

# Invited case

A complex Left main Bifurcation Case

T. Lefèvre, Massy, France



#### **Disclosure Statement of Financial Interest**

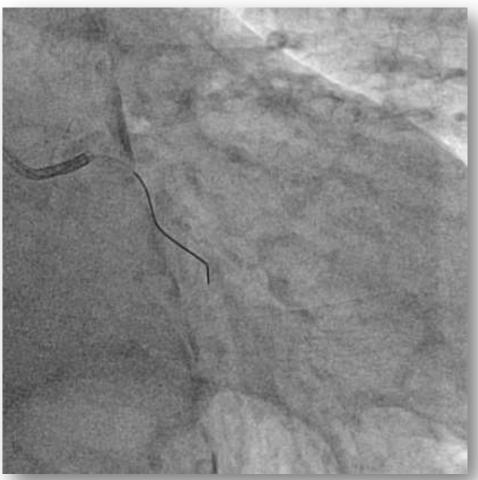
Within the past 12 months, I or my spouse/partner have had a financial interest/arrangement or affiliation with the organization(s) listed below.

#### Affiliation/Financial Relationship Company

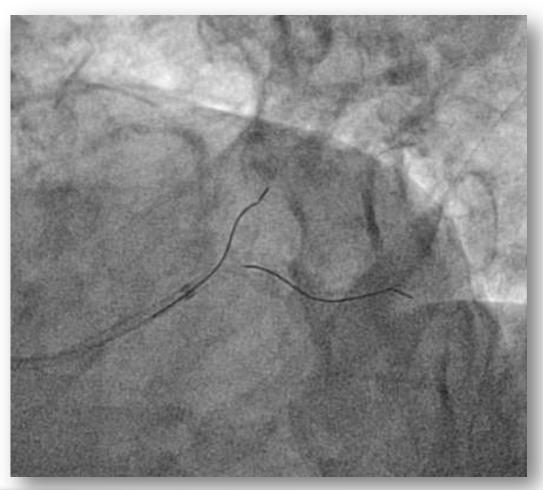
- Grant/Research Support
- Consulting Fees/Honoraria
- Major Stock Shareholder/Equity
- Royalty Income
- Ownership/Founder
- Intellectual Property Rights
- Other Financial Benefit

Abbott, Astra Zeneca, Lily, Edwards

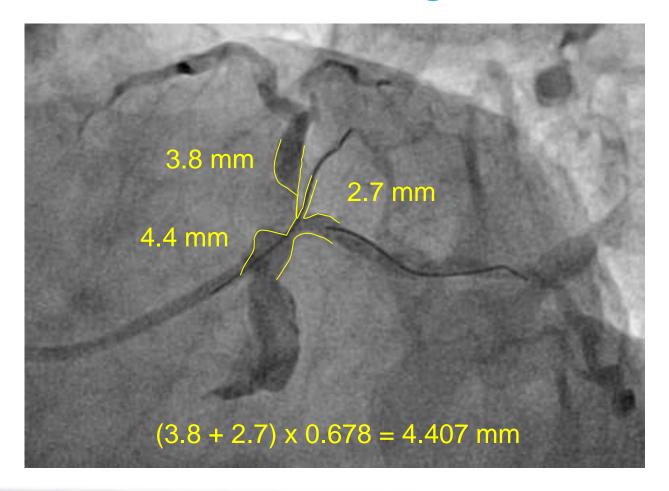
- ✓ Active
- ✓ Admitted in an other hospital for de novo angina
- ✓ HBP, Dyslipidemia, BMI 27
- ✓ Normal EKG
- ✓ Normal renal function (Clairance 56ml/min.)
- ✓ Severe LM disease, normal RCA
- ✓ Transferred for PCI after CABG refusal

