



A DELATED IATROGENIC LEFT MAIN PCI CAUSED BY CARDIAC CATHETERIZATION

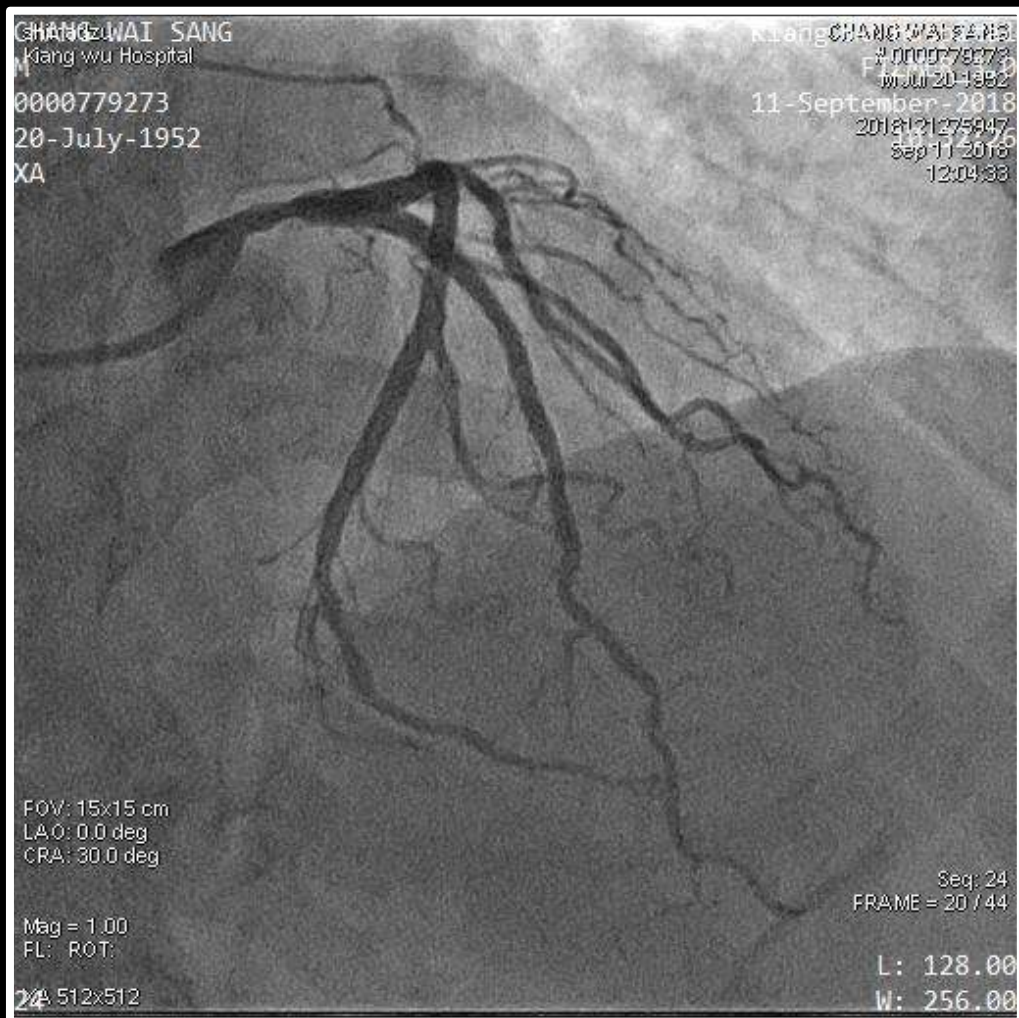
Dr. Chris Wong

Consultant, The Heart Clinic

HISTORY

- Mr. C 66 years male
- Had stent implanted at mid-2017
- Chest Pain in August 2018, advise for CAG
- CAG: 11/Sept 2018 done in other hospital

SEPT 11, 2019 CORO



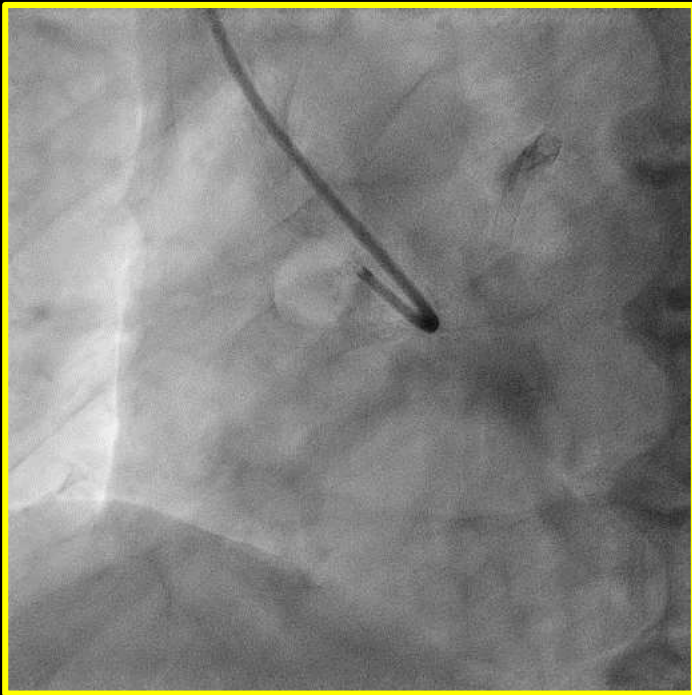
RESULT

- Distal LM ~50% stenosis
- Mid-LAD ISR ~20-30%
- Proximal LCX ISR ~60%; LCX Stent patent
- No Intravascular imaging performed
- Advised Medical Treatment
- Discharged 13/Sept
- Changed Plavix to Brilinta

