#### Complex PCI 2017

#### You Can Not Pass

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MacKay Memorial Hospital

Taiwan



#### 65 year-old man

# Angina Dyspnea on exertion Thallium scan: 15% total myocardium

44% inferolateral wall

#### 65 year-old man

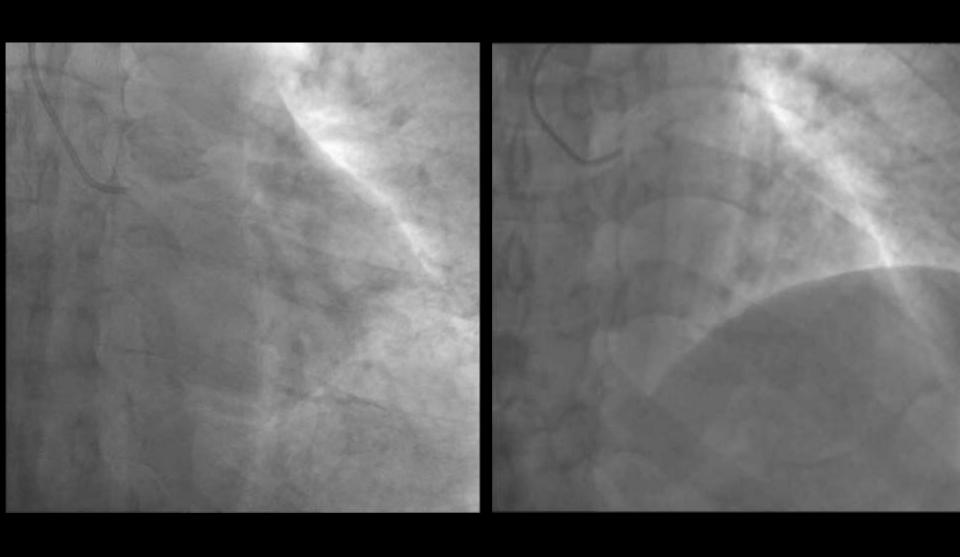
# Angina Dyspnea on exertion

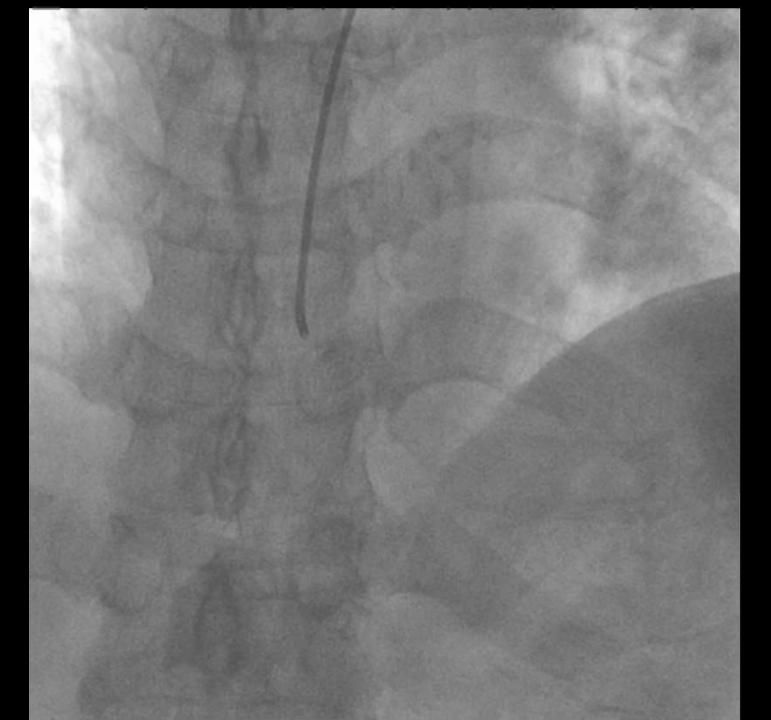
Thallium scan: 15% total myocardium 44% inferolateral wall

