



Is It Time To Let It Go?

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History of Illness

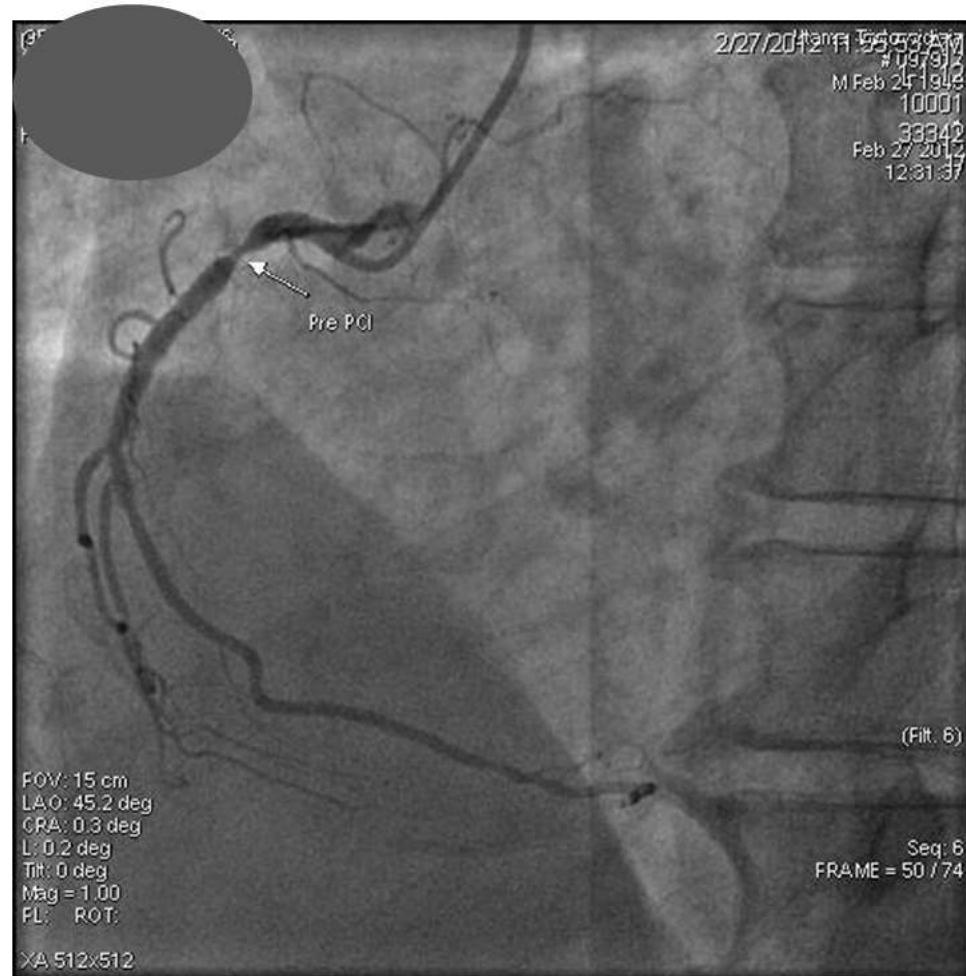
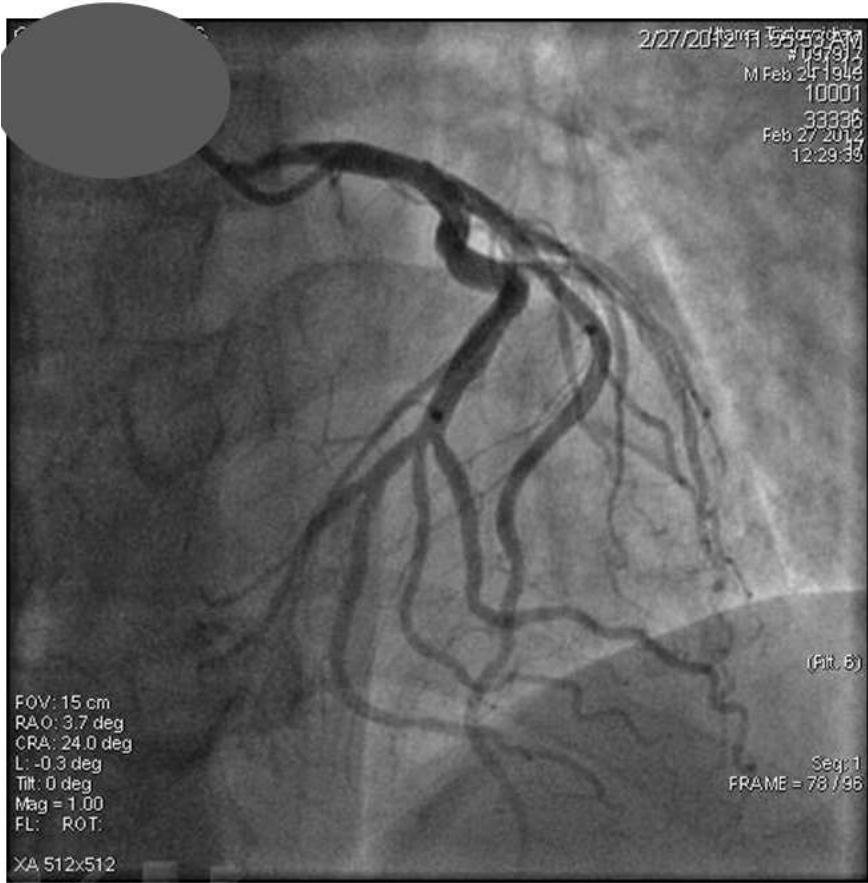
- A 69 yo male came to our clinic with mild chest discomfort & left arm paraesthesia in July 2017
- CVRF: HTN & DM
- History of 4 x PCIs → total 5 implants (2009 to Mar 2017-- just 4 months prior) at RCA
- LCA Normal (2009-2017)
- Feb 2017 mild angina, but normal exercise treadmill test (1 week prior to the 4th PCI)
- July 2017: ECG no ST-T segment changes
- Chest X ray: Cor normal
- High sensitivity-Trop T: mild positive (30.0 ng/L)
- Echo: Moderate concentric LVH, Normal wall motion, LVEF 70%