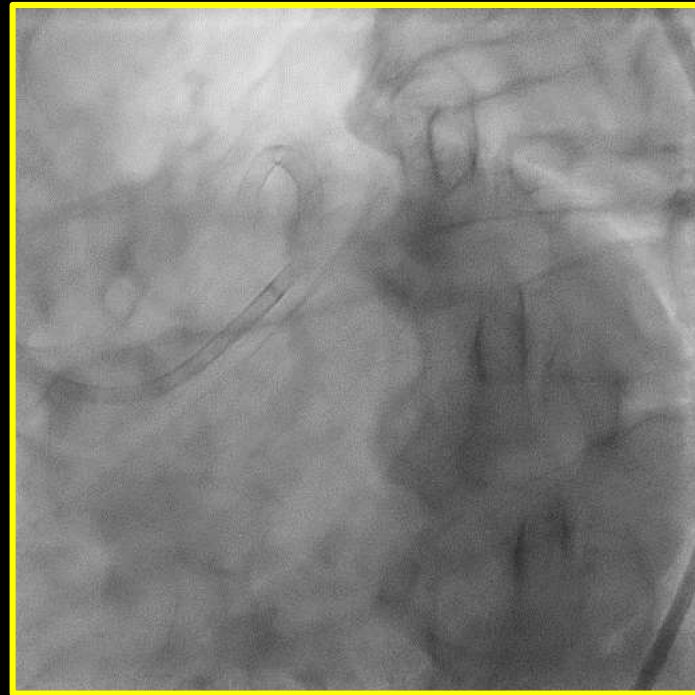
WHAT HAPPENED ?

- 3/10 2018, consultation with severe chest pain on exertion and at times, rest pain, one week after discharged
- Symptoms like acute coronary syndrome
- Advised for admission, from Macau to Hong Kong
- Admitted by 5/Oct 2018
- Cardiac catheterization at the same day