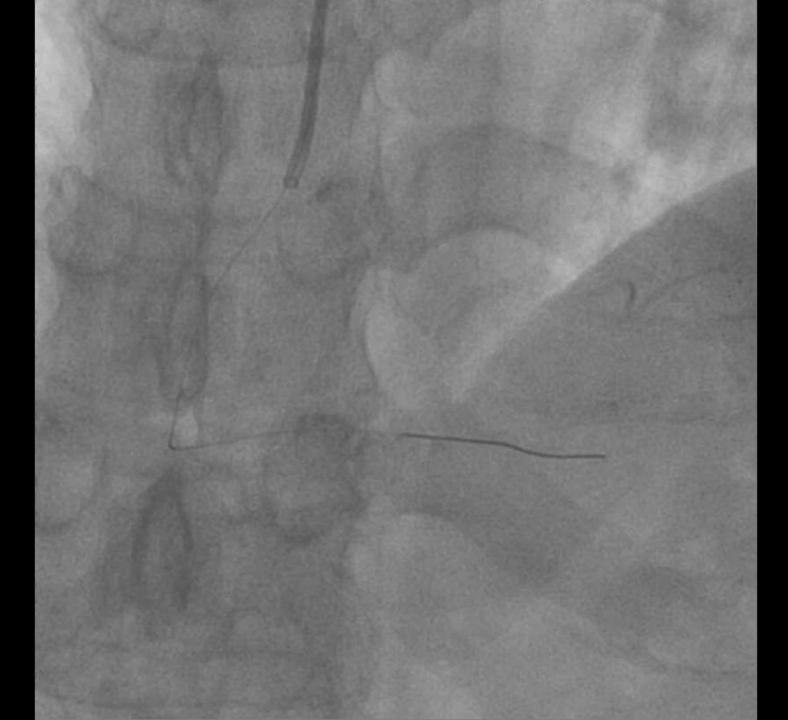
2016 Admission

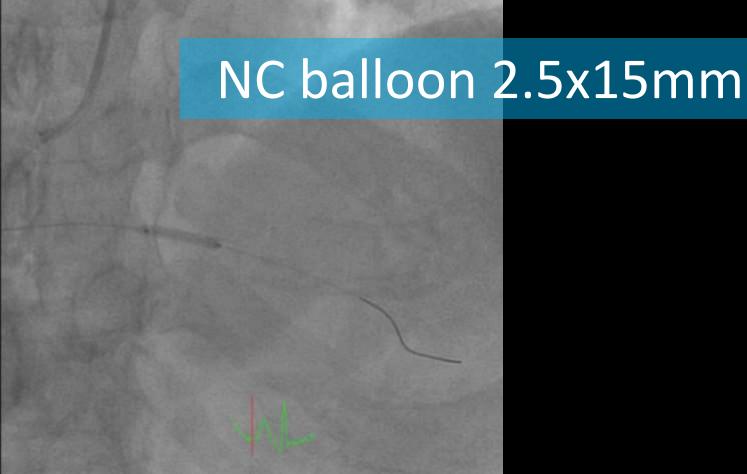
#### 65 year-old man

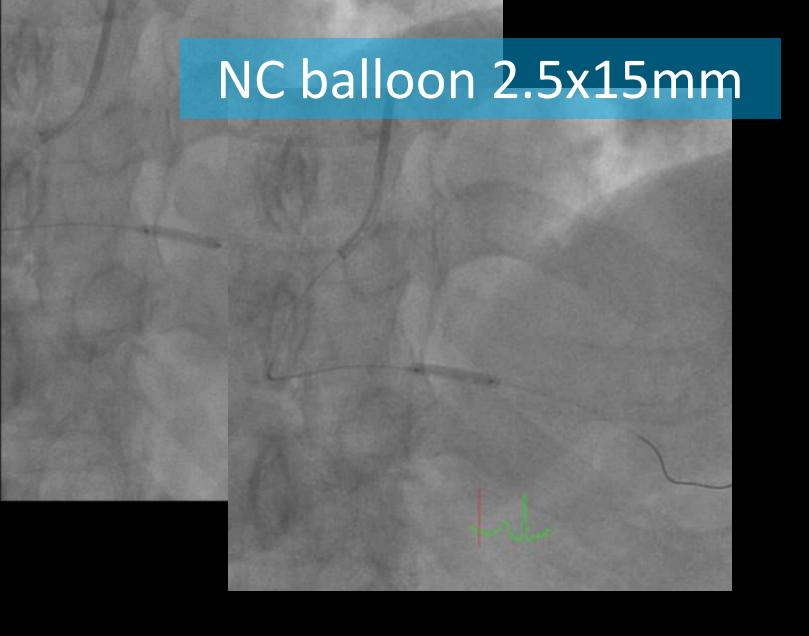
# Cath Lab





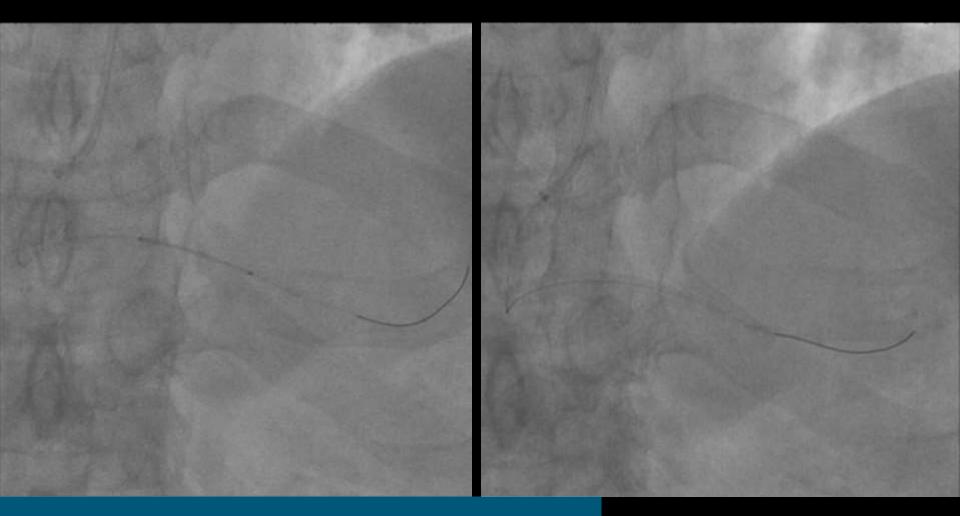




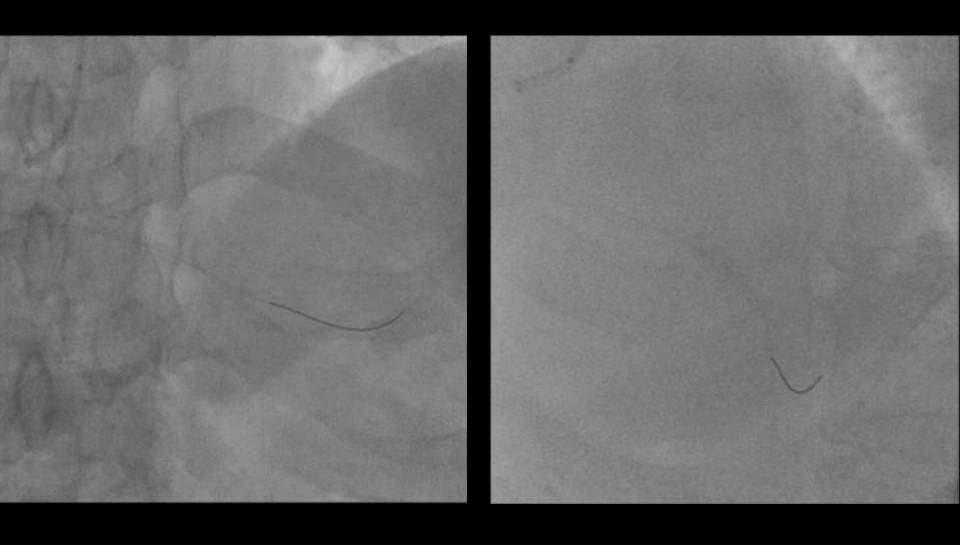


# NC balloon 2.5x15mm





DES 2.5x22mm



### Angina Dyspnea on exertion

Thallium scan: 15% total myocardium 44% inferolateral wall

2016 Admission

Discharge

#### 65 year-old man

## Angina Dyspnea on exertion

65 year-old man

Hypertension Hyperlipidemia Smoking

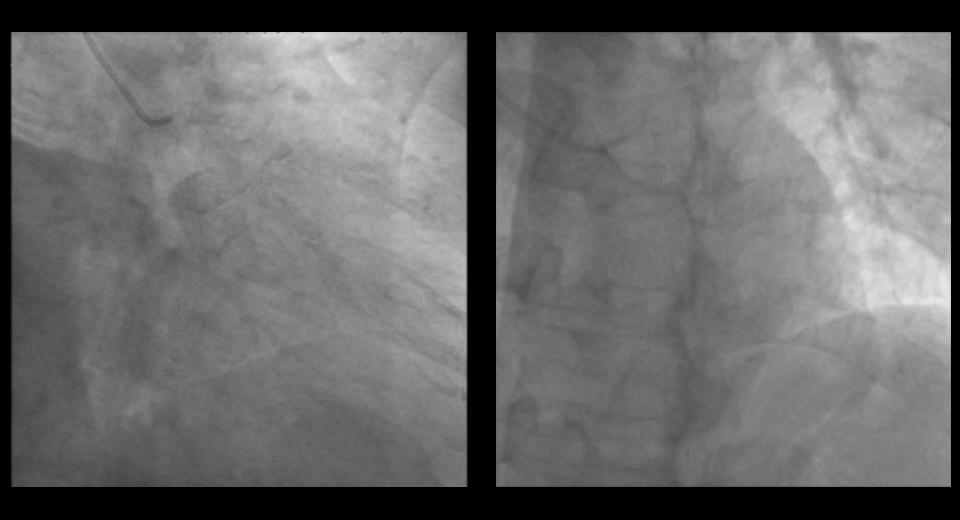
Thallium scan: 15% total myocardium 44% inferolateral wall

