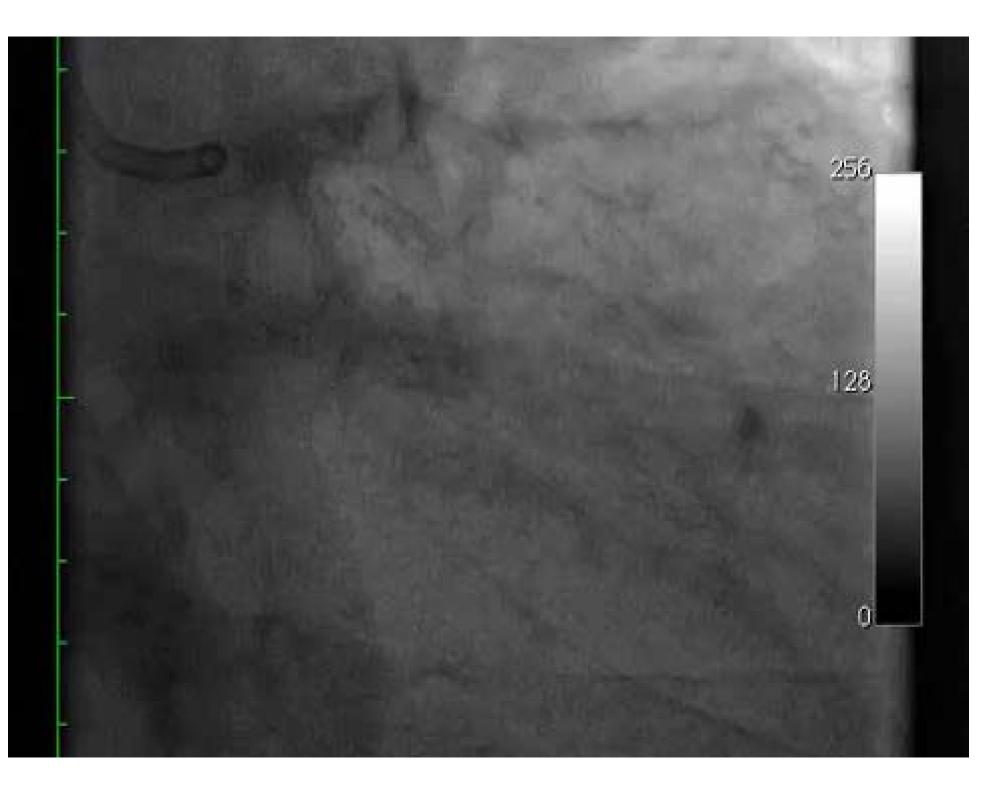


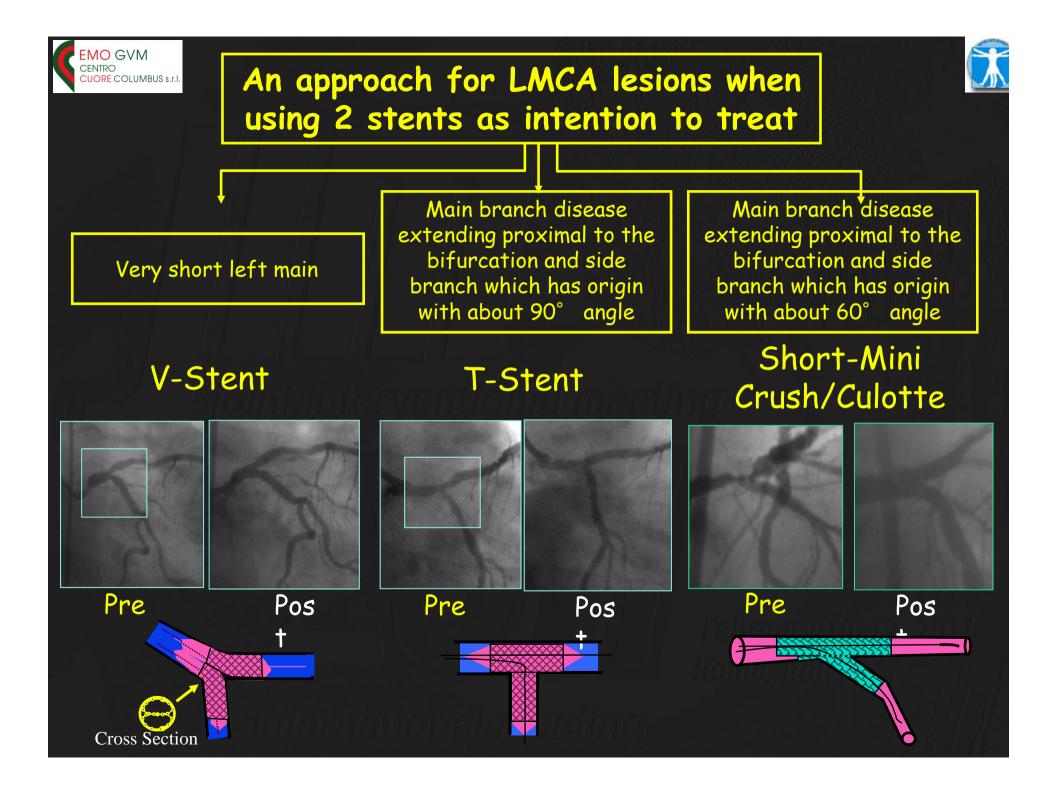








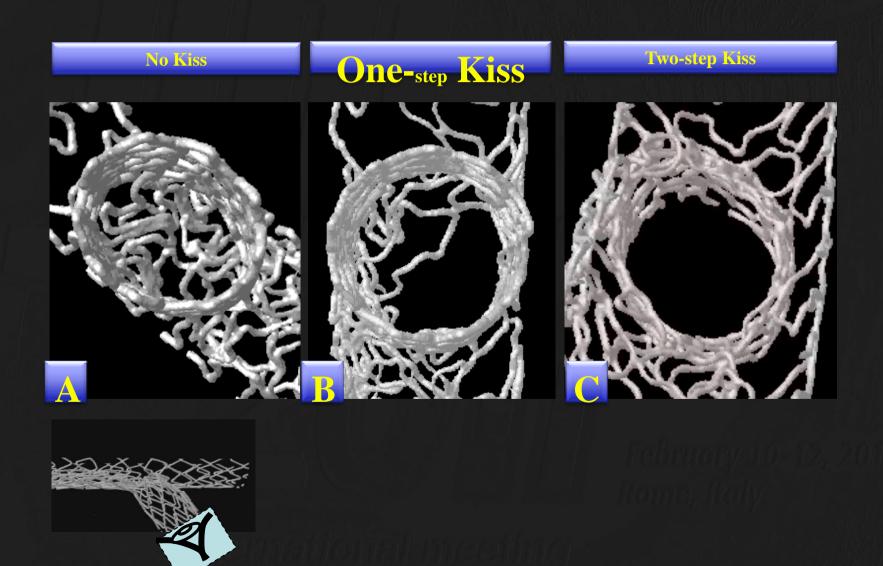








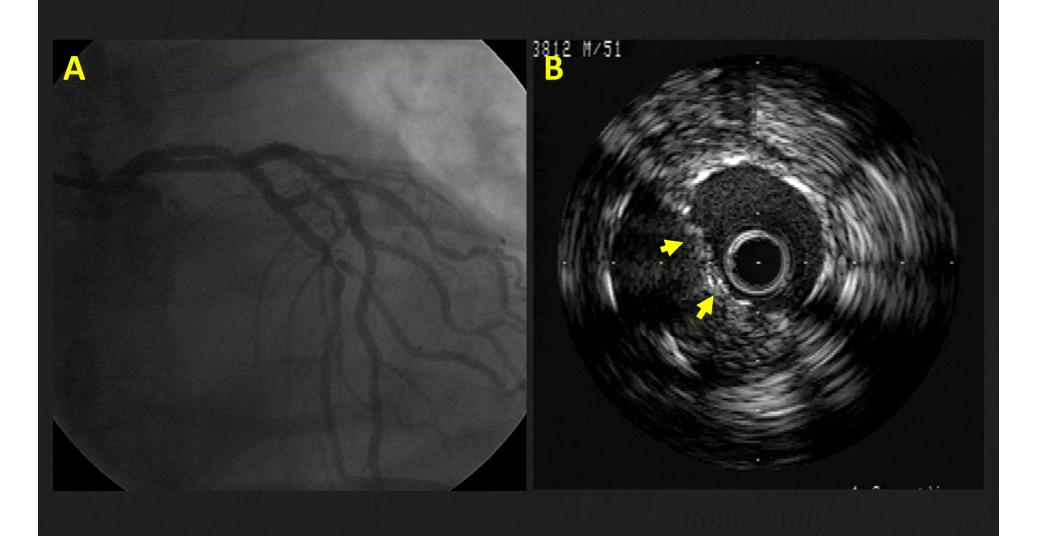
# 2-Step Kiss





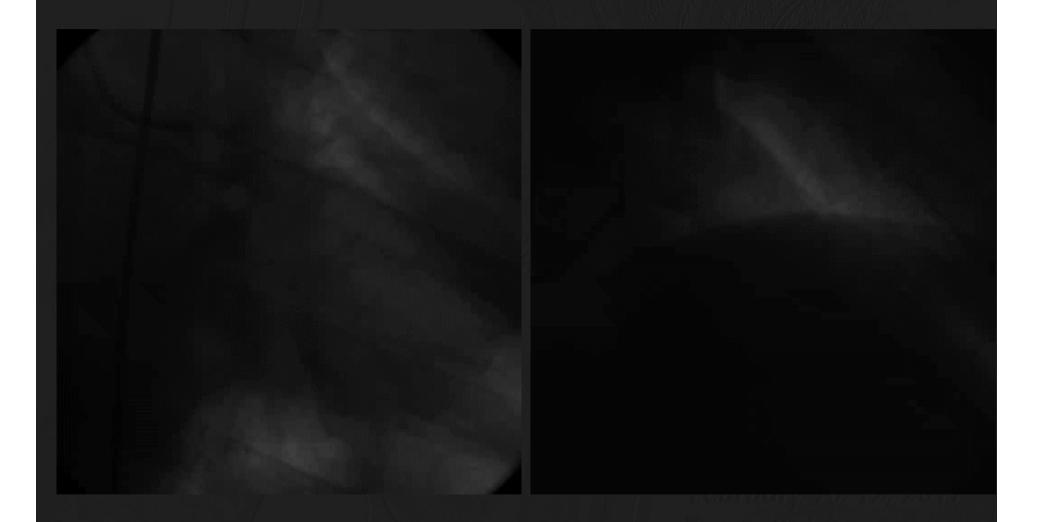


# SKS





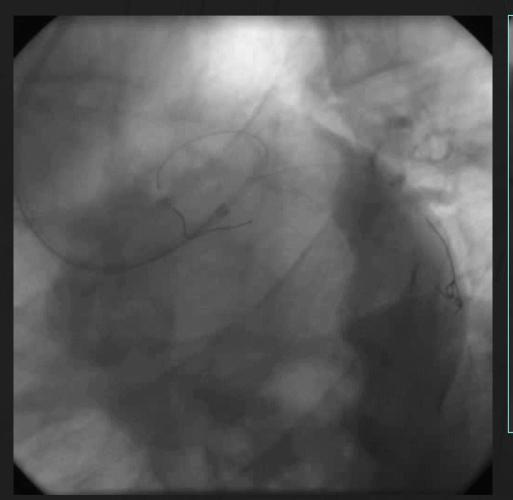




Baseline





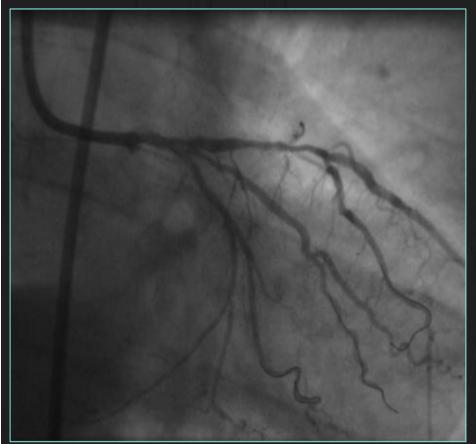




Baseline









Following Left Main Predilatation