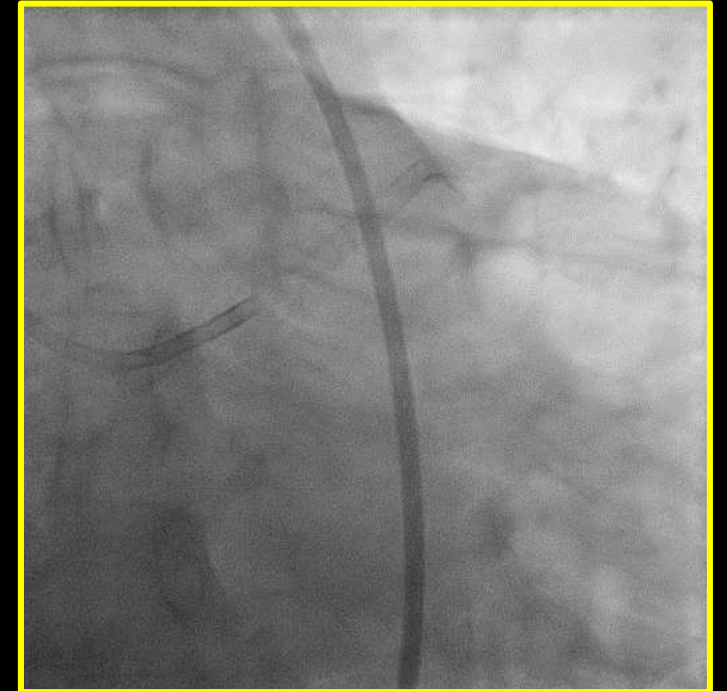
OCT 5, 2018
CORO



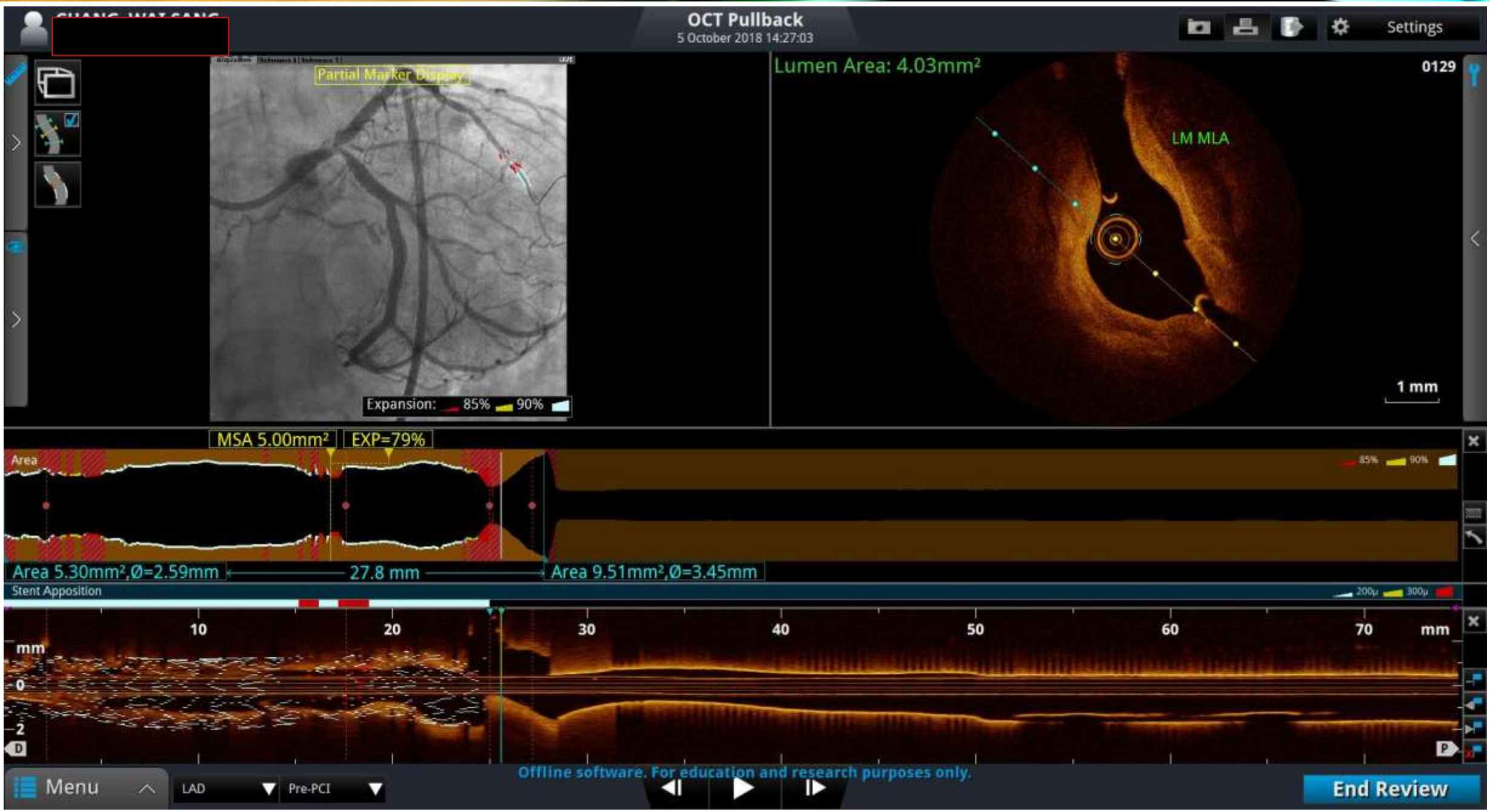
RCA



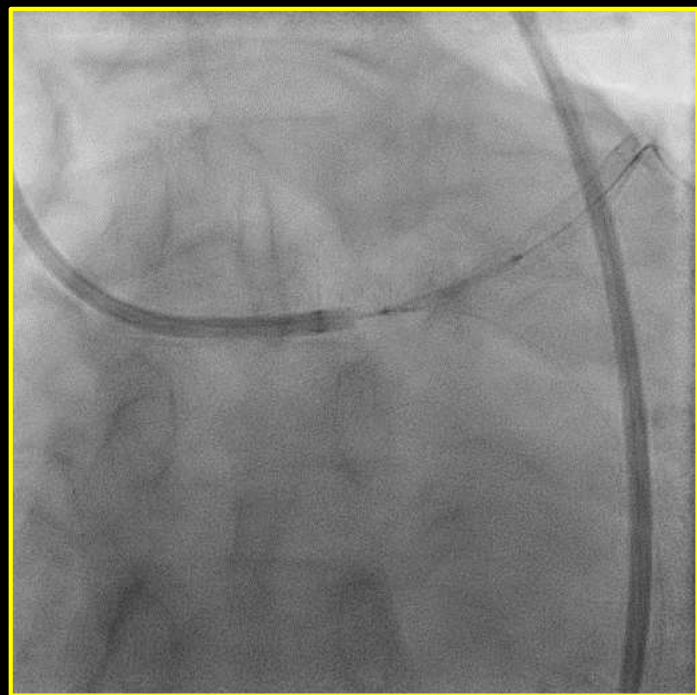
LCA



LCA Bifurcation



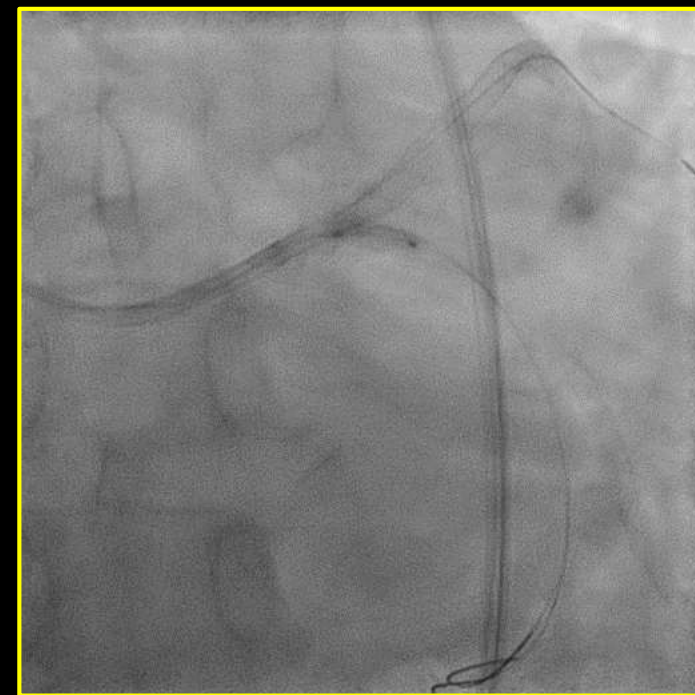
LM TO LAD STENTING



Xience Sierra 3.5/15mm

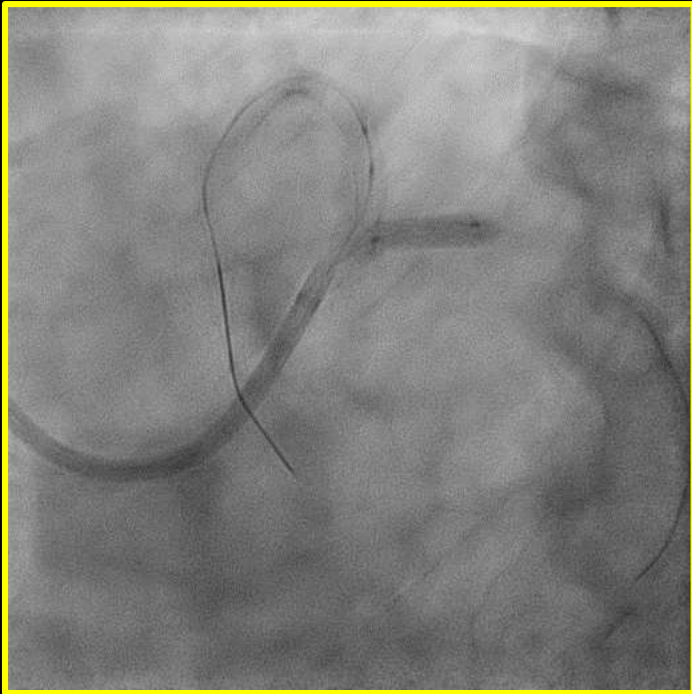


Post DES

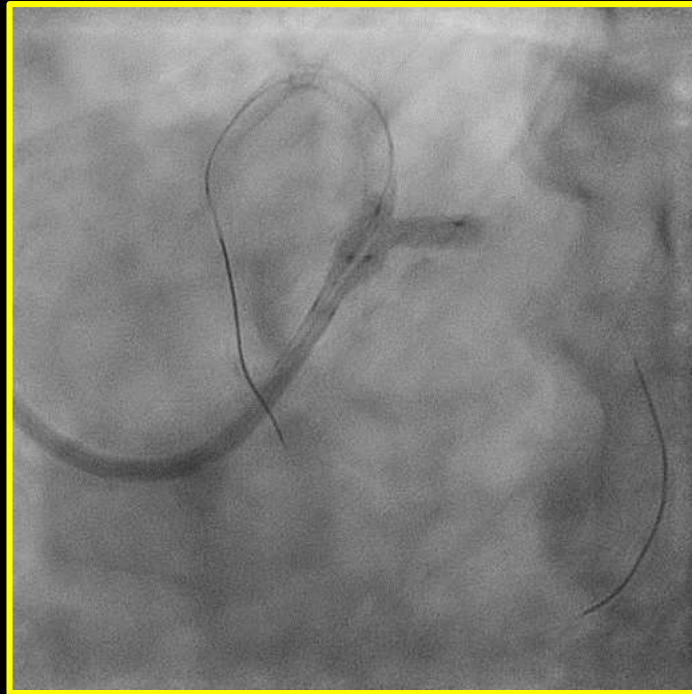