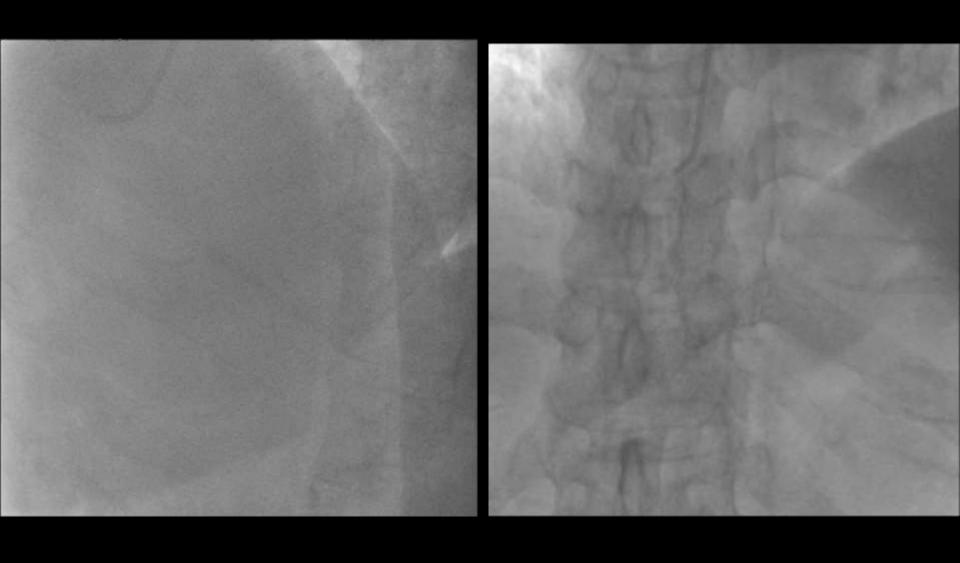
2016 Admission
Discharge

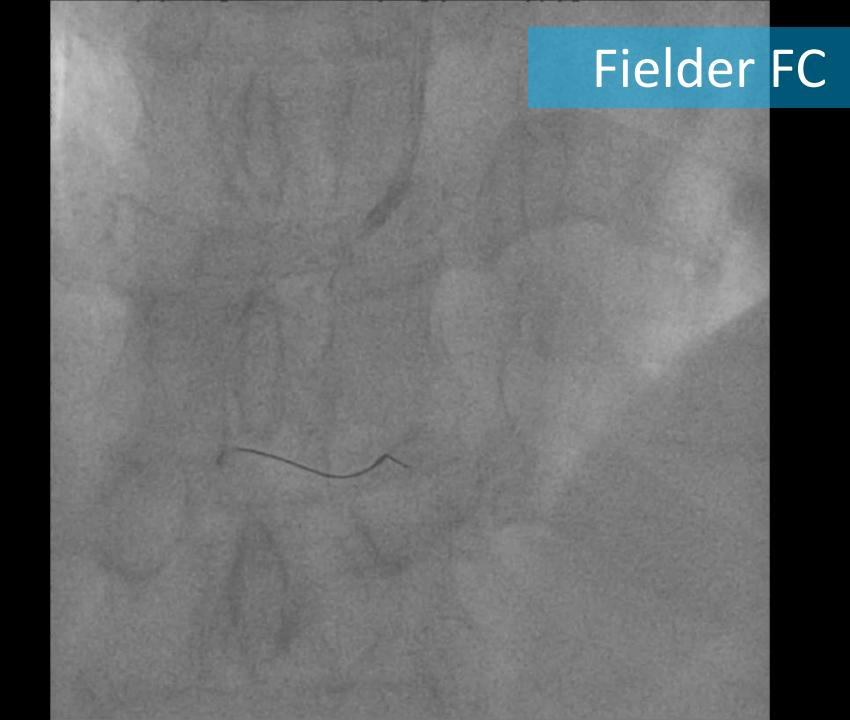
2017 Chest pain recurrence Admission

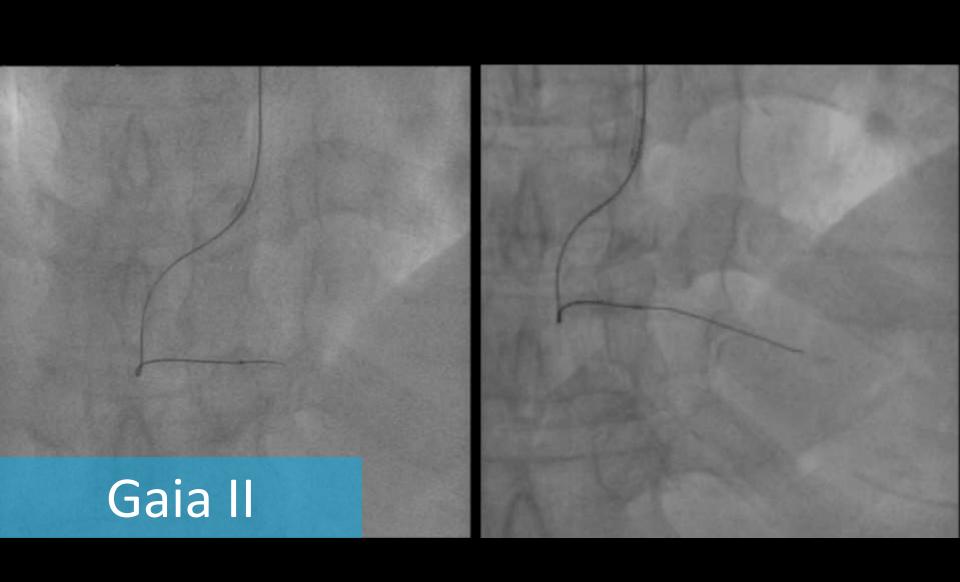
## Cath Lab

9 months later

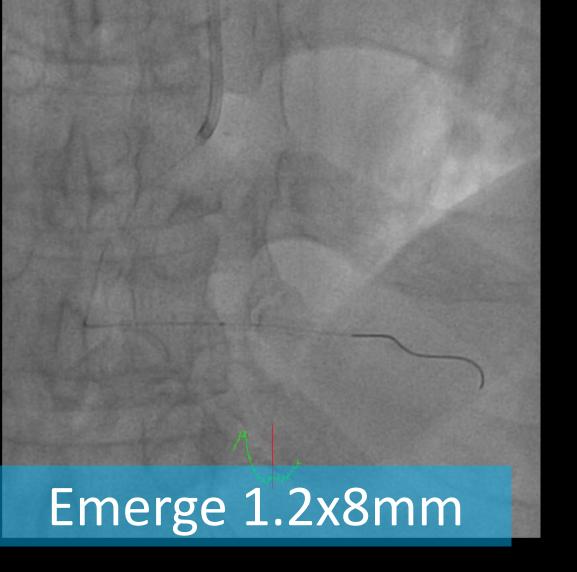




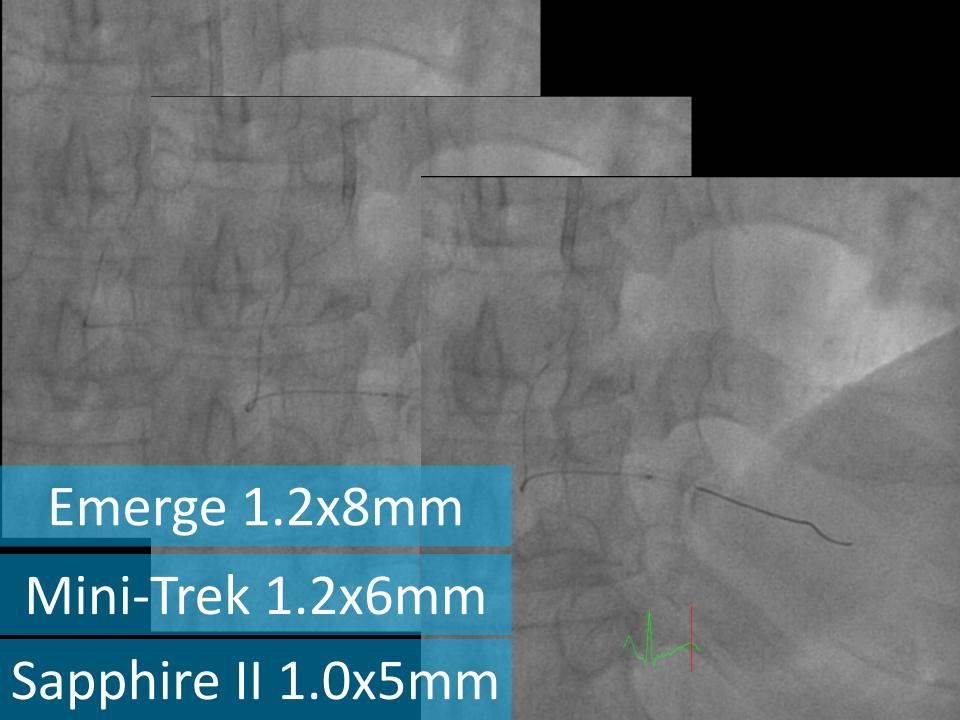


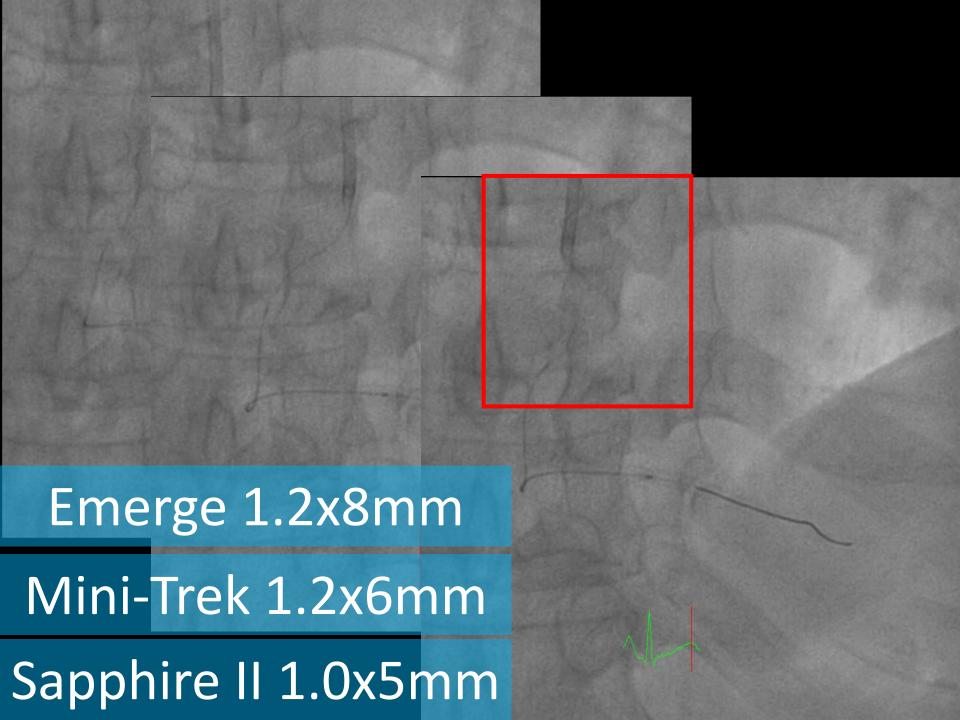


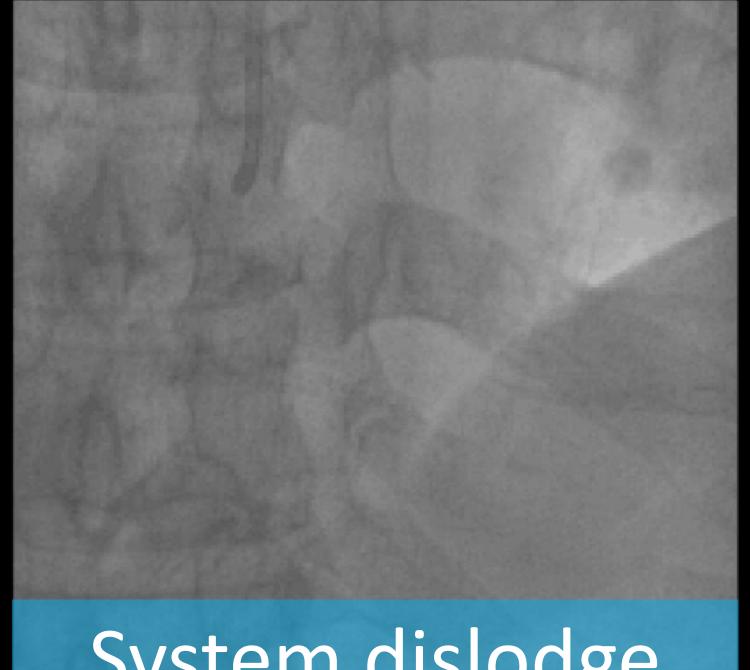
# Emerge 1.2x8mm



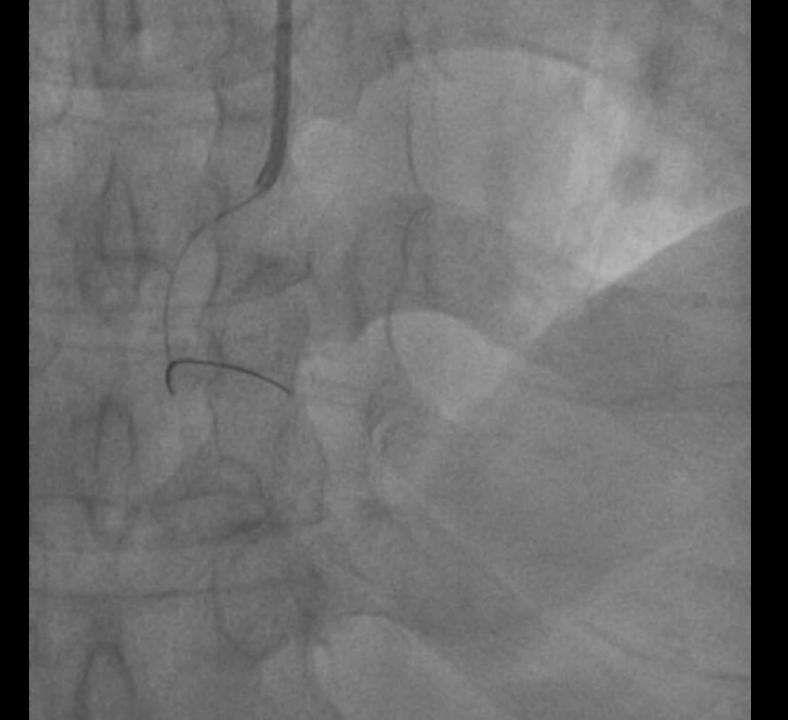
# Emerge 1.2x8mm Mini-Trek 1.2x6mm

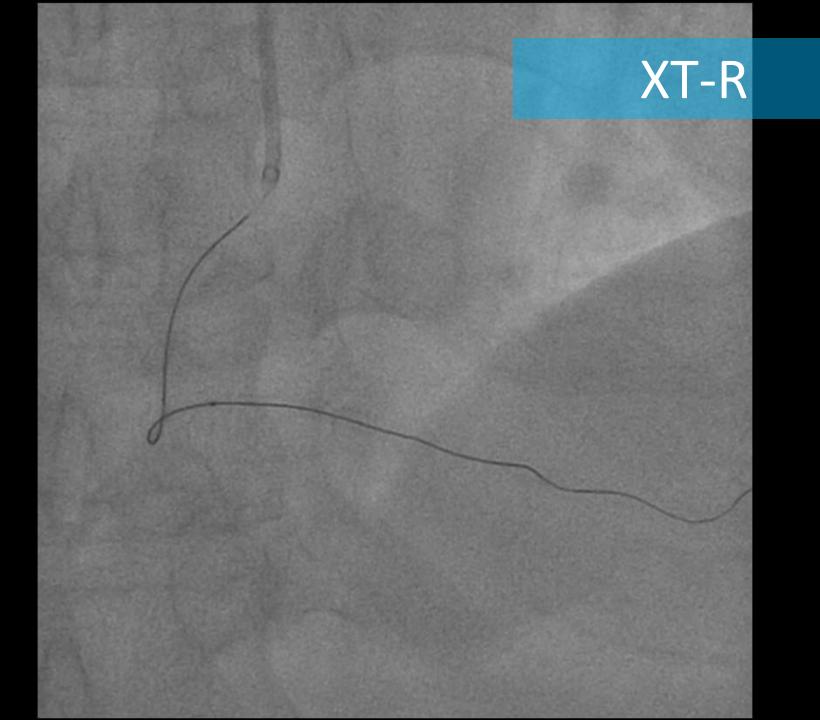


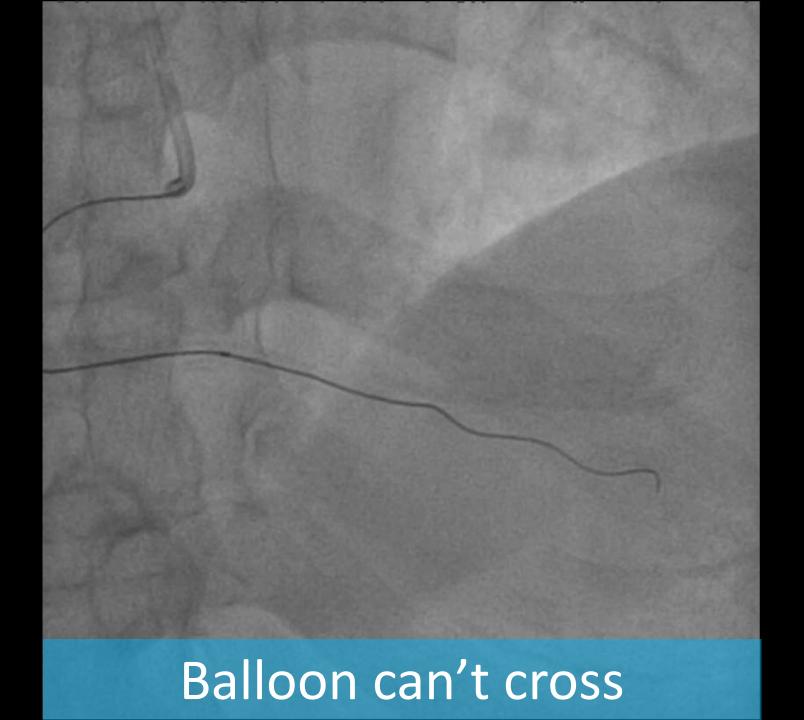




### System dislodge







#### Increase support for delivery

#### Increase support for delivery

Anchor Buddy wire Change Catheter Deep seating Co-Axial Five in six