Dilatation Intermediate
Branch







Following Dilatation Intermediate Branch

HSR 60206/10









Stenting LM-LAD

Following Stenting LM-LAD

HSR 60206/10



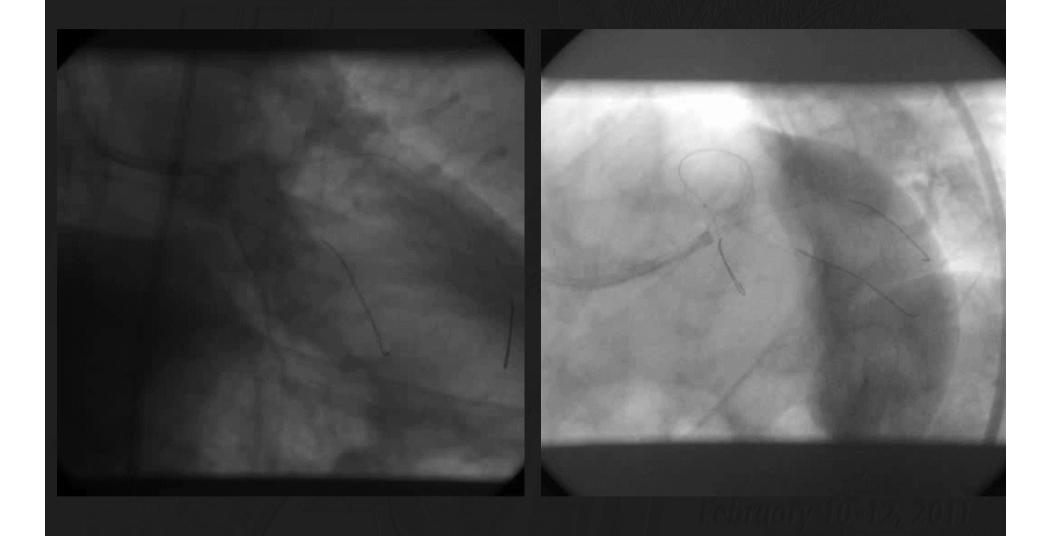




Kissing Balloon Inflation





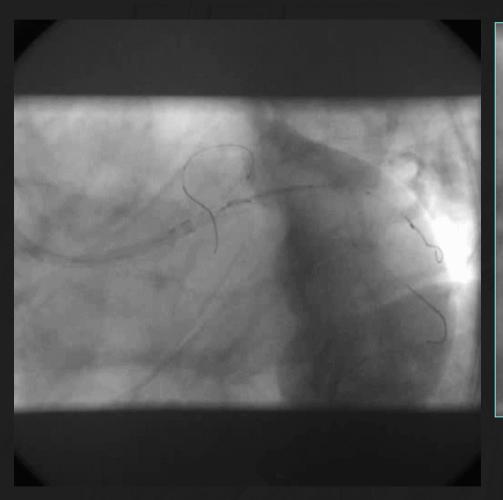


Following Kissing Balloon Inflation

HSR 60206/10





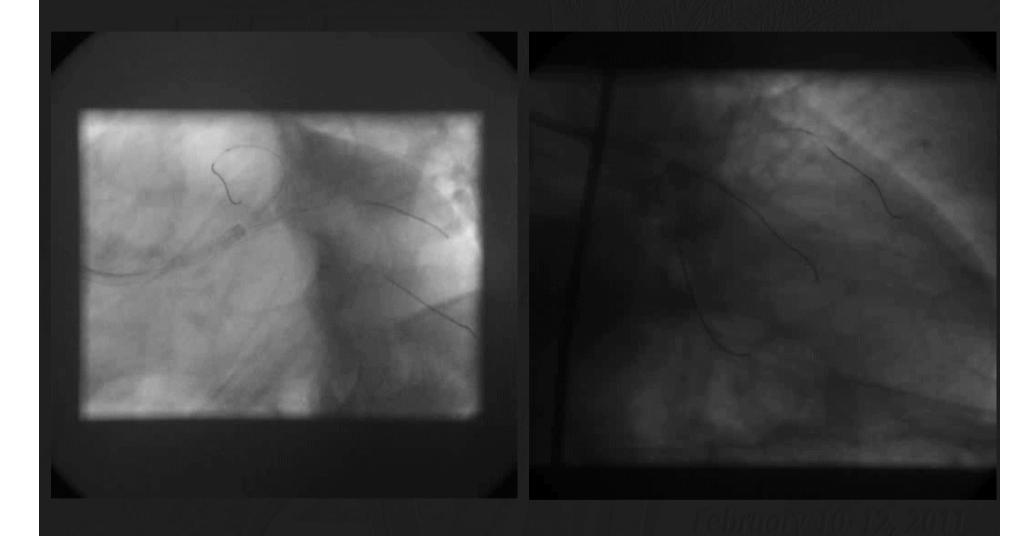




Positioning Intermediate Stent - TAP technique