2.0 BDC

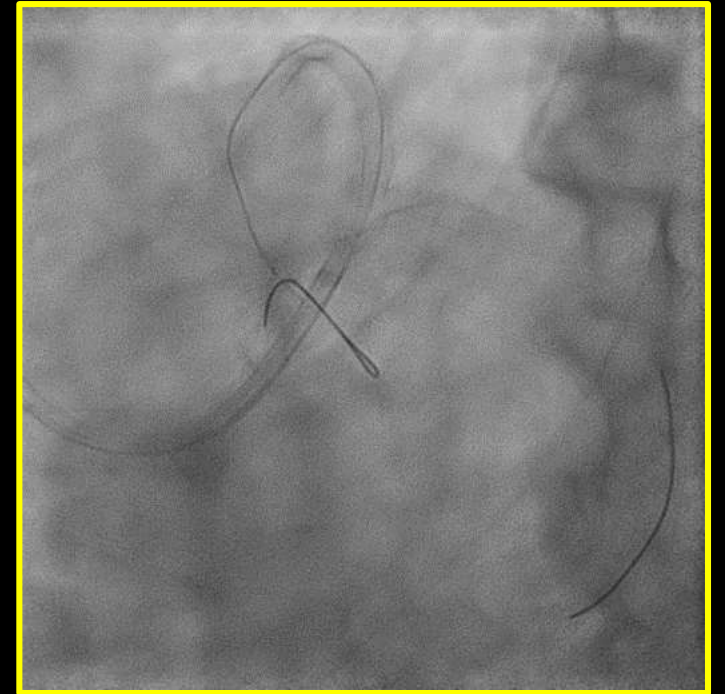
LCX STENTING



Xience Sierra 3.5/12mm

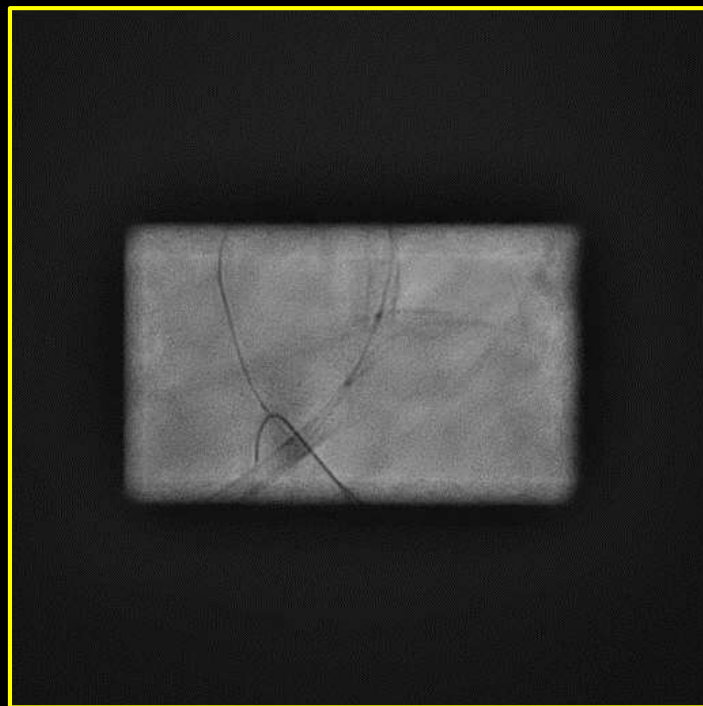


Kissing BDCs

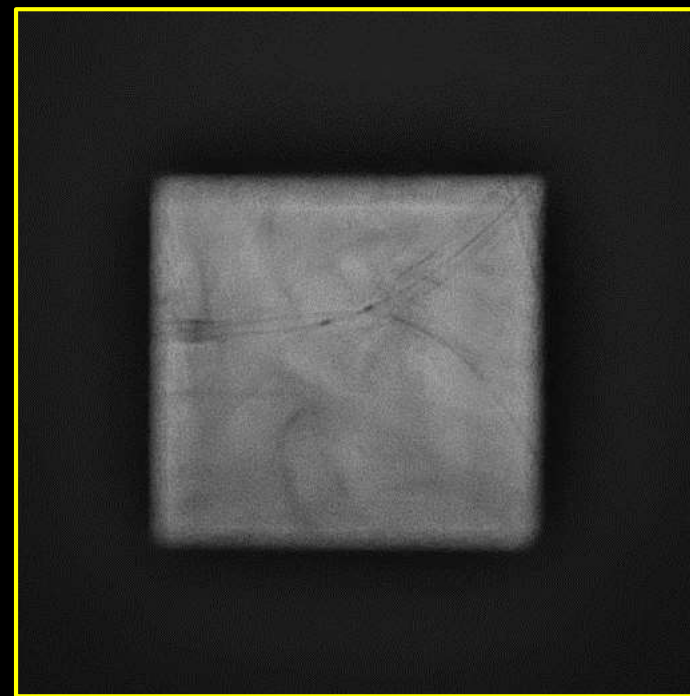


Post stent

POST LM



NC Trek 4.0/8mm



NC Trek 4.5/6mm

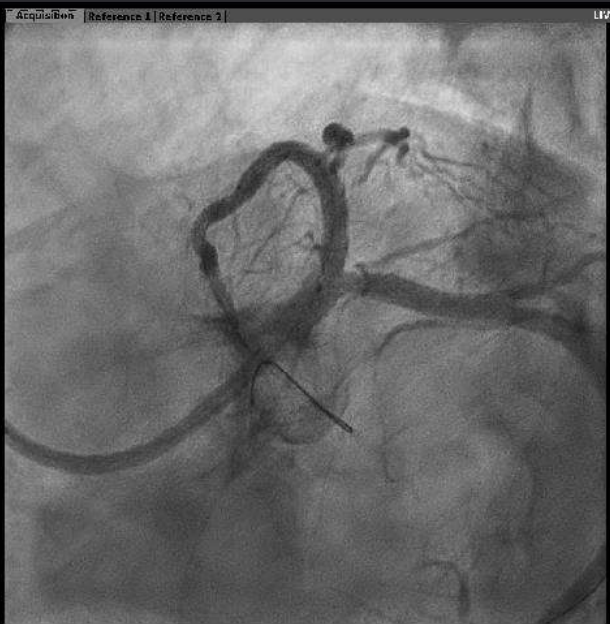
LAD FLYTHROUGH