#### Increase support for delivery

Anchor

Buddy wire

Change Catheter

Deep seating

Co-Axial

Five in six



#### **Guidezilla**™

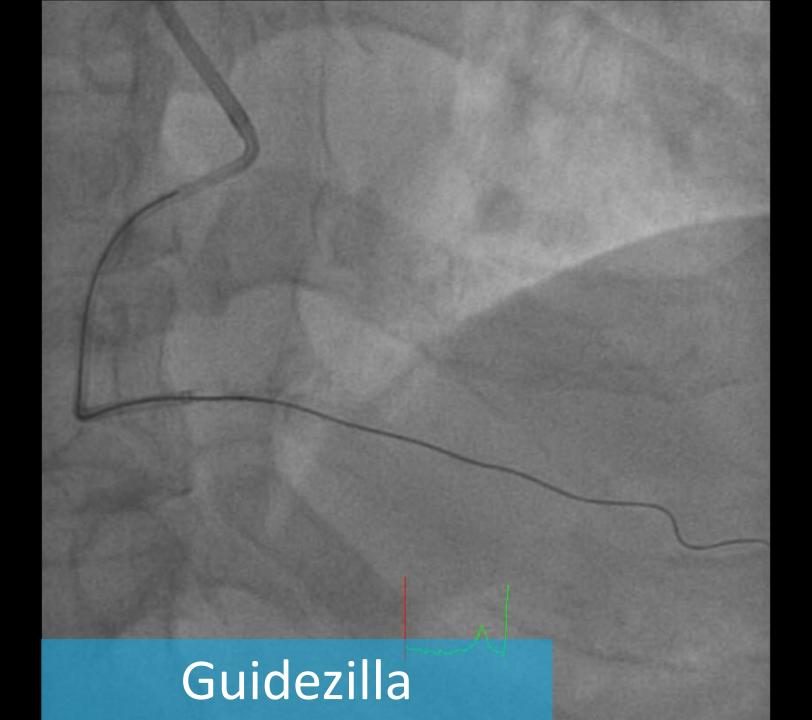
**Guide Extension Catheter** 

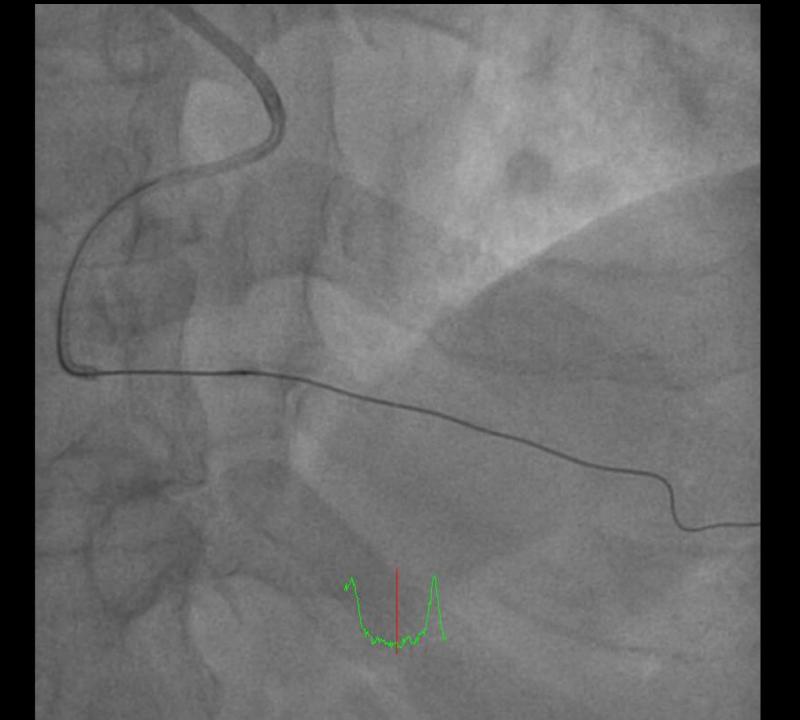


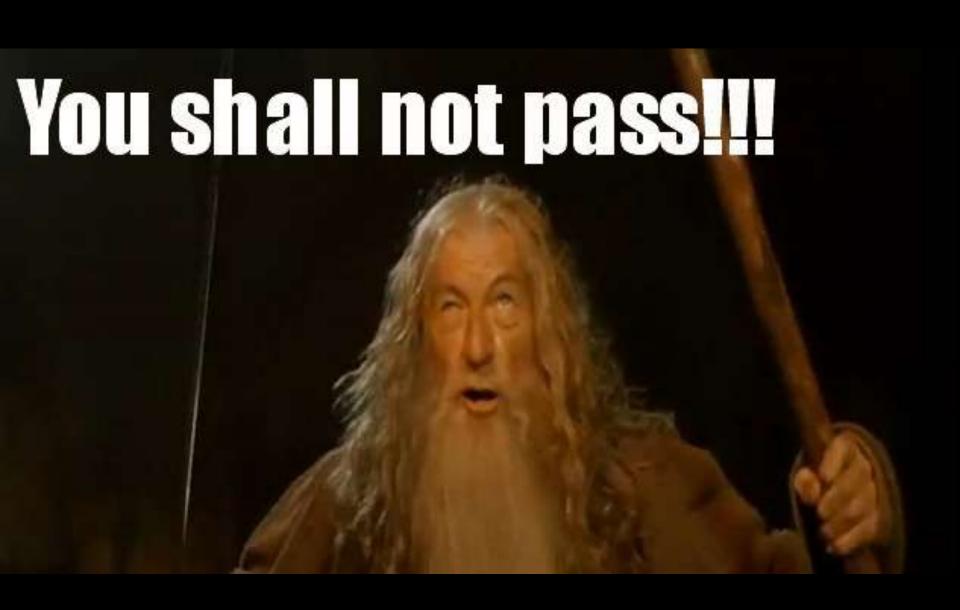












Quit now

Quit now Enhance more support

Quit now
Enhance more support
Change to retrograde

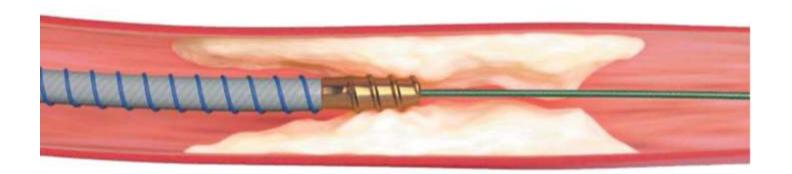
Quit now
Enhance more support
Change to retrograde
Image study

Quit now
Enhance more support
Change to retrograde
Image study
Rotablation

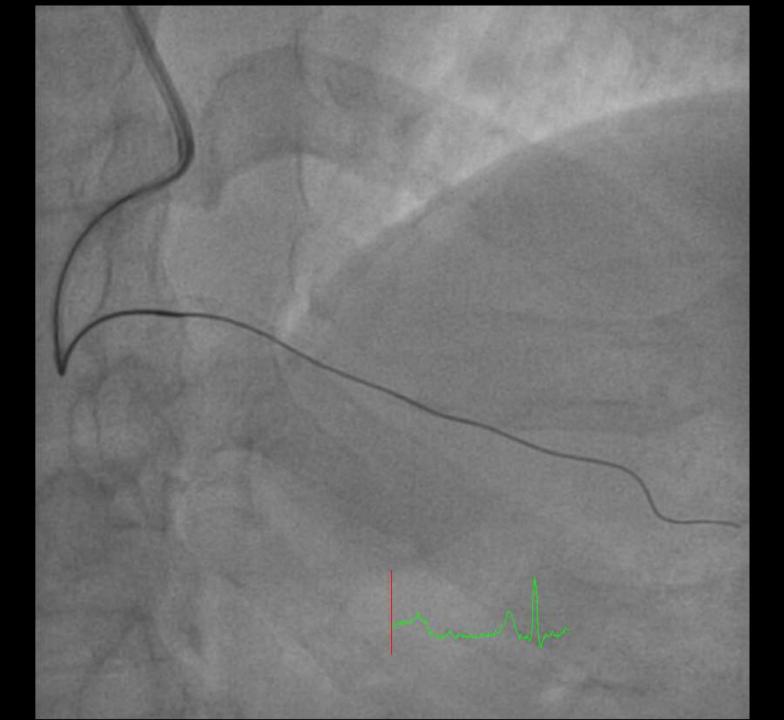
Quit now
Enhance more support
Change to retrograde
Image study
Rotablation