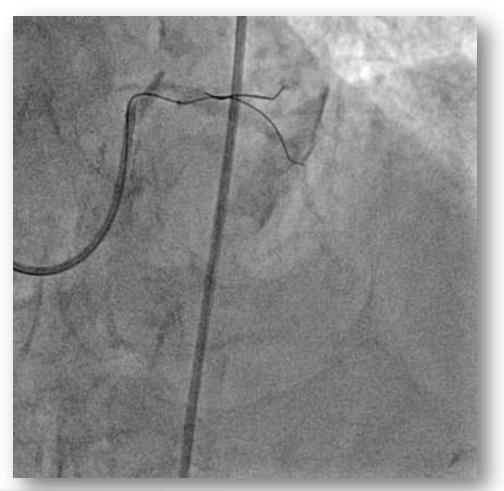


Right TRA
EBU 4.0 6F
Runthrough SB



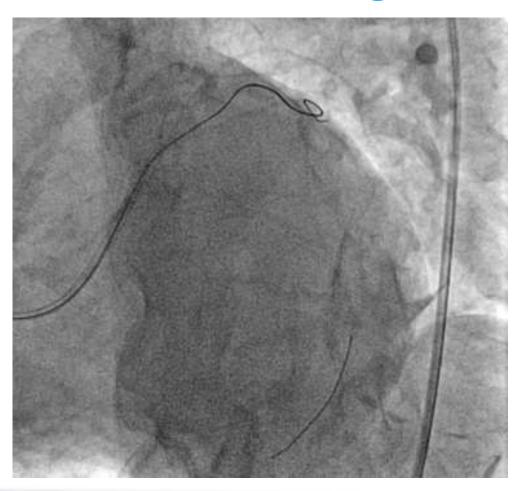
Right TRA
EBU 4.0 6F
Runthrough SB
Runthrough IB