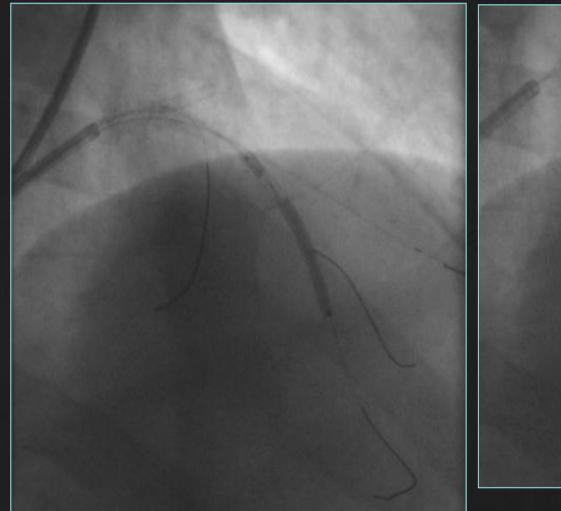


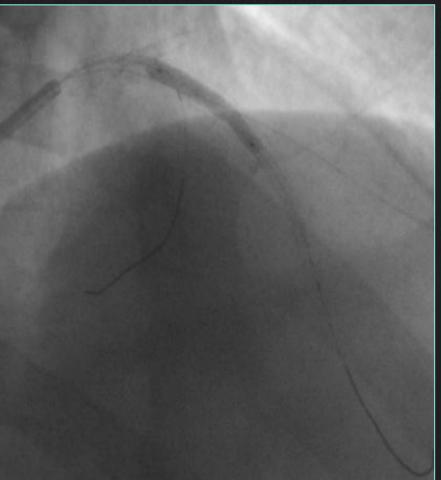


Following Intermediate Stent and Kissing









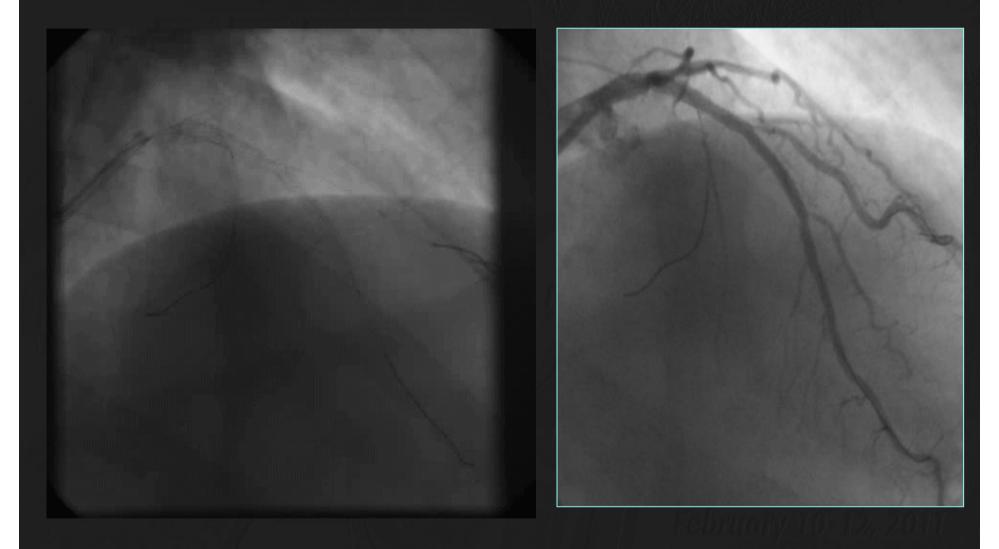
Mid LAD and Diag Dilatation

Mid LAD Stenting

HSR 60206/10







Following Mid LAD Stenting Provisional for Diag Branch







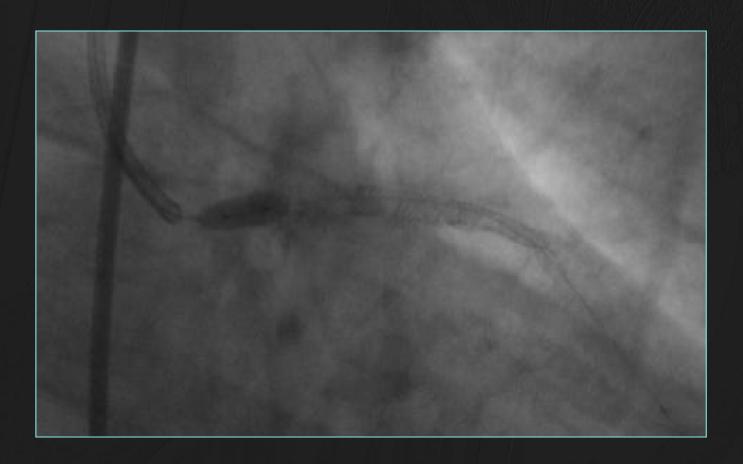
TAP technique Diagonal Branch

Following stent Diagonal Branch