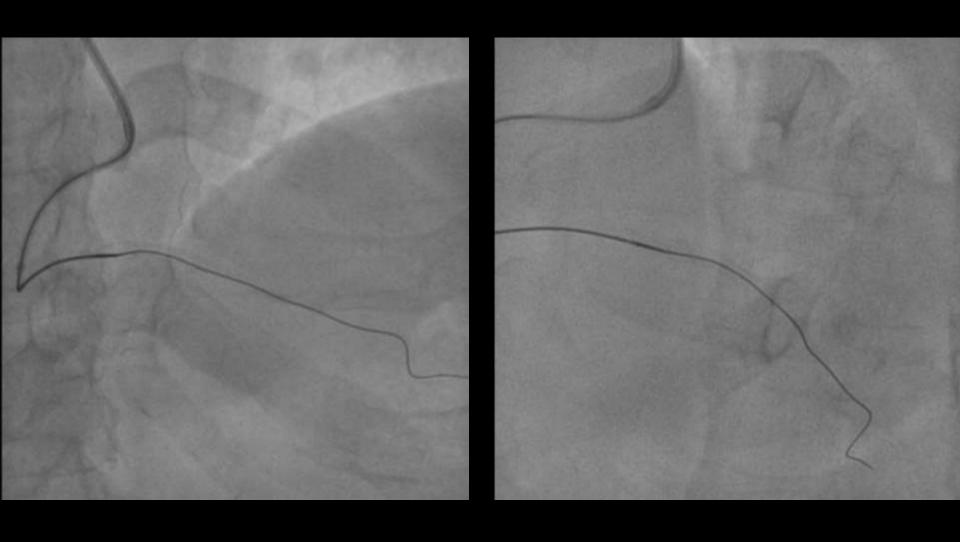
# Turnpike Gold

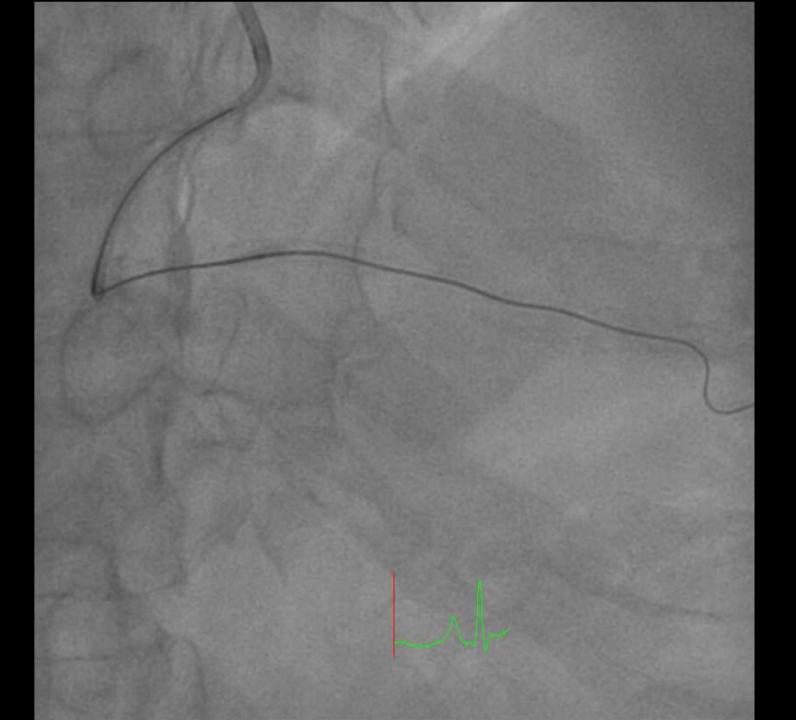




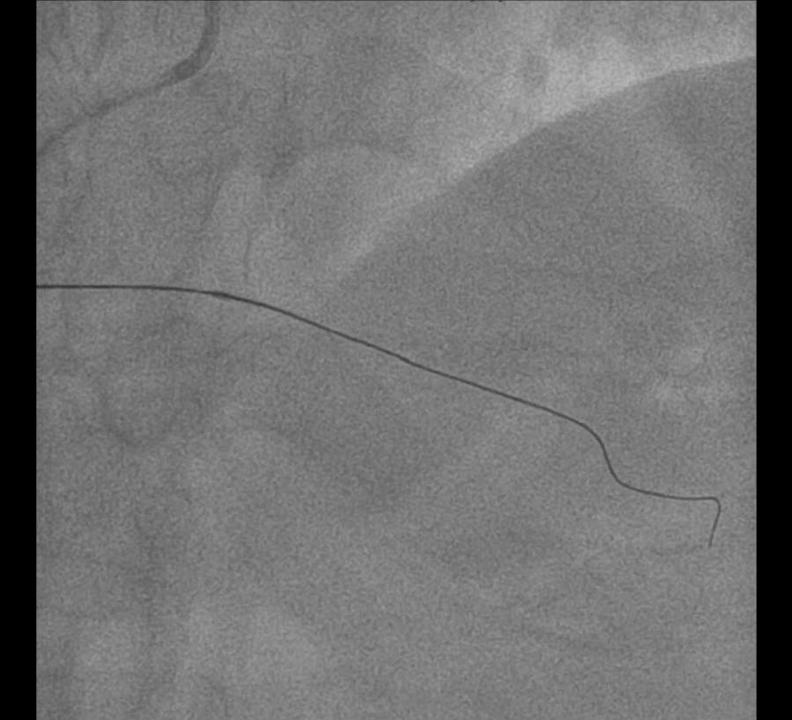




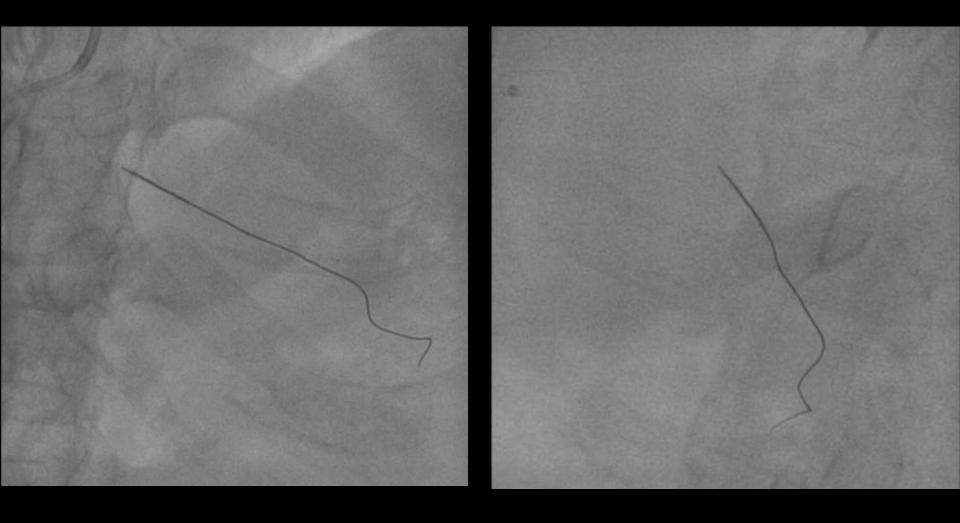








# Suddenly resistance disappear



Two or three wire rotation
Stenting over
Observation
Loop snare removal

Two or three wire rotation

Stenting over

Observation



Two or three wire rotation

Stenting over

Observation

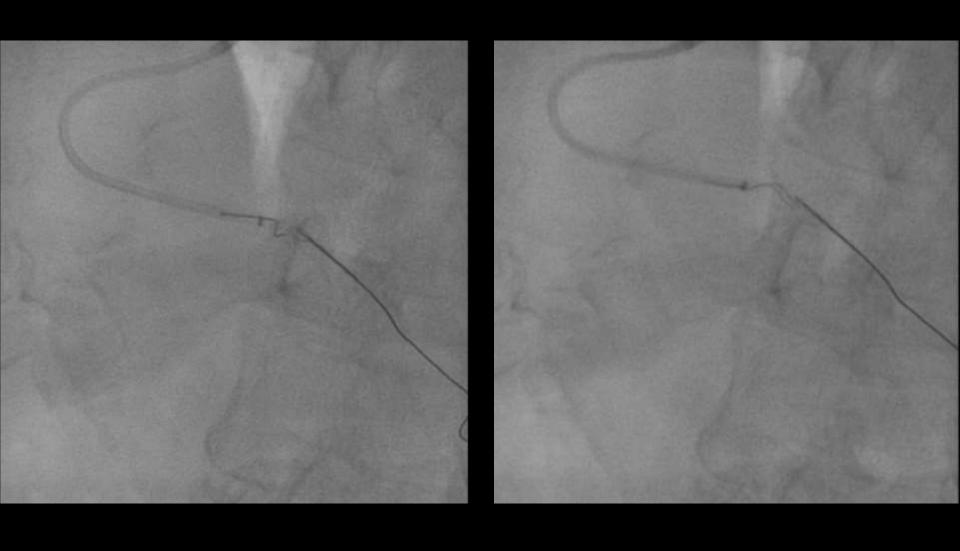
Two or three wire rotation Stenting over