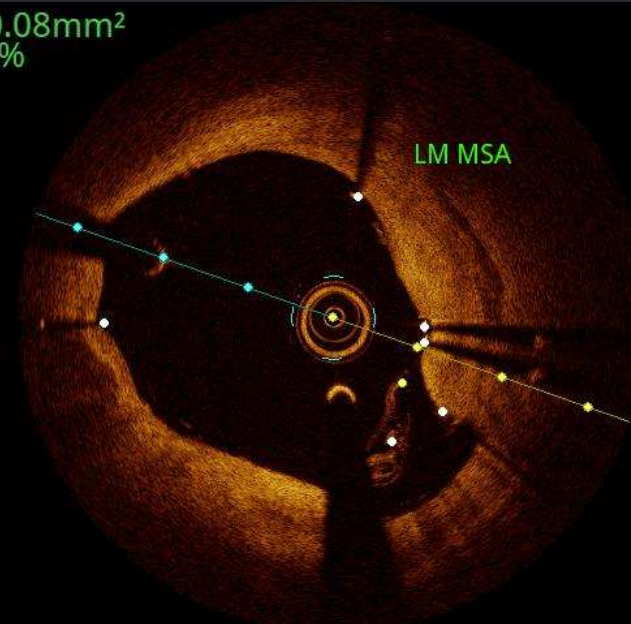
OCT Pullback

5 October 2018 14:58:41

Settings



Lumen Area: 10.08mm²
Expansion: 273%



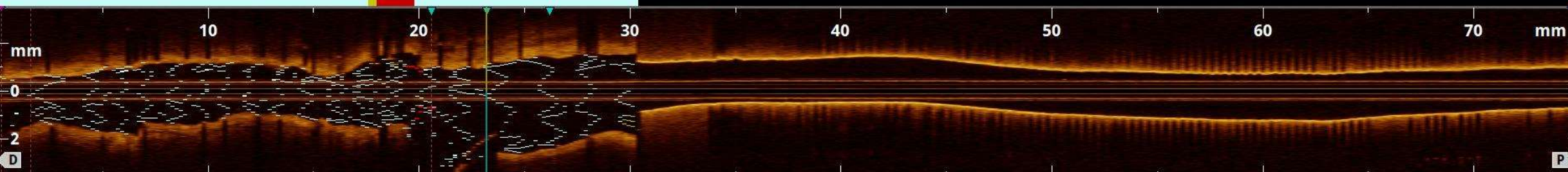
0117

MSA ?..mm² EXP ??%



Area 6.23mm², Ø=2.80mm 30.0 mm Area 2.83mm², Ø=1.90mm

Stent Apposition 200µ 300µ



Offline software. For education and research purposes only.