HSR 60206/10



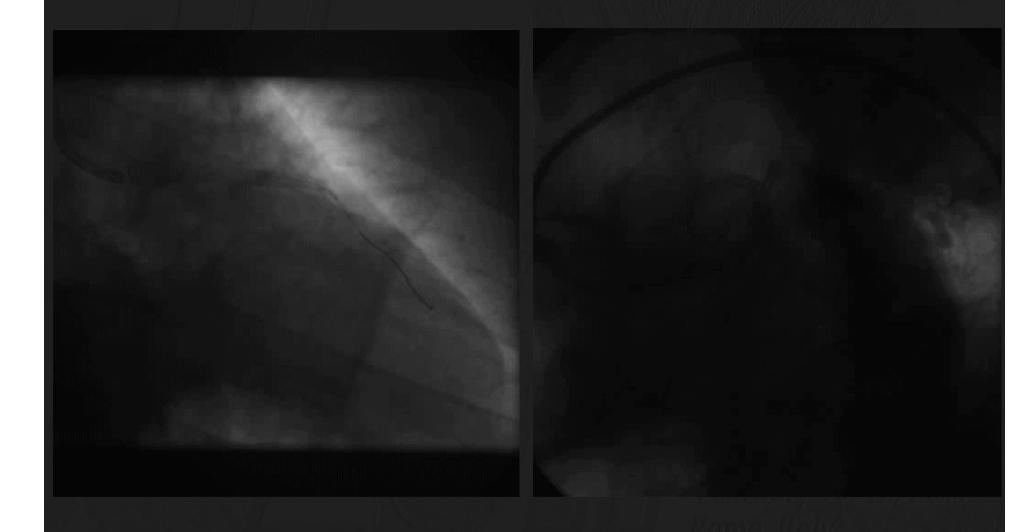




Post dilatation Left Main Body







Final Result









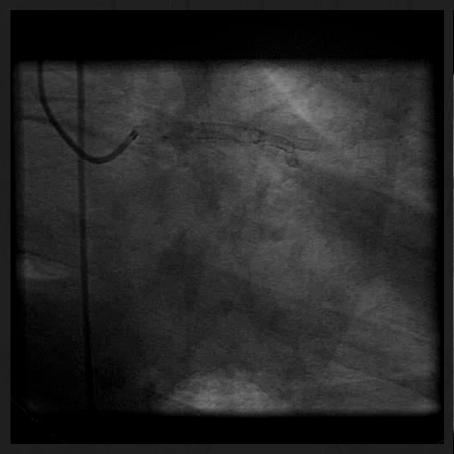
Final Result

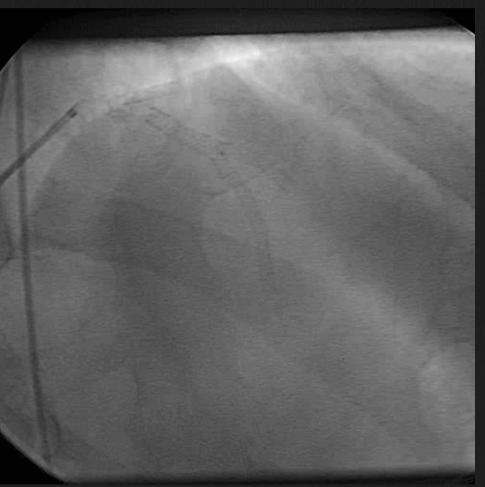




6-Months F-UP

- Patient AsymptomaticNegative Maximal Stress Test









6-Months F-UP

- Patient Asymptomatic
- Negative Maximal Stress Test

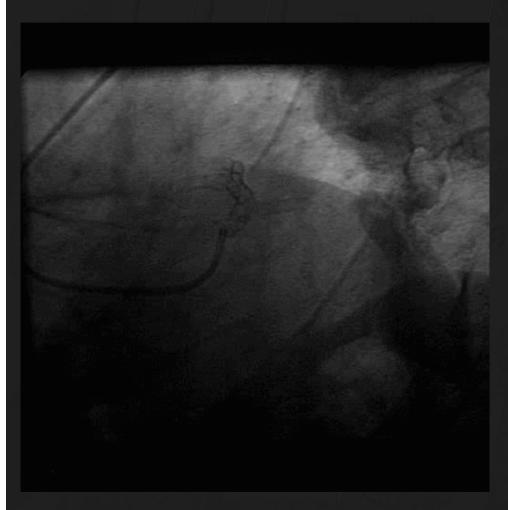