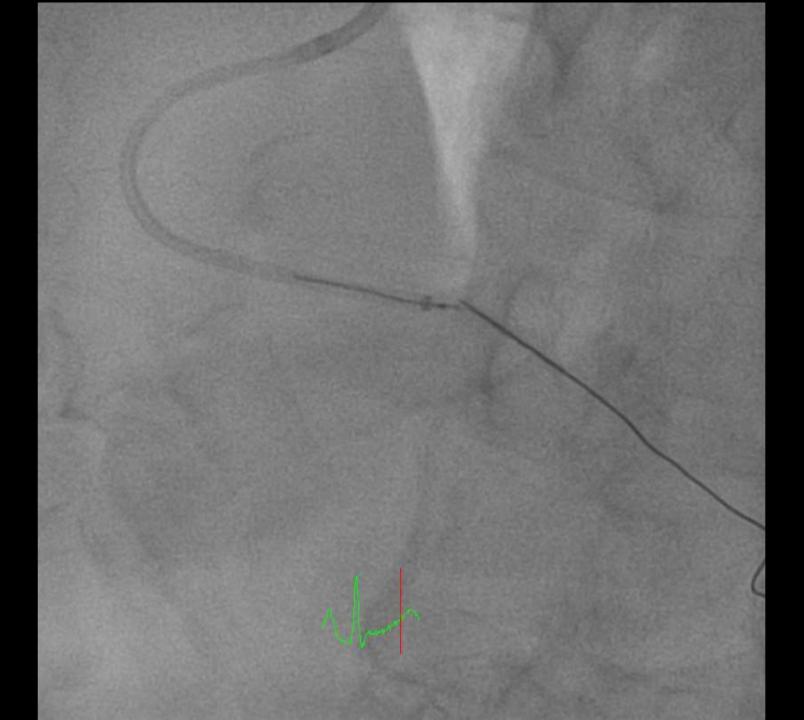
Observation

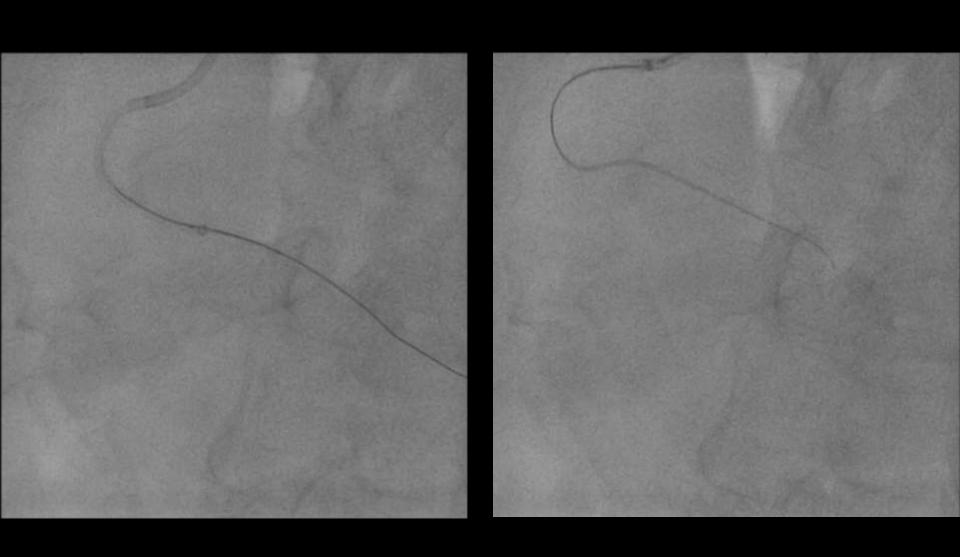
Two or three wire rotation

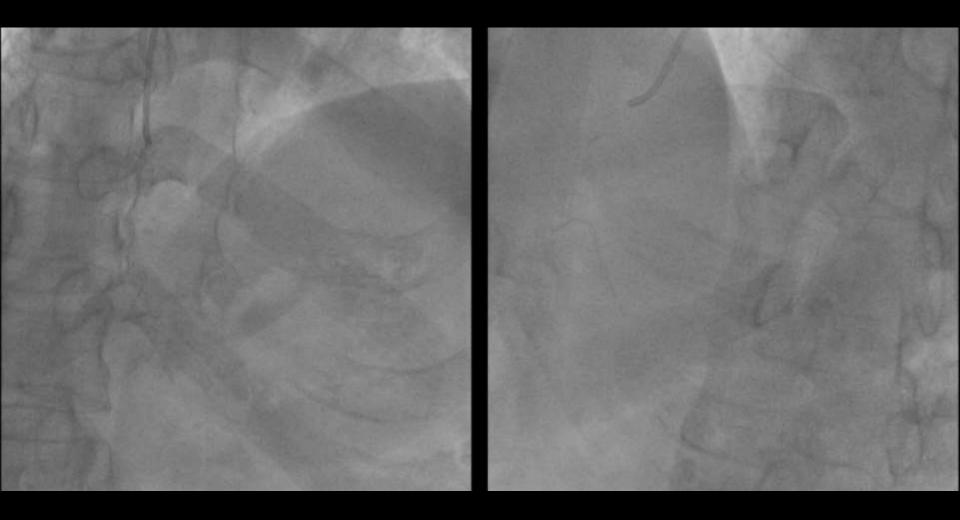
Stenting over

Observation

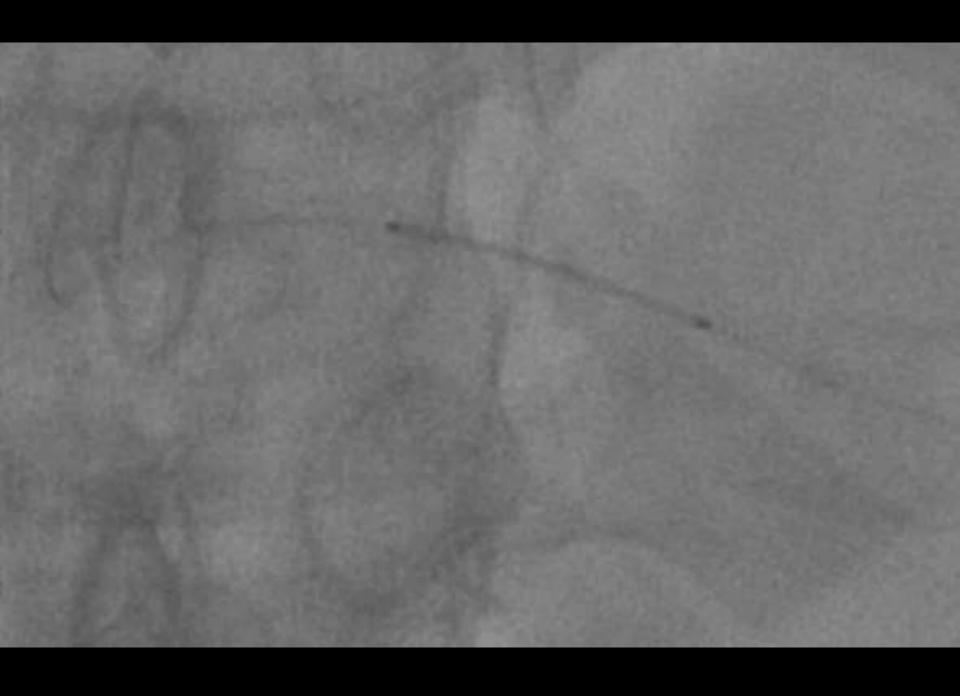


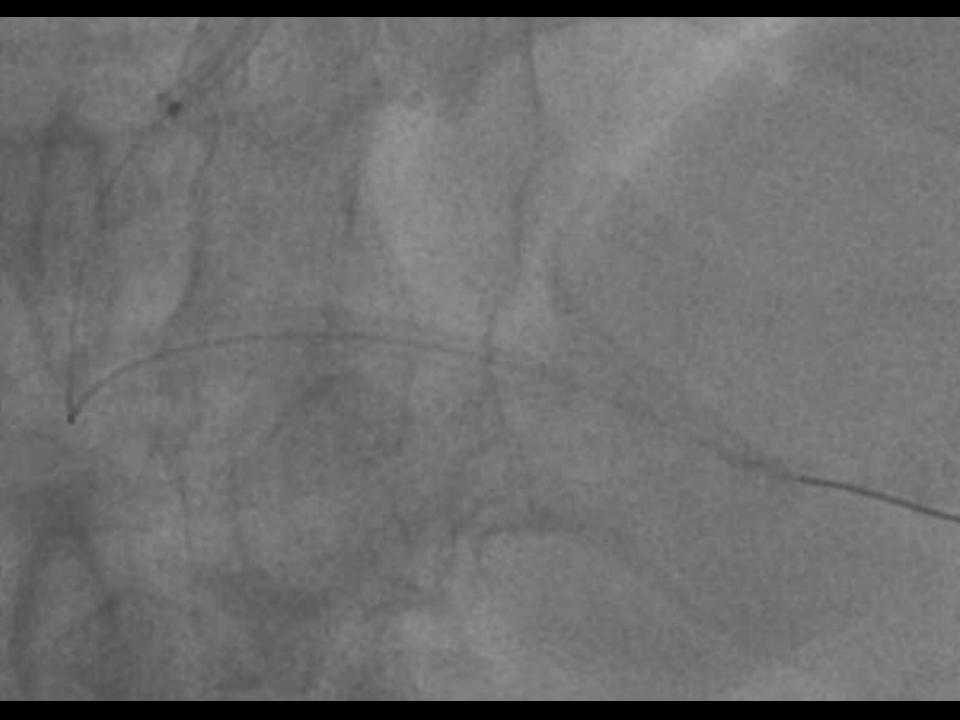


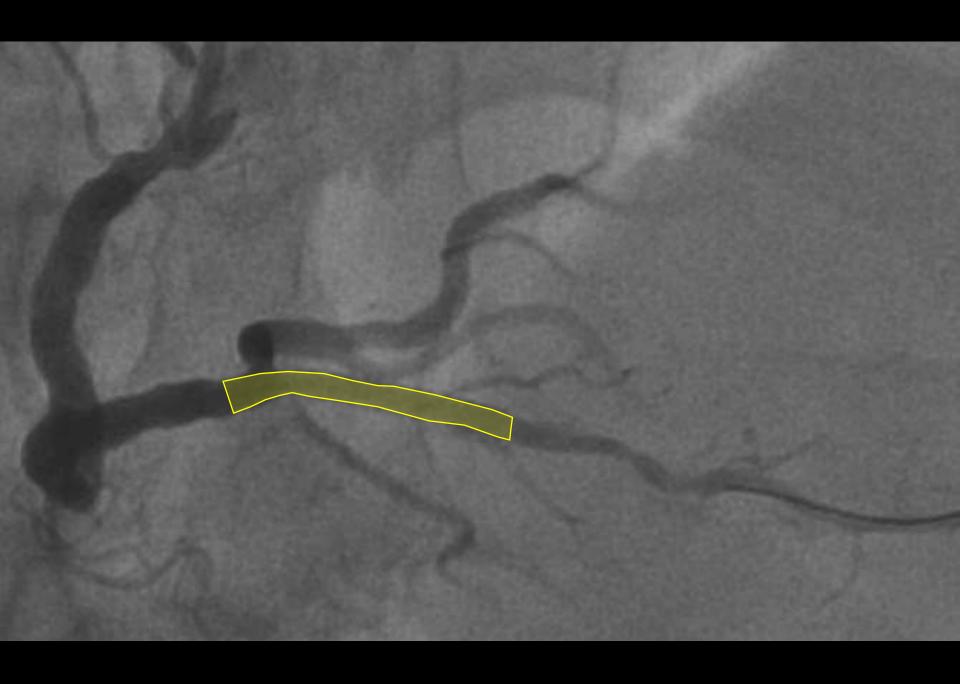


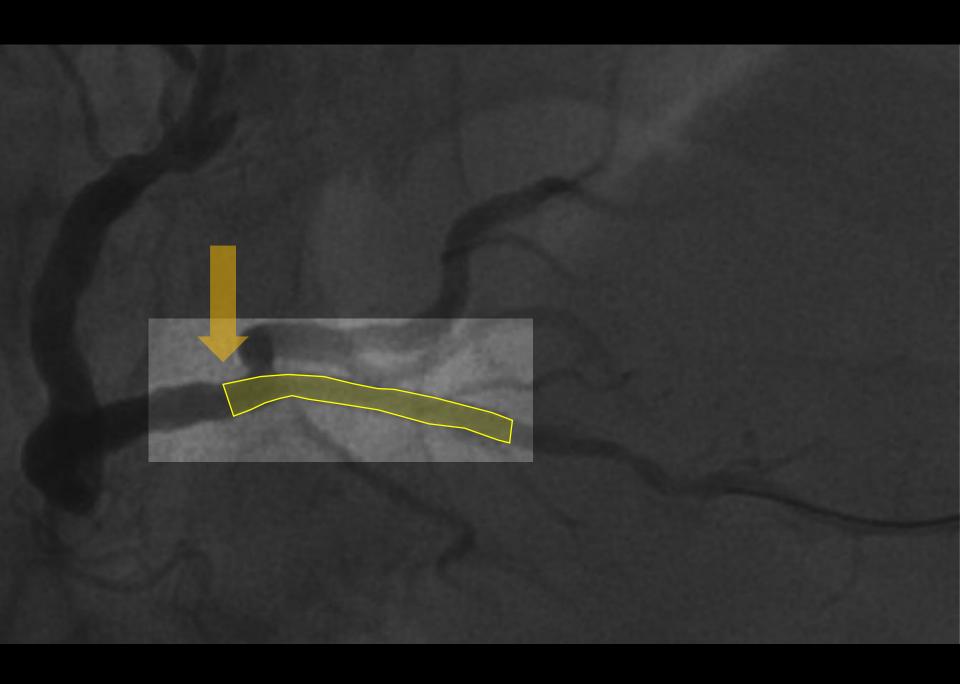


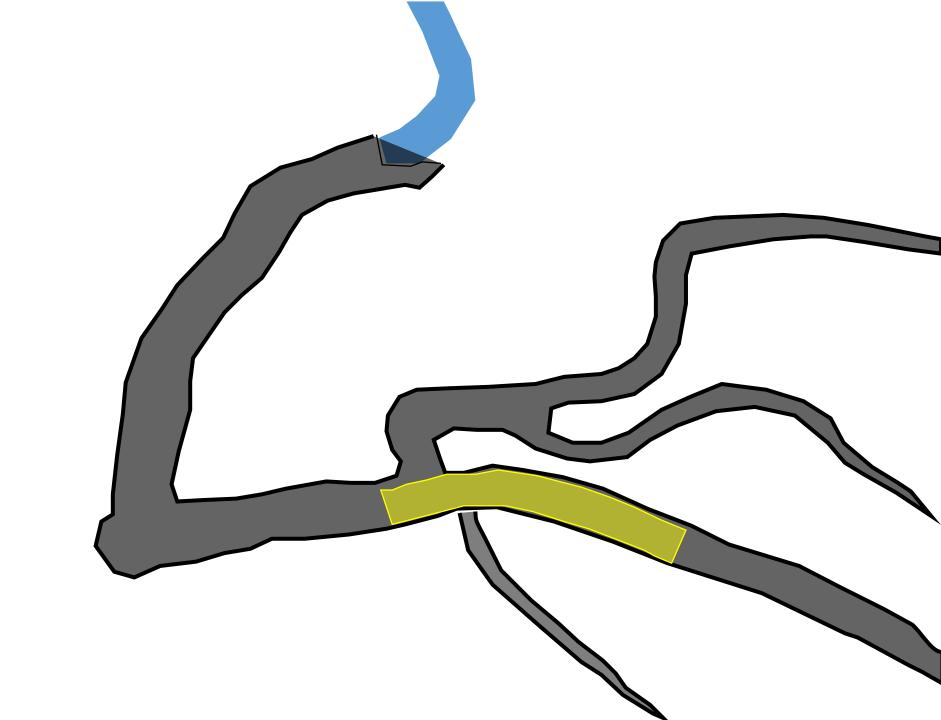
# What Happened?