Menu

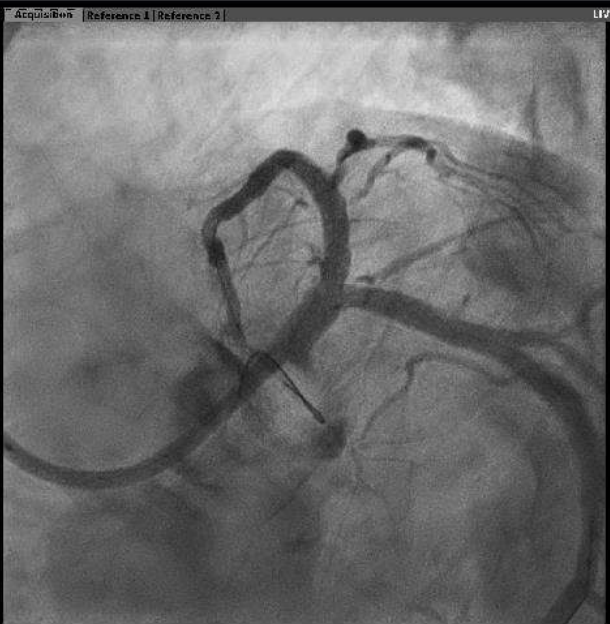
LAD Post-PCI

Co-Register

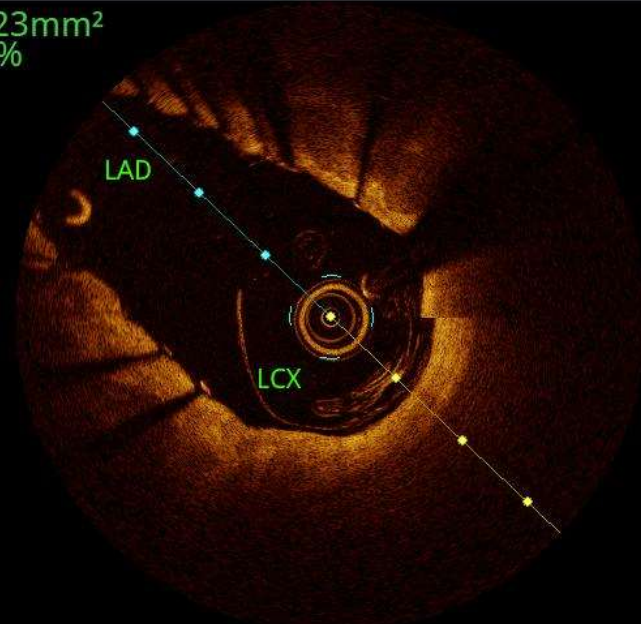
End Review

OCT Pullback

5 October 2018 15:01:01

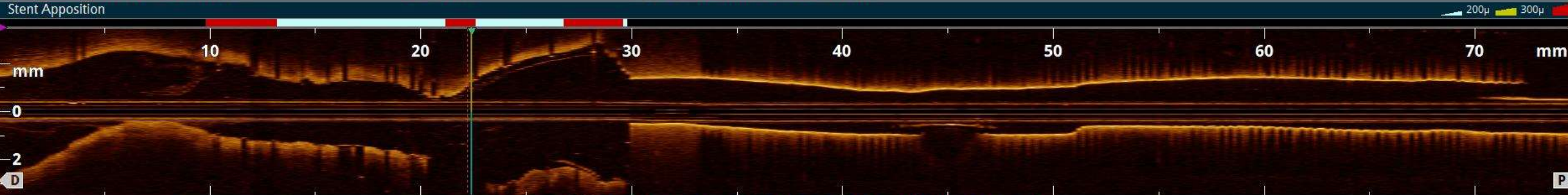


Lumen Area: 8.23mm²
Expansion: 142%



0113

MSA ??.?mm² EXP ??%



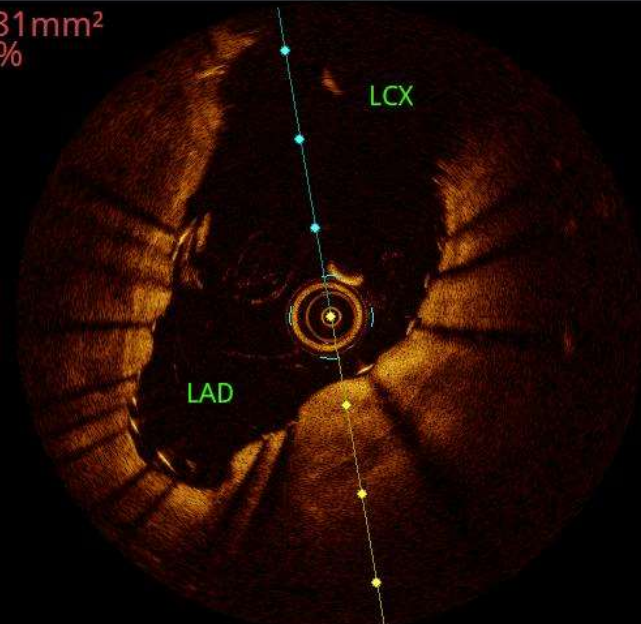
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OCT Pullback