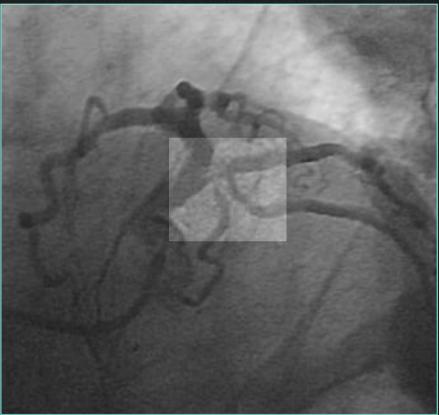




6-Months F-UP

- Patient AsymptomaticNegative Maximal Stress Test

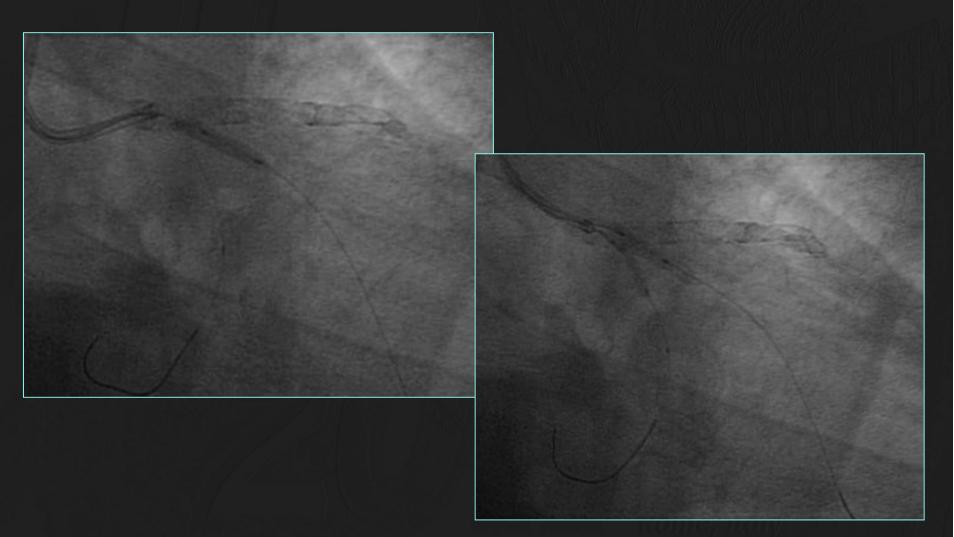








6-Months F-UP

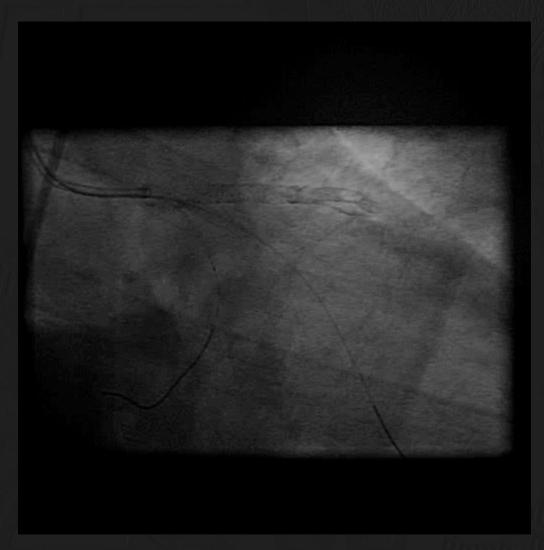


Balloon Dilatation CX-Intermediate





6-Months F-UP

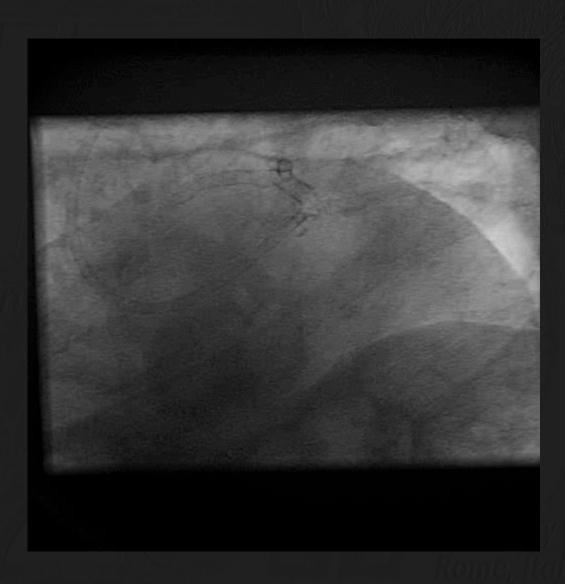


Following Dilatation CX-Intermediate





6-Months F-UP



Final Result