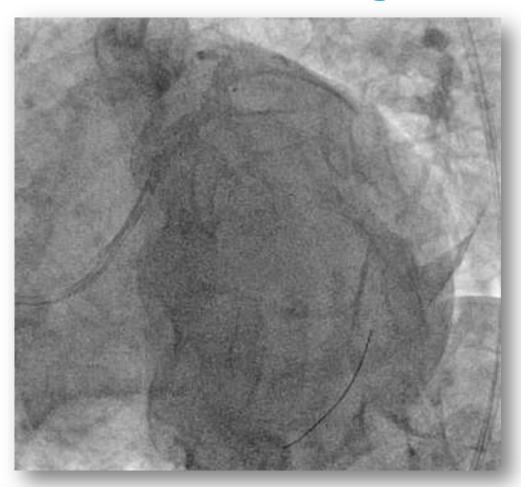


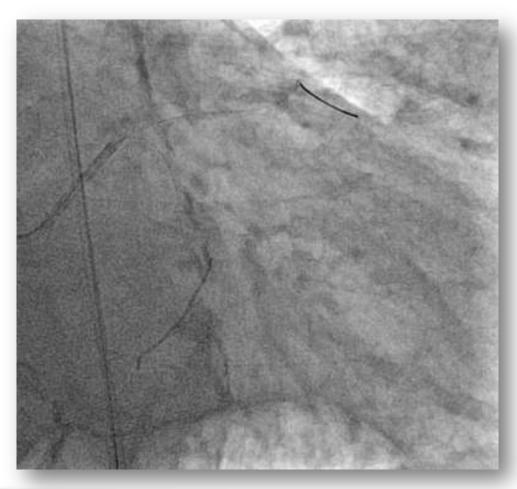












Right TRA

EBU 4.0 6F

Runthrough SB

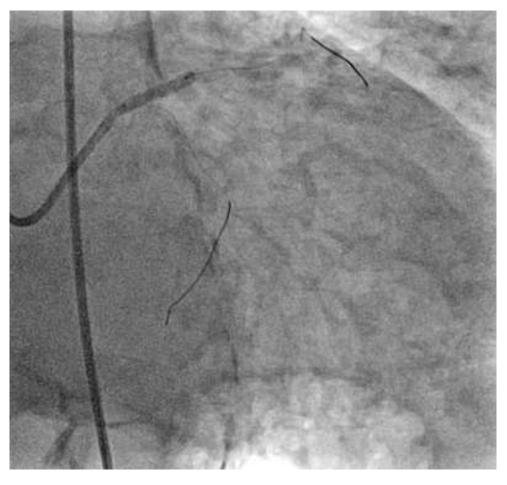
Runthrough IB

Finecross

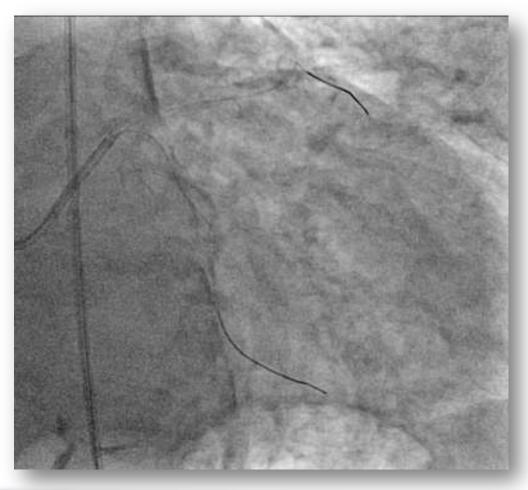
Gaia 2

Rotawire

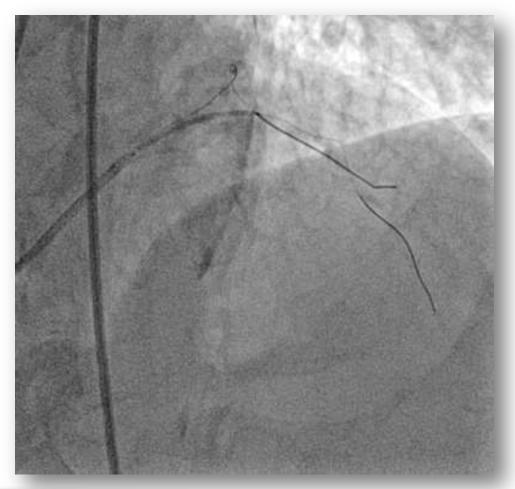
Bur 1.75



BMW 0.014 Accuforce 3 x15

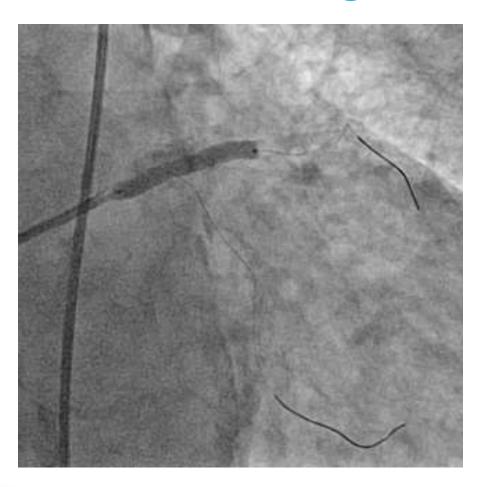


BMW 0.014
Accuforce 3 x15

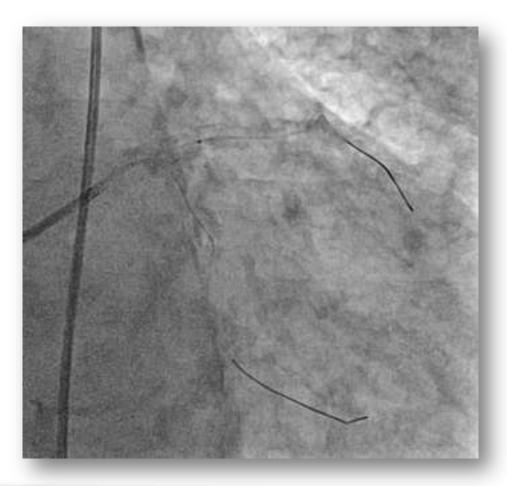


BMW 0.014 Accuforce 3 x15

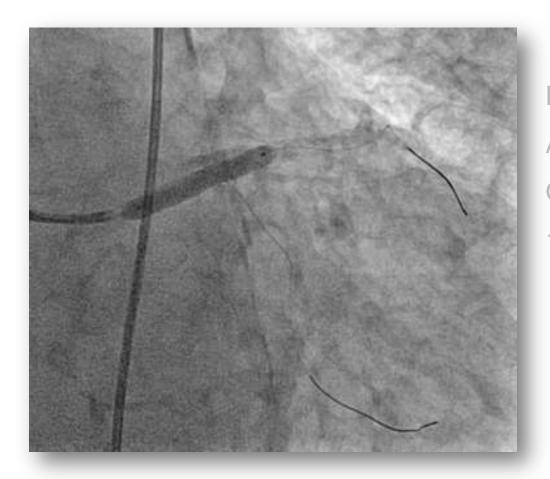
Onyx 4.0 x 26