5 October 2018 15:12:35



Lumen Area: 8.81mm²
Expansion: 292%



0146

EXP=100%

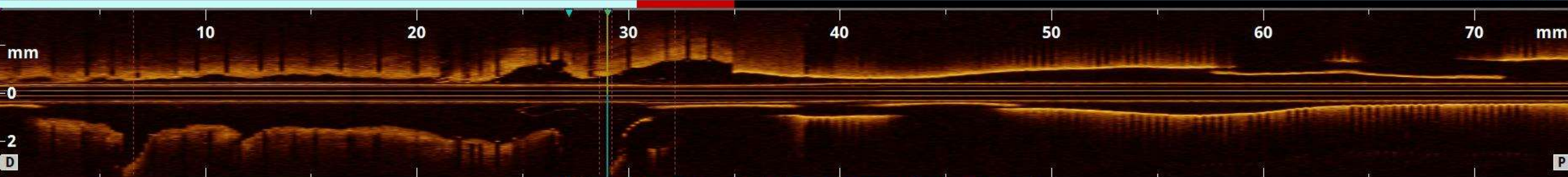


Area 4.23mm², Ø=2.31mm

35.4 mm

Area 2.76mm², Ø=1.87mm

Stent Apposition



Offline software. For education and research purposes only.

Menu

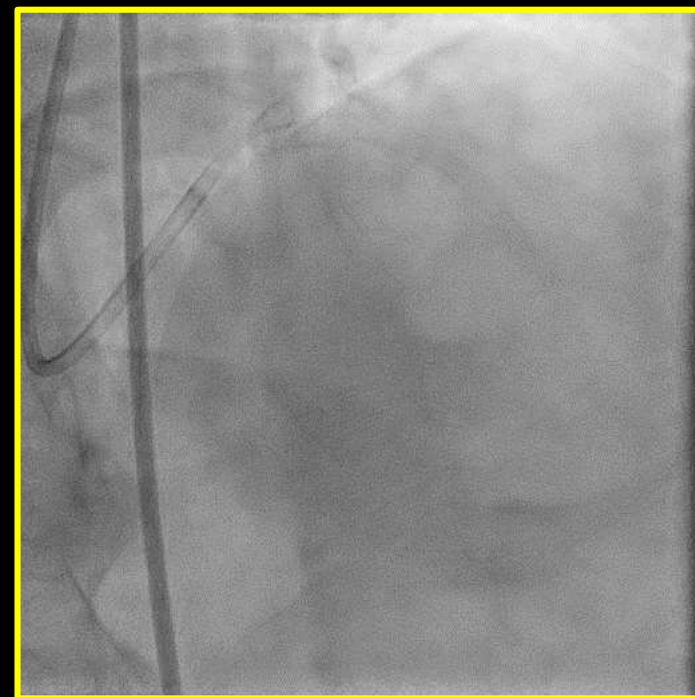
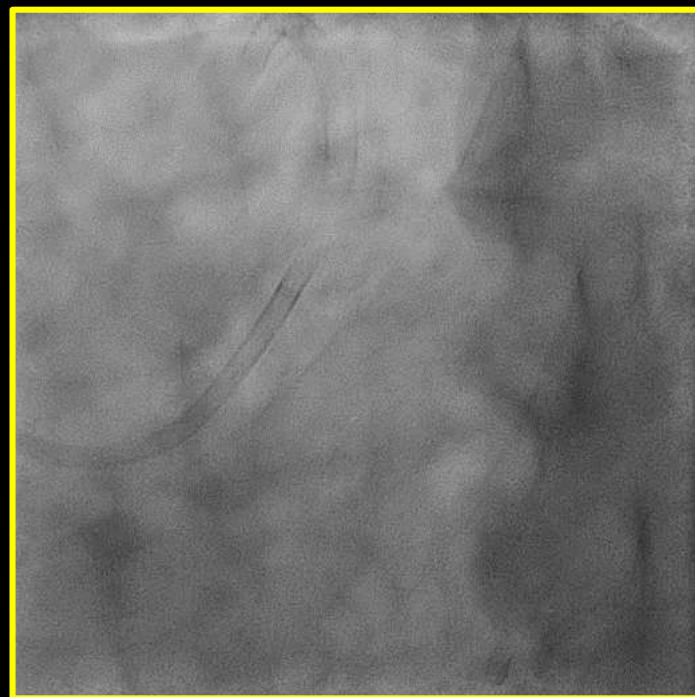
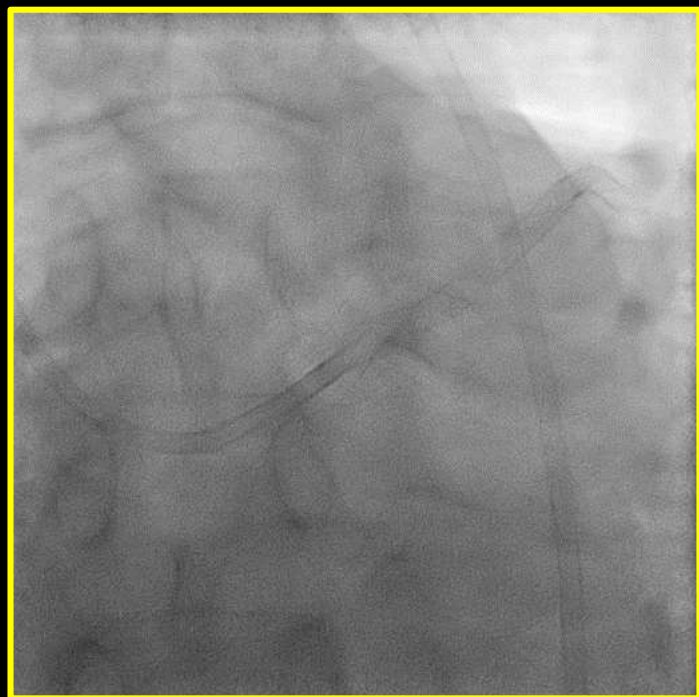
LAD