#### Distal Left Main and Multivessel Disease



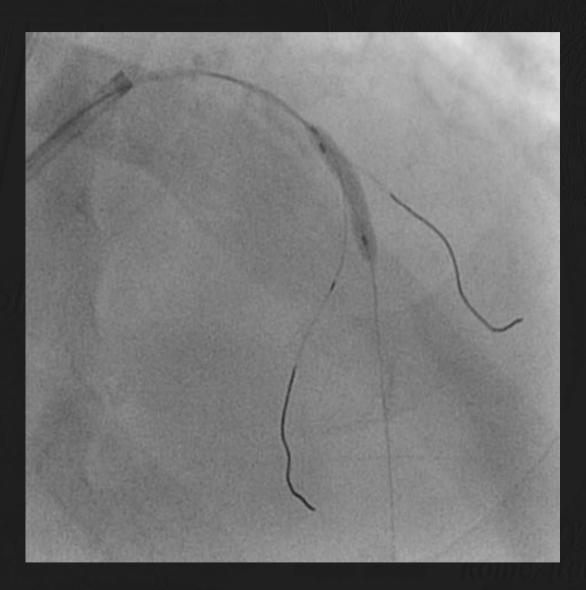




Baseline





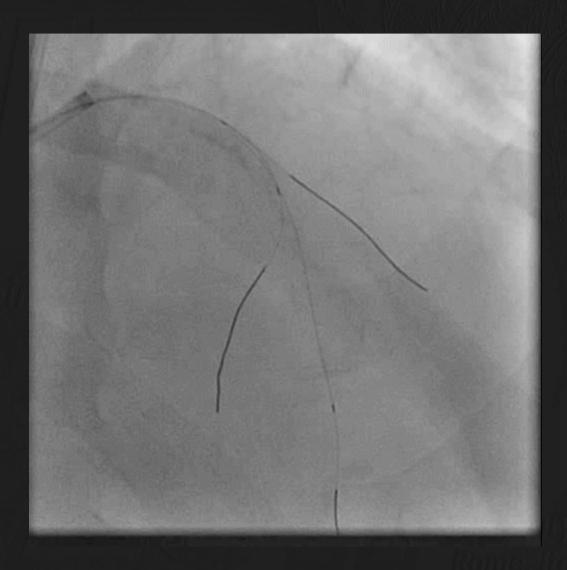


Quantum  $3.5 \times 15$  mm 20Atm

27260/09*CCC* 





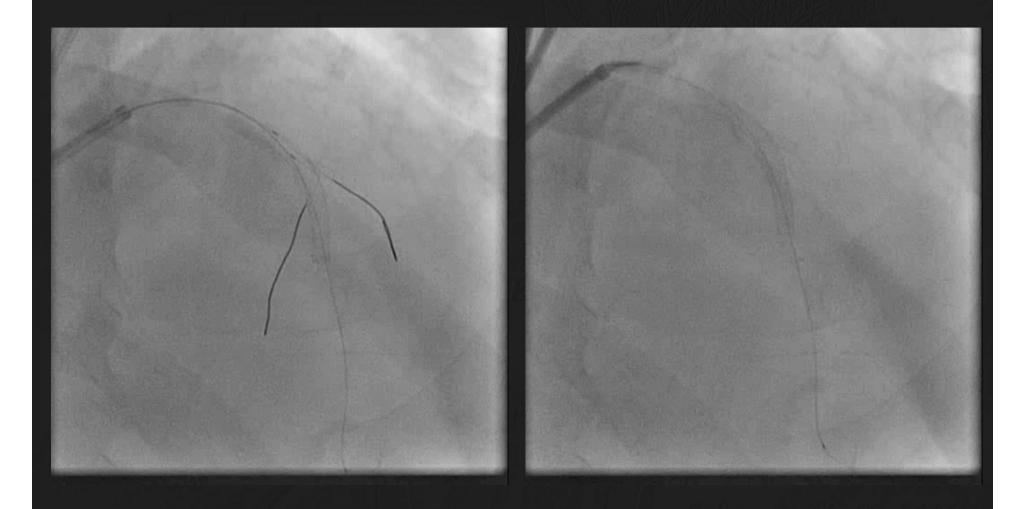


Deterioration of proximal Diagonal

27260/09*CCC* 



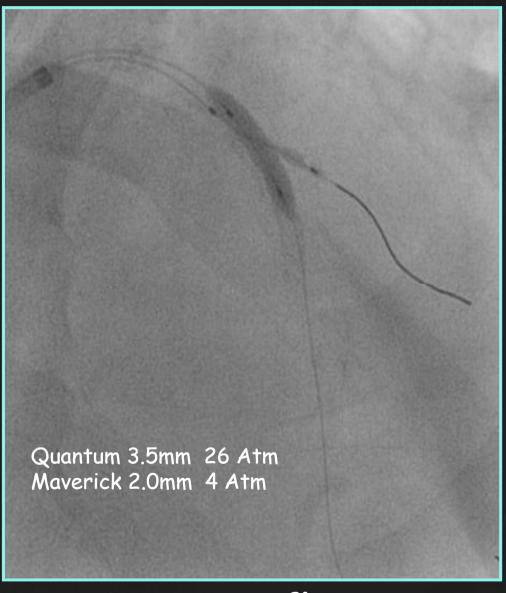




After Stenting Taxus 2.25x8mm Ostium Diagonal and after 3.5x30mm DES stenting of LAD 27260/09CCC



