Unusual Case of Ostial Left Main stenosis after LAD Intervention

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Case History

- 56 yr old/male
- HTN, Diabetes
- Chest pain on exertion class 3
- ECG-T wave inversion- V1 to V4
- ECHO-RWMA of IVS, Good LV function (EF-52%)
- CPKMB 26 units
- TropT positive
CAG

- LMCA Normal
- LAD 80% Proximal lesion
- LCX & RCA Normal
Coronary Angiogram

LAD Proximal tight lesion

RCA
Interventional Management

- 6F Terumo Sheath-Rt radial access.
- 6F VL 3 Guide.
- BMW 0.14”x180.
- Predialated & 3x18mm BMS deployed at 14 atm with good results.
- After 3 months angina with TMT positive for inducible ischemia.
- Check Angio-85% instent restenosis.
Conti...

- Predialated & DES (Biomime) 3x23mm deployed at 18 atm with good result.
- Patient had a angina class III with inducible ischemia after 6 months.
- 2nd Check Angio-Patent stent with 20% luminal loss & tight ostial left main stenosis.
- Patient underwent LIMA graft to LAD with relief of angina.
After 4 months of CABG patient had recurrence of exertional angina with positive inducible ischemia.

3rd Check Angio revealed distal anastomotic 99% lesion with thin antegrade filling of distal LAD.

LIMA angioplasty was planned-unable to negotiate the wire due to tortuous LIMA & angulated anastomotic lesion.

Ostial left main stenting was done-4x8mm DES deployed at 18 atm with good result.
Interventional Procedure

BMS 3x18mm

Post stent good result
Follow-up CAG & DES for ISR

1st Check CAG-85% ISR

DES 3x23mm for ISR
Patent DES  

Ostial Lt Main

Good Result after DES for ISR  

2nd Check CAG-Ostial Lt Main
LI MA Stenosis

3rd Check CAG- Distal anastomotic lesion

3rd Check CAG-Distal anastomotic lesion
LMCA Intervention

Predilatation

DES Deployment-4x8mm
LMCA Intervention Cont..

Post stent high pressure dilatation | Final Result
Take Home message

- This is a unusual case of left main ostial stenosis after LAD intervention.
- Possible reason being vascular injury induced by inadvertent guiding catheter suction during redo intervention.
- Left Main Stenting was done to make the treatment strategy simple.