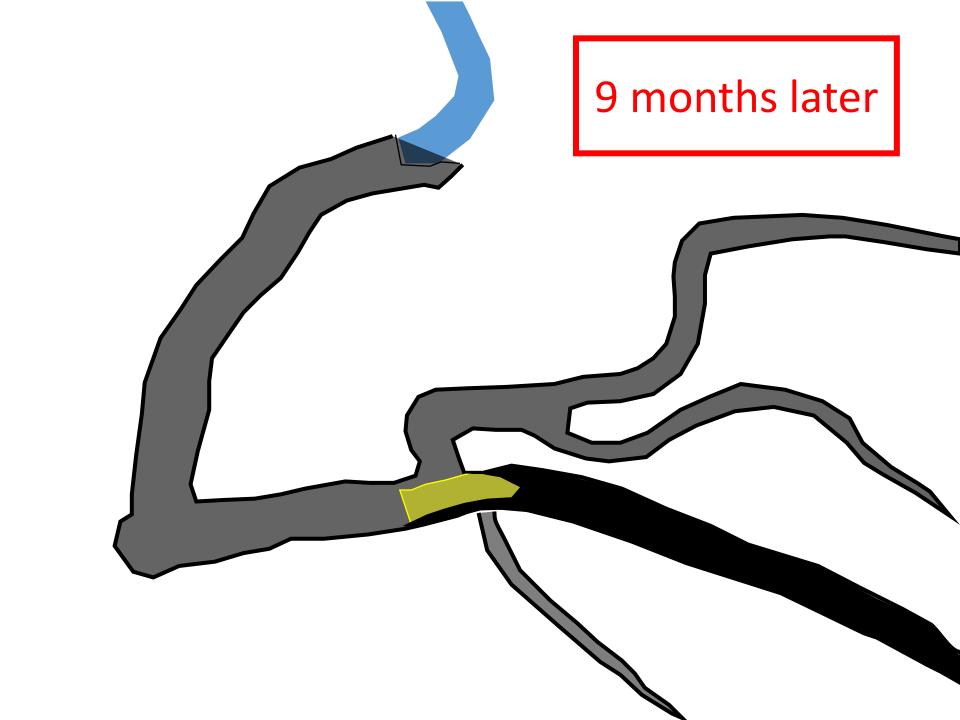


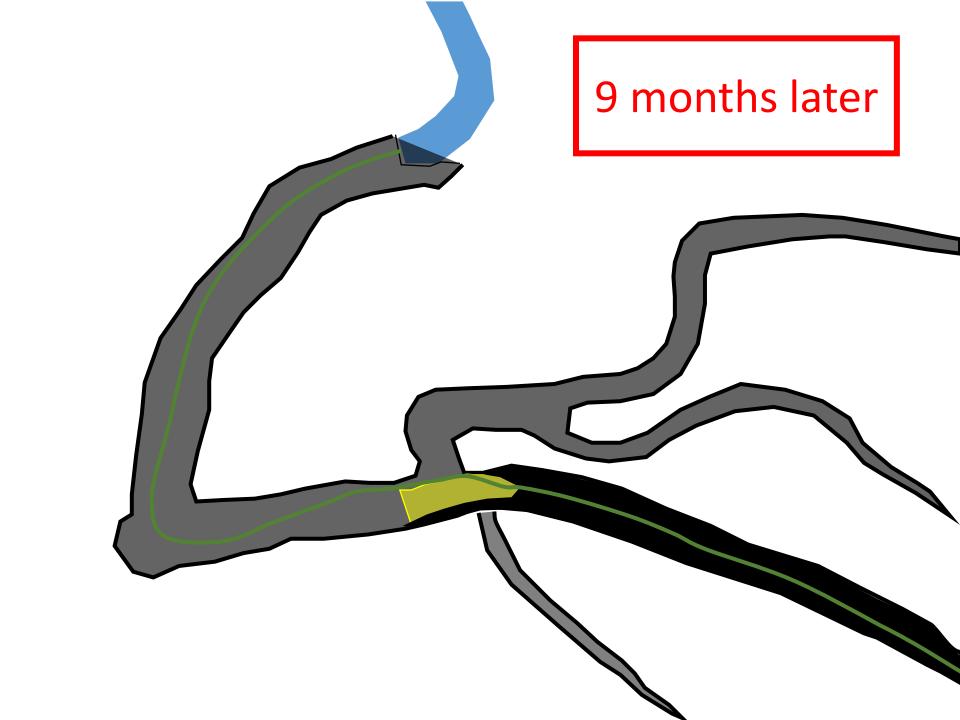


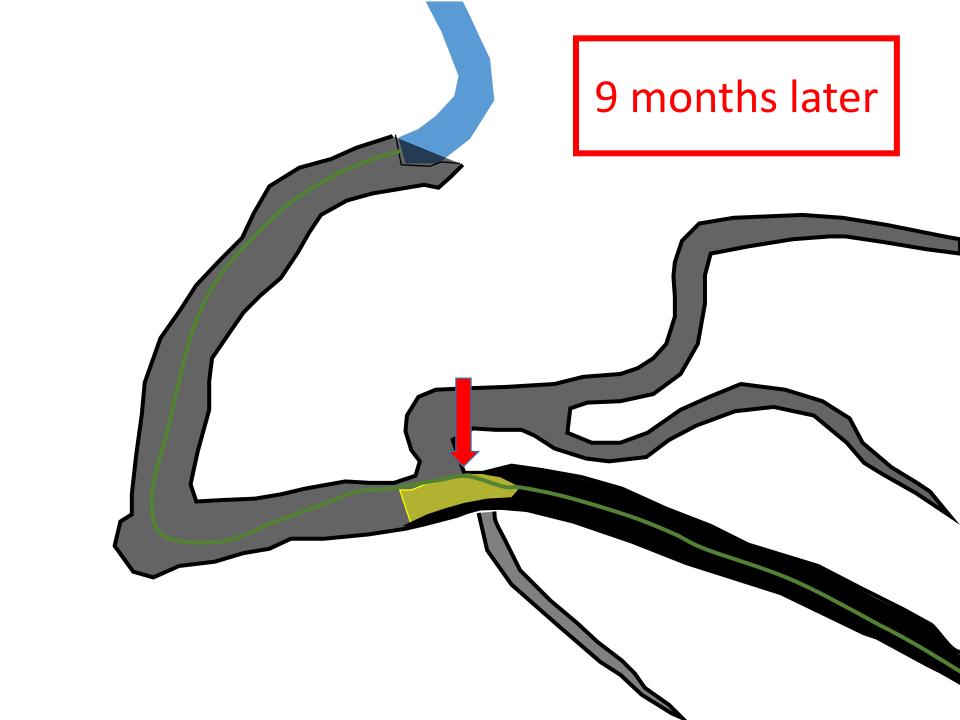


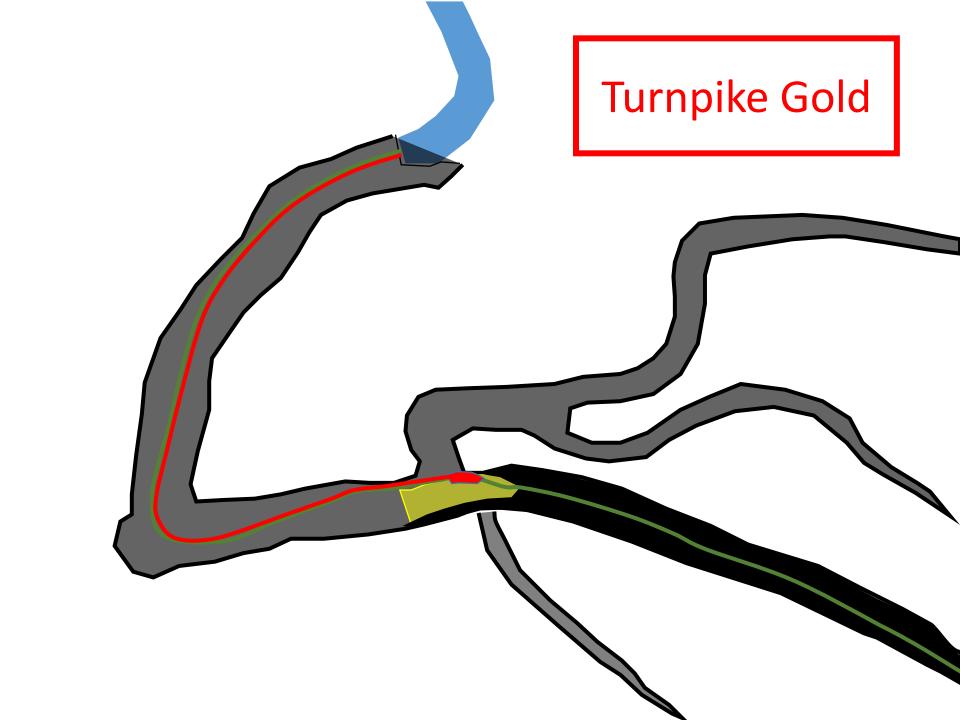


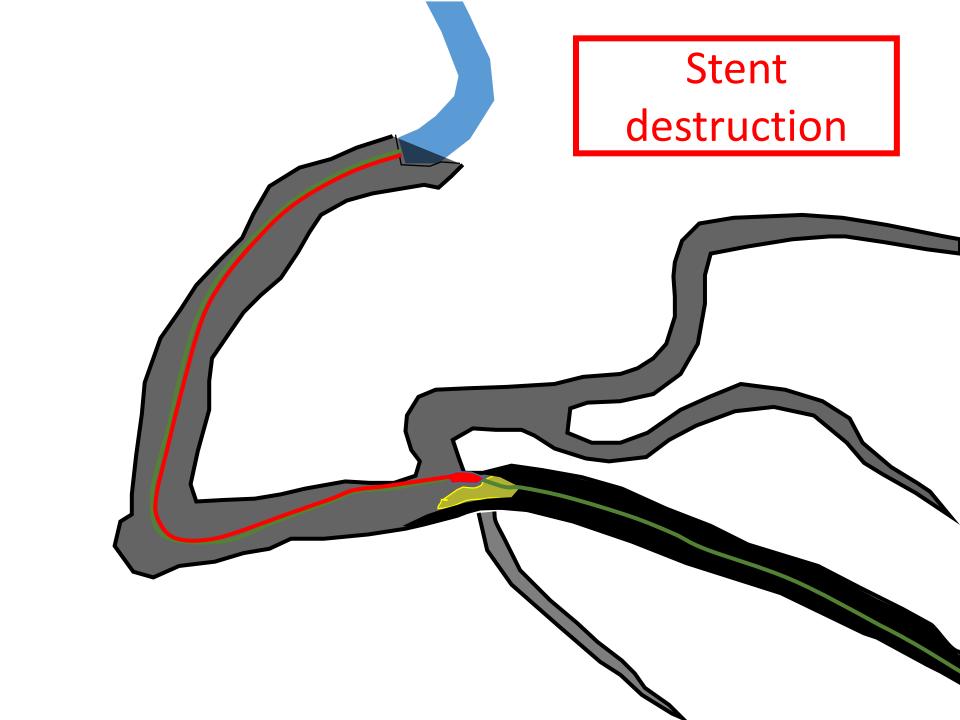


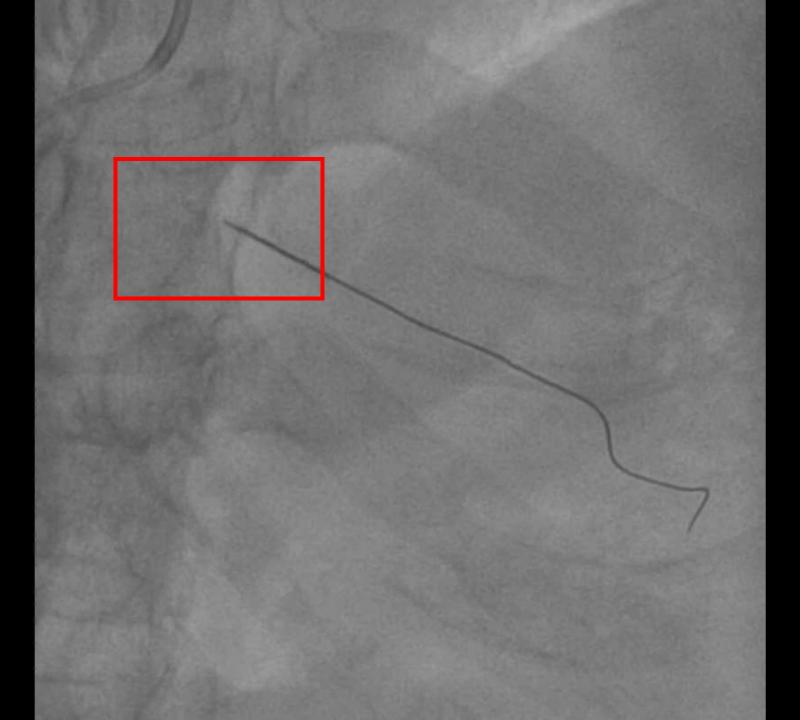


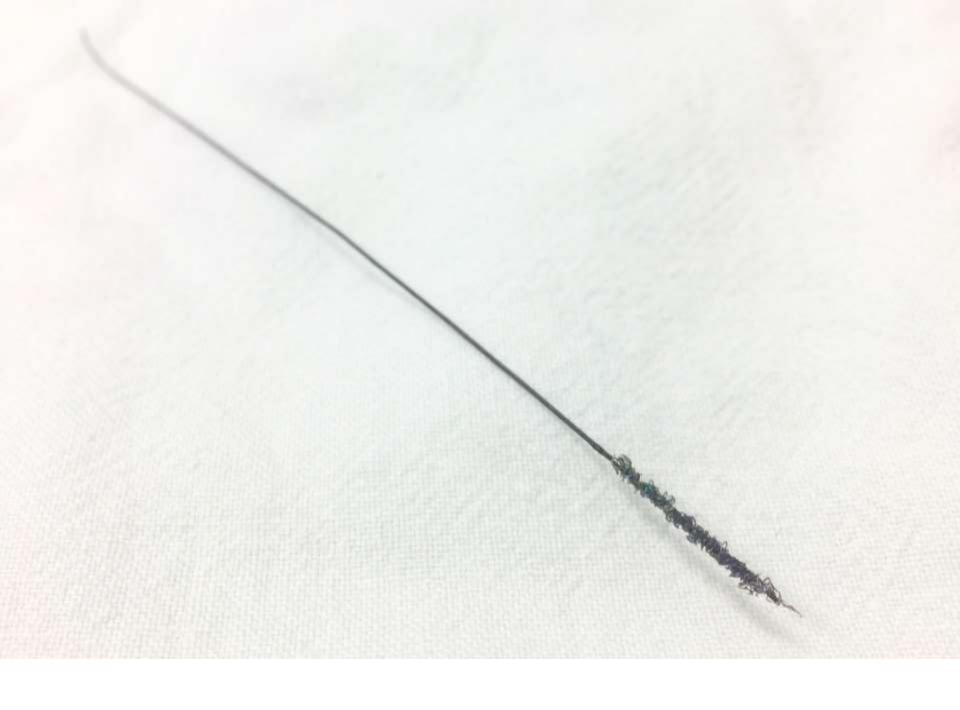


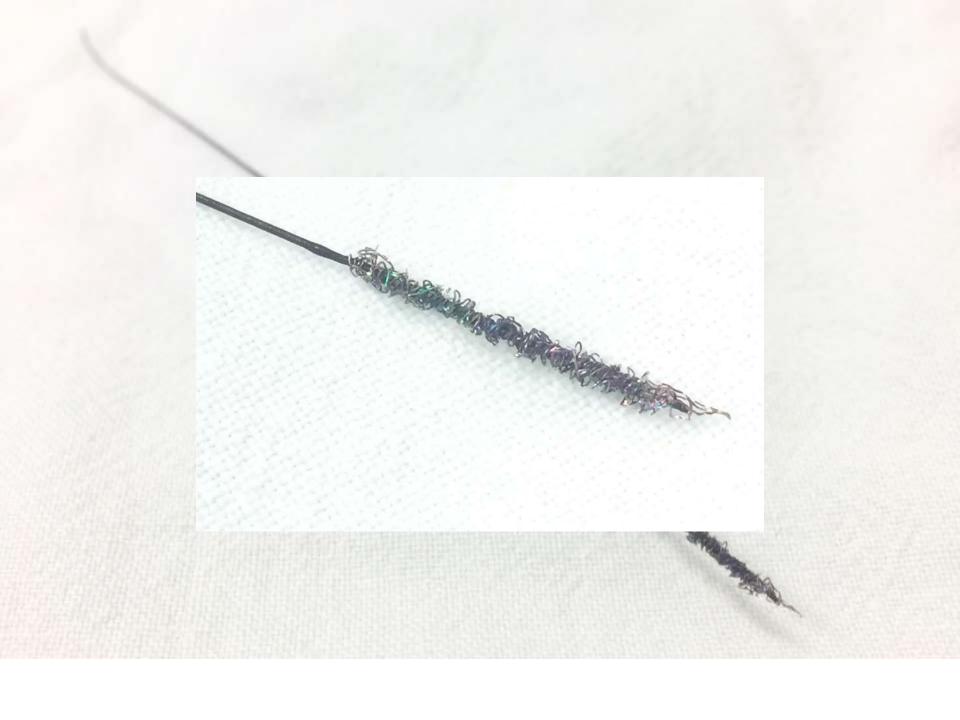








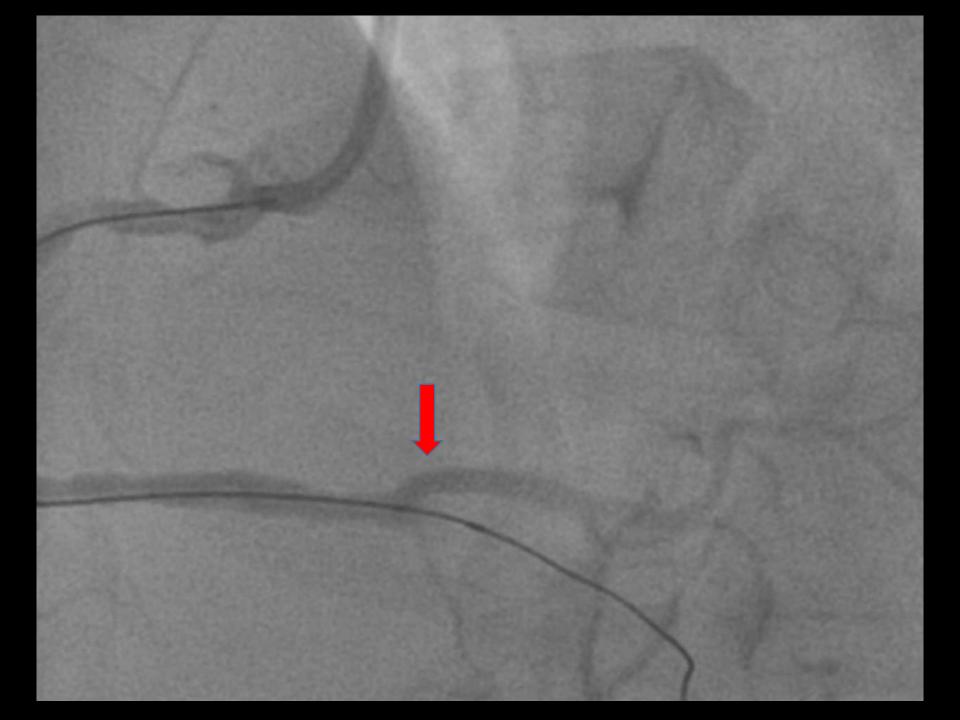




When difficult to cross a in-stent CTO, wire pass through stent strut should be considered

When difficult to cross a in-stent CTO, wire pass through stent strut should be considered

Consider image study before using channel dilator

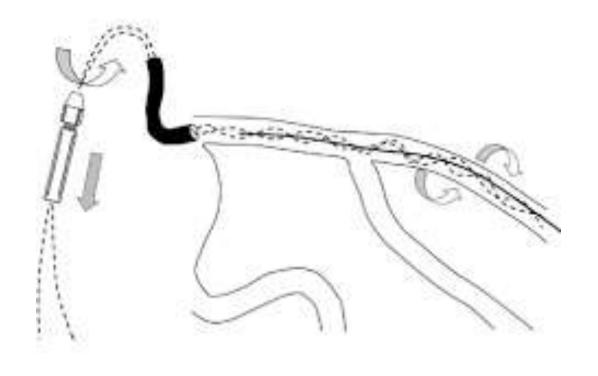


Wire fracture is a rare but possible complication during PCI

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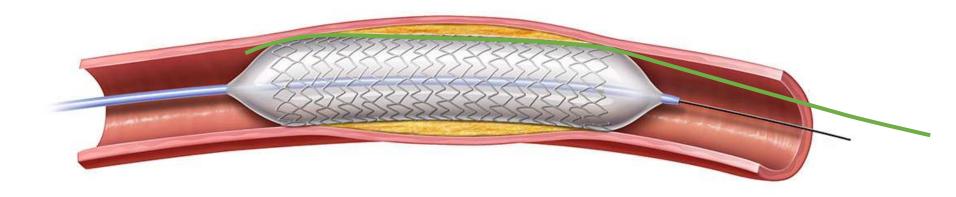