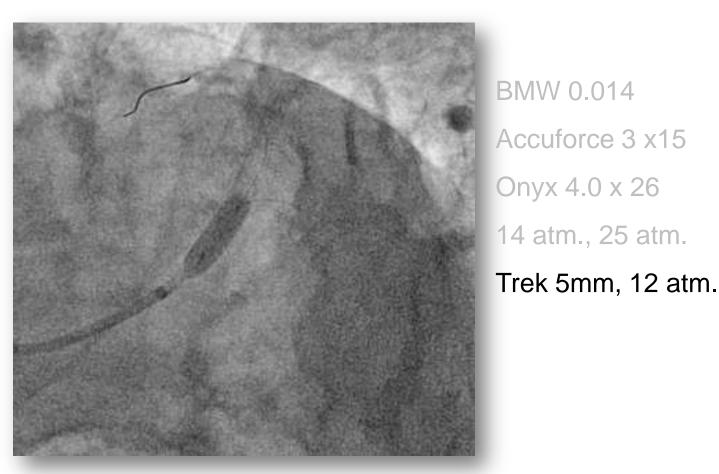
BMW 0.014
Accuforce 3 x15
Onyx 4.0 x 26
14 atm.



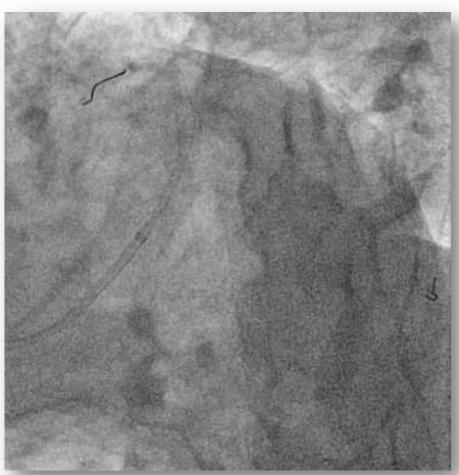
BMW 0.014
Accuforce 3 x15
Onyx 4.0 x 26
14 atm.



BMW 0.014
Accuforce 3 x15
Onyx 4.0 x 26
14 atm., 25 atm.

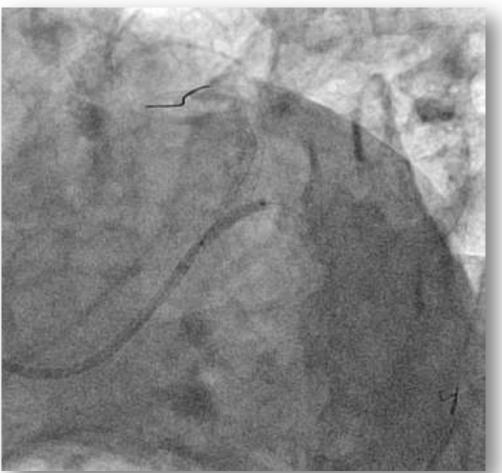


BMW 0.014 Accuforce 3 x15 Onyx 4.0 x 26 14 atm., 25 atm.



BMW 0.014
Accuforce 3 x15
Onyx 4.0 x 26
14 atm., 25 atm.

Trek 5mm, 12 atm.



BMW 0.014

Accuforce 3 x15

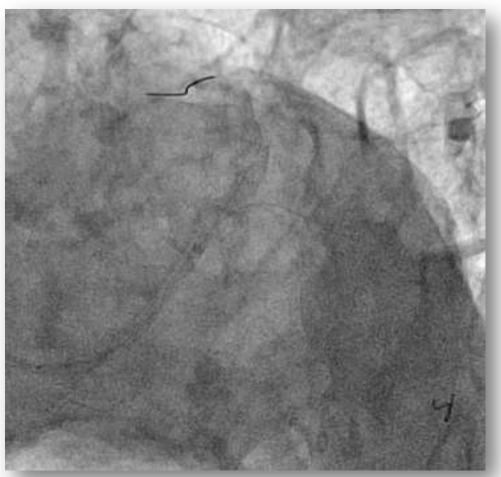
Onyx 4.0 x 26

14 atm., 25 atm.