Post-PCI

Co-Register

End Review

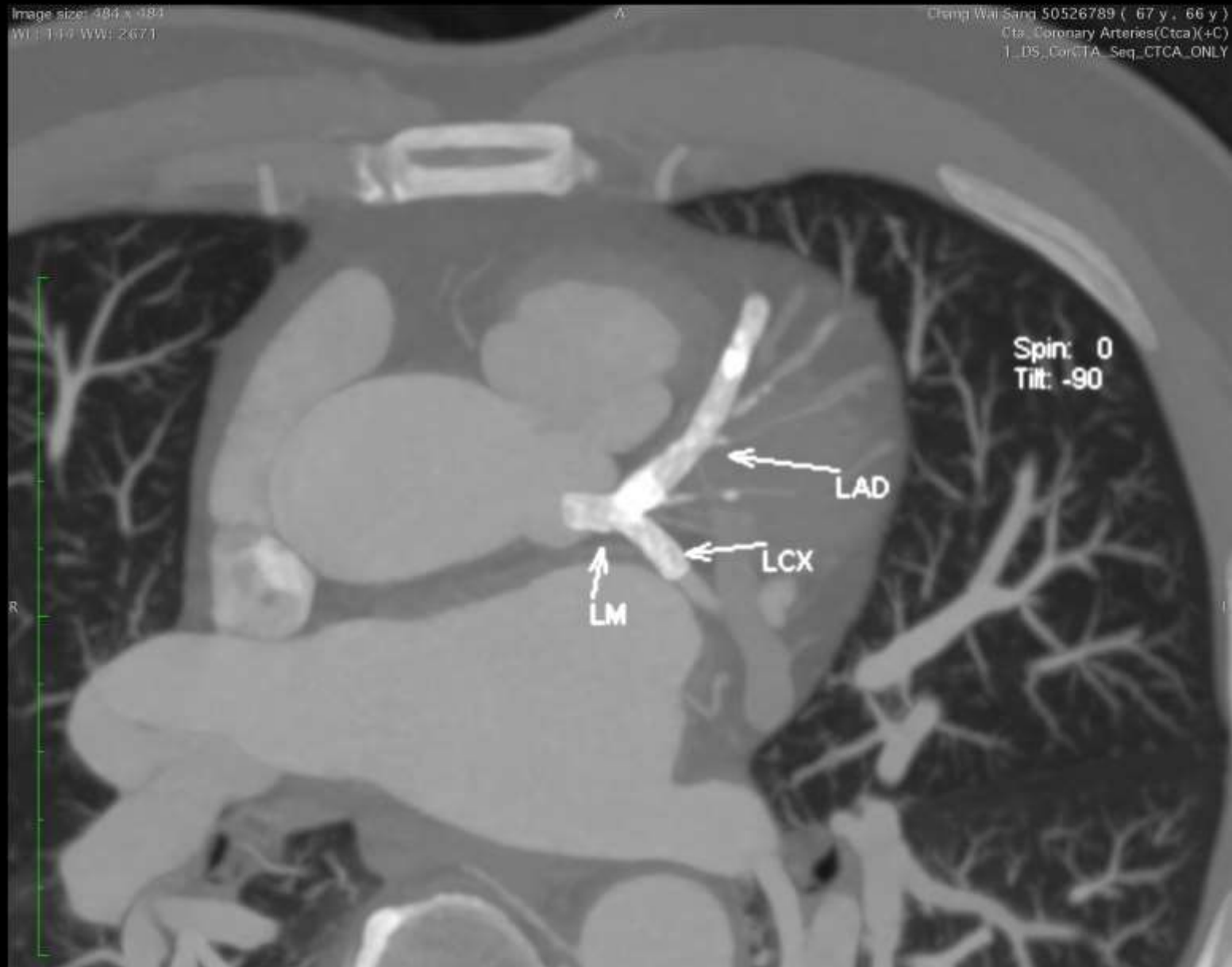
FINAL



RECURRENCES?

- Discharged 7/Oct 2018
- Continuous on Brilinta 90 mg BD
- Review on the 10/Oct 2018
- Complained very dyspnoea (few steps), and pressure like over the chest
- ? Resurrence
- Admitted on the 10/Oct
- CTCA next day

CTCA



RESULT

- CTCA with patent bifurcation stenting of Left Main. LAD, LCX
- Adverse effect of Brilinta
- Changed to Plavix
- Symptom disappeared within 24 hours
- Discharged 2 days later
- Follow regularly in Macau
- Last CTCA April 2019 with patent stentings
- Well since last Octo

TAKE HOME MESSAGE

- Non-invasive test against invasive test
- Intravascular imaging is important, particular left main case
- Follow up with CTCA
- Brilinta side effect can be upto 15%