Guidewire remnant could lead to thrombosis, emboli, perforation

#### Two or three wire rotation



#### Two or three wire rotation

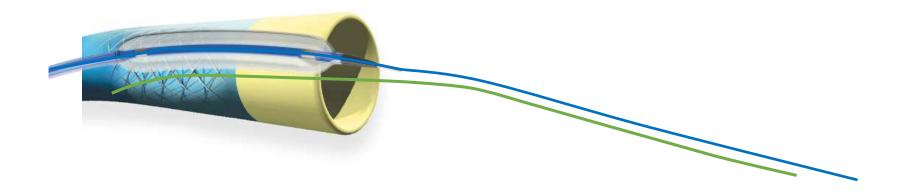
Stenting over



#### Two or three wire rotation

Stenting over

Deep catheter wedge

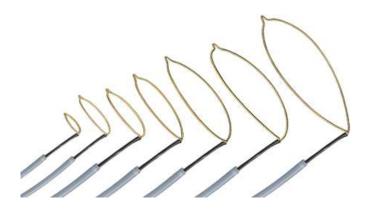


#### Two or three wire rotation

Stenting over

Deep catheter wedge

Loop snare removal



#### Two or three wire rotation

Stenting over

Deep catheter wedge

#### Loop snare removal

Surgical intervention

#### Two or three wire rotation

Stenting over

Deep catheter wedge

#### Loop snare removal

Surgical intervention

Conservative treatment



Be water, my friend

# Thank you

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