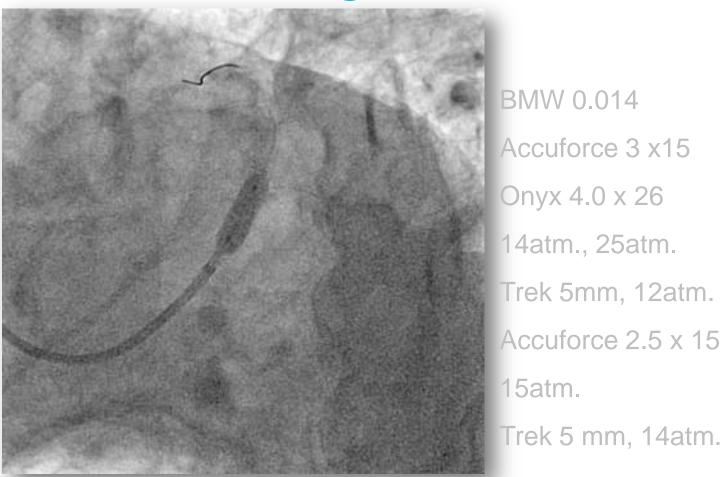
Trek 5mm, 12 atm.

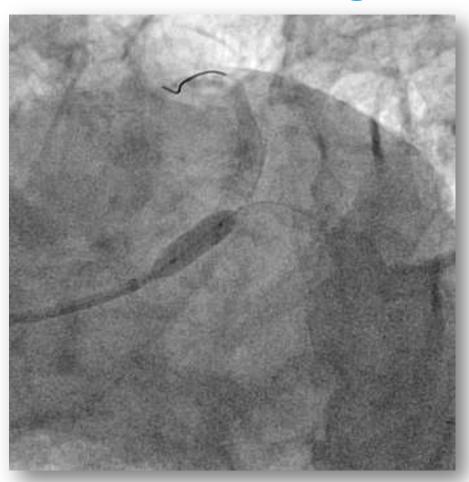
Accuforce 2.5 x 15

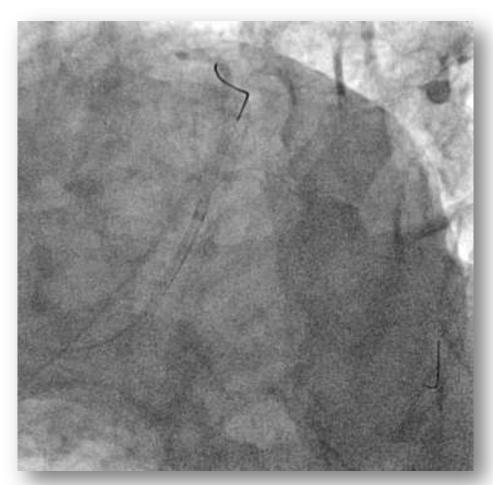
15 atm.

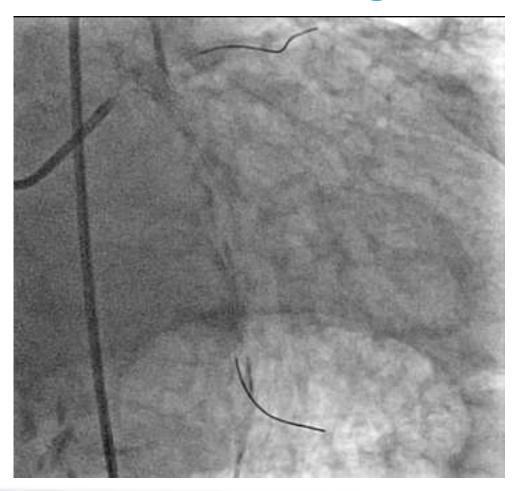


Accuforce 3 x15
Onyx 4.0 x 26
14 atm., 25 atm.
Trek 5mm, 12 atm.
Accuforce 2.5 x 15









# Take home message

Even for LM disease, Provisional Side Branch stenting can be used in the majority of cases with excellent long-term outcome.

The rate of success depends mainly on very simple rules:

- Optimal working view and analysys of the lesion
- One wire in each branch
- MB stent size according to distal reference
- Liberal use of the POT technique
- Access toward the distal strut
- Final kissing or POT/Side/POT
- If a second stent is needed, T stenting should be preferred