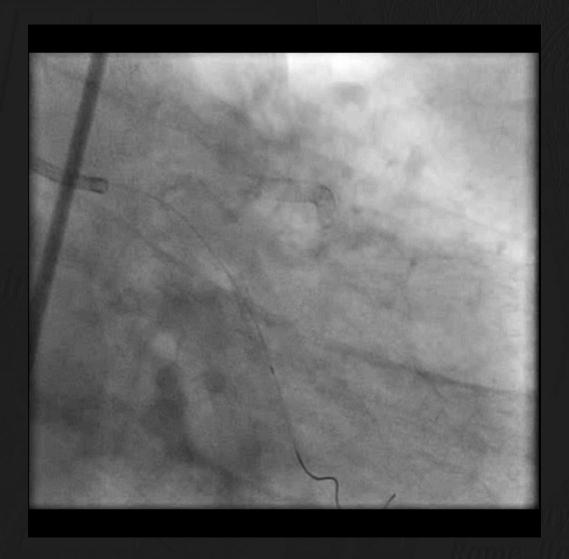




Kissing Inflation



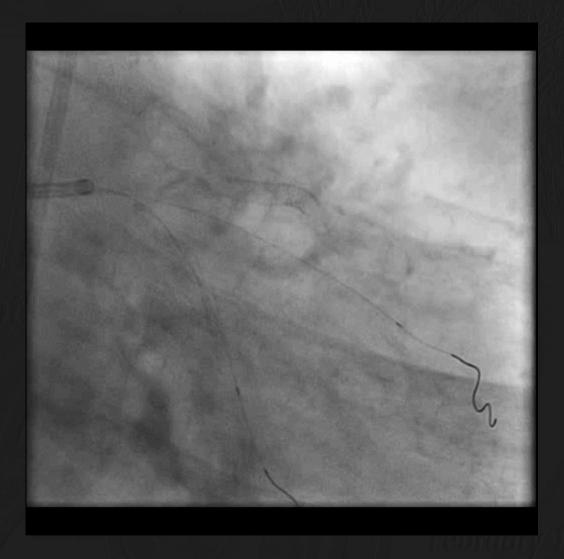




After stenting the OM





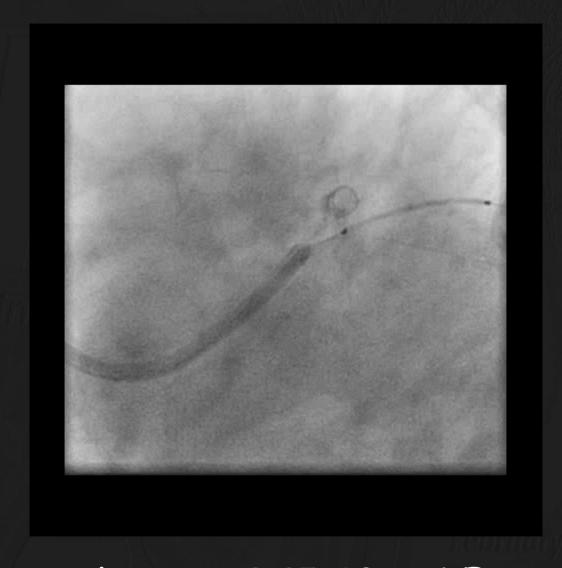


Treatment Intermediate Branch

27260/09*CCC* 







Implantation 2.25x30mm DES Following Pre-dilatation with Maverick 2.0mm



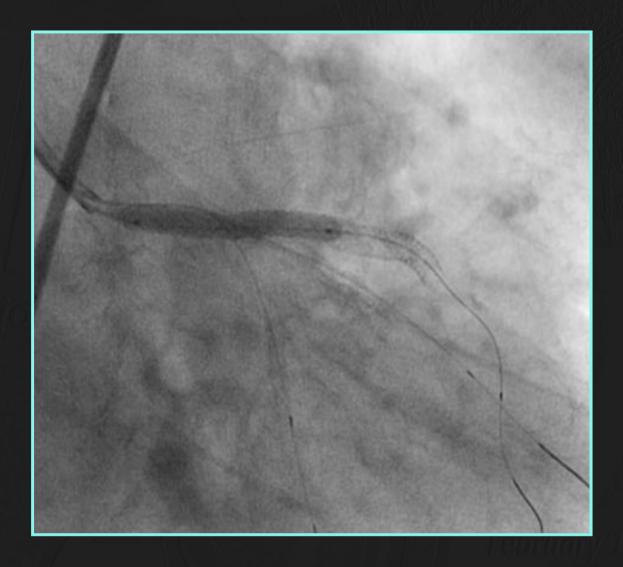




Post-dilatation Intermediate Branch with 2.5mm Quantum 20 Atm 27260/09CCC







3.5x28mm DES stenting LM  $\rightarrow$  LAD



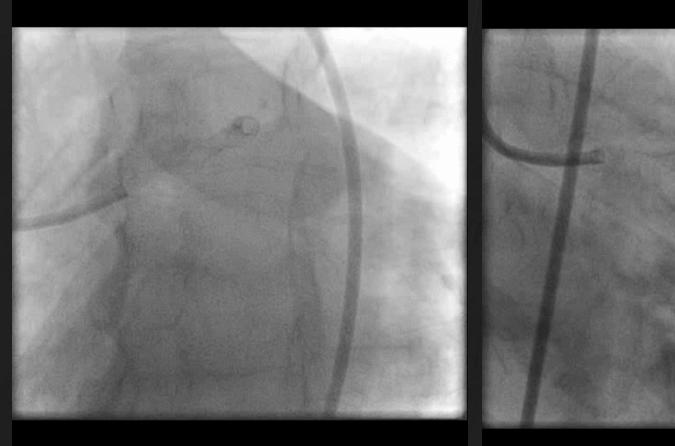


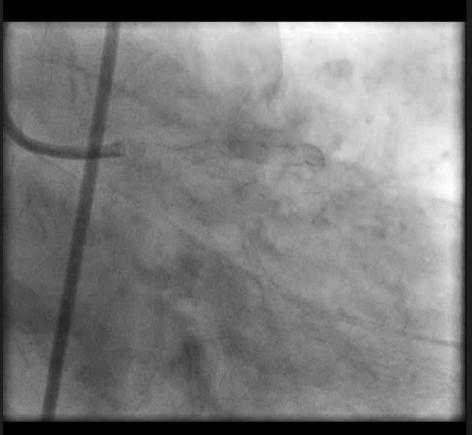


Post Stenting

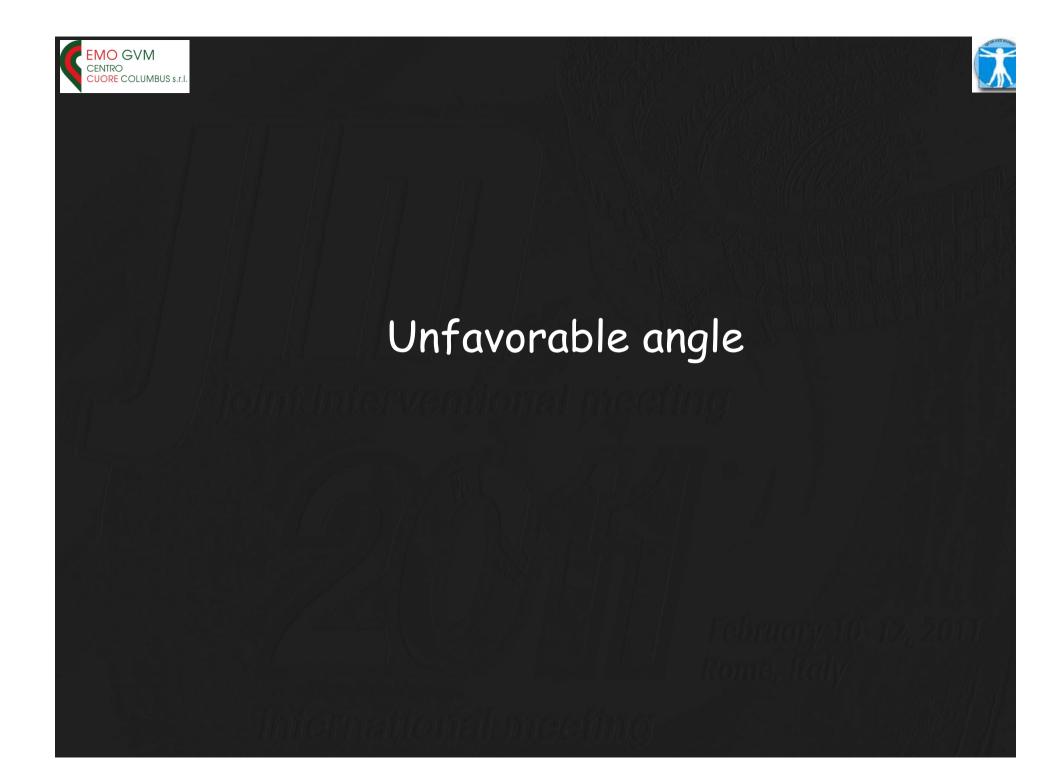








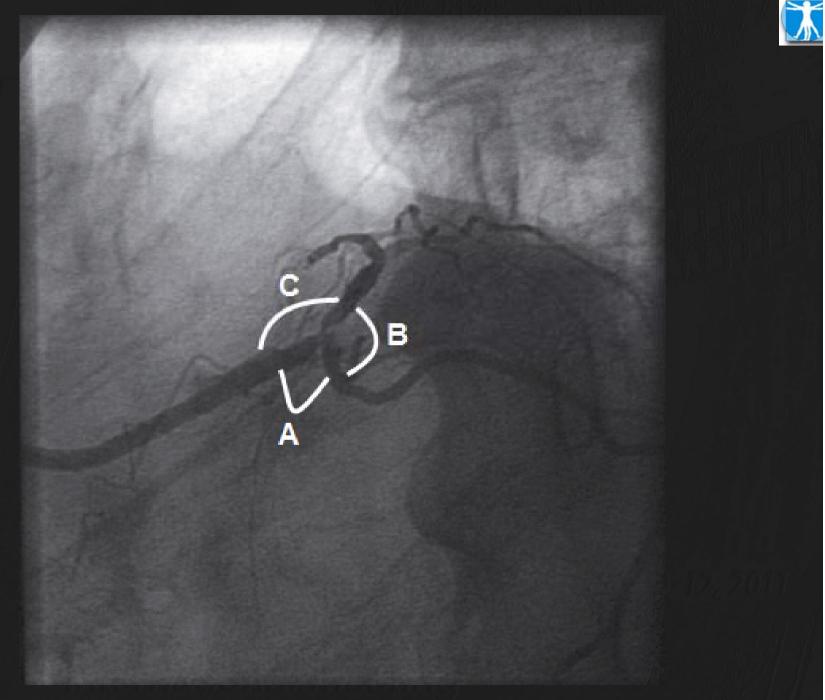
After Triple Balloon Kissing Inflation





n f a a n o u 9 r 9 a b

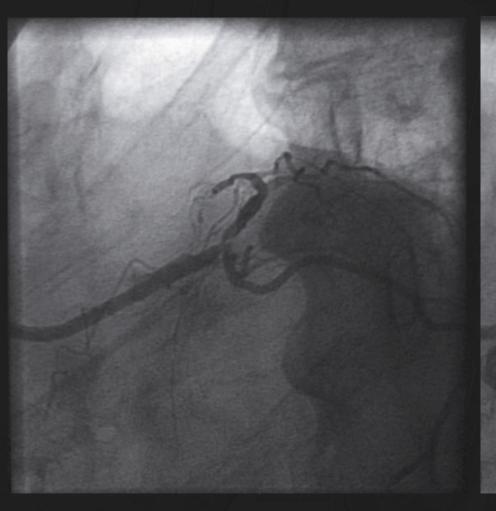
e

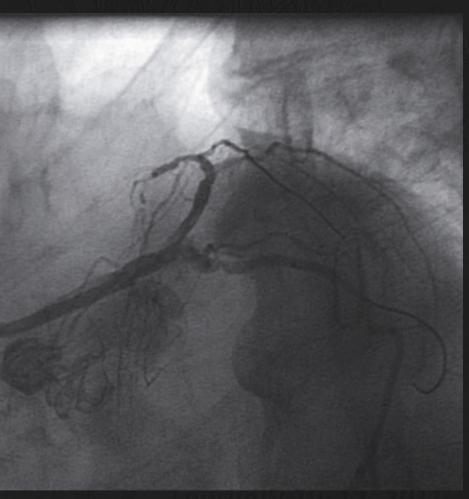






# Unfavourable angle









### Unfavourable angle: mini crush







## Final Kissing Balloon inflation

In real life Final Kissing Balloon inflation is performed 30%-50% of the times with provisional stenting and we do not know what would have happened if the operators did not performed Final Kissing Balloon at all.

The bottom line could be that Final Kissing Balloon inflation is not mandatory, but there are situations where it is important



### **European Bifurcation Club Consensus**



- Complex technique: Kissing balloon inflation for carina reconstruction is mandatory in two stent techniques;
- Simple technique: Kissing balloon inflations, or pressure wire interrogation, should be used in provisional stenting when an angiographically significant (>75%) side branch lesion remains after main branch stenting;

### **NORD-BIF III "Nordic kiss"**

FKB inflation reduced restenosis in the SB: overall from 15% to 8% and in true bifurcations from 20% to 7%