History of PCIs

2009	Mild angina	Prox RCA	Nobori 3.0-19
		Mid RCA overlappingly	Biomatrix 2.5-14
2012	Mild angina ISR prox RCA	Prox RCA	Biomatrix 3.0-18
2014	Mild angina ISR prox RCA again	Ostial-Prox RCA	BVS 3.5-18
2017	Mild angina ISR ostial RCA	Ostial-Prox RCA	DEB 3.5-18 + XA 4.0-23

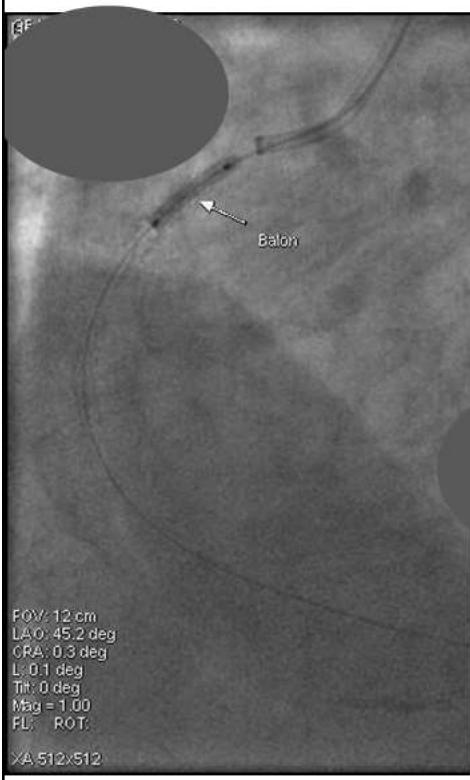
2012-DES ISR

Dominant LCA



Non-dominant RCA

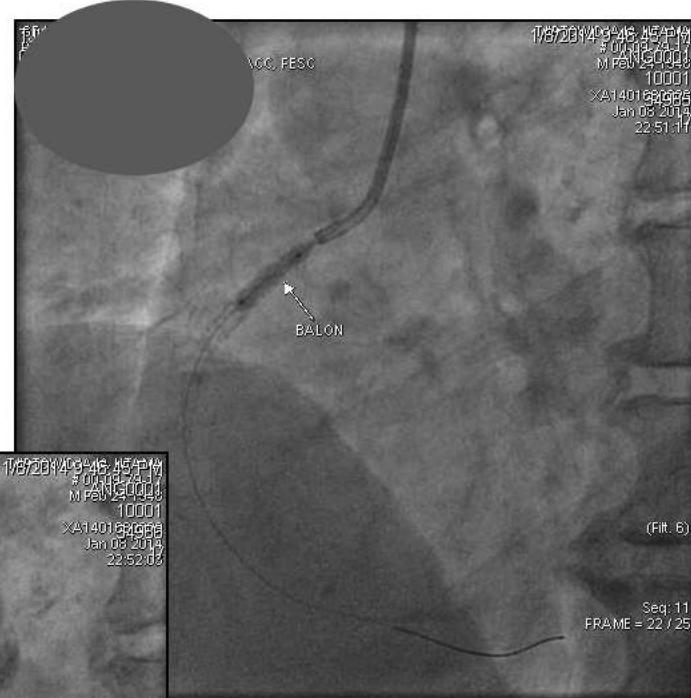
2012-DES



2014-DES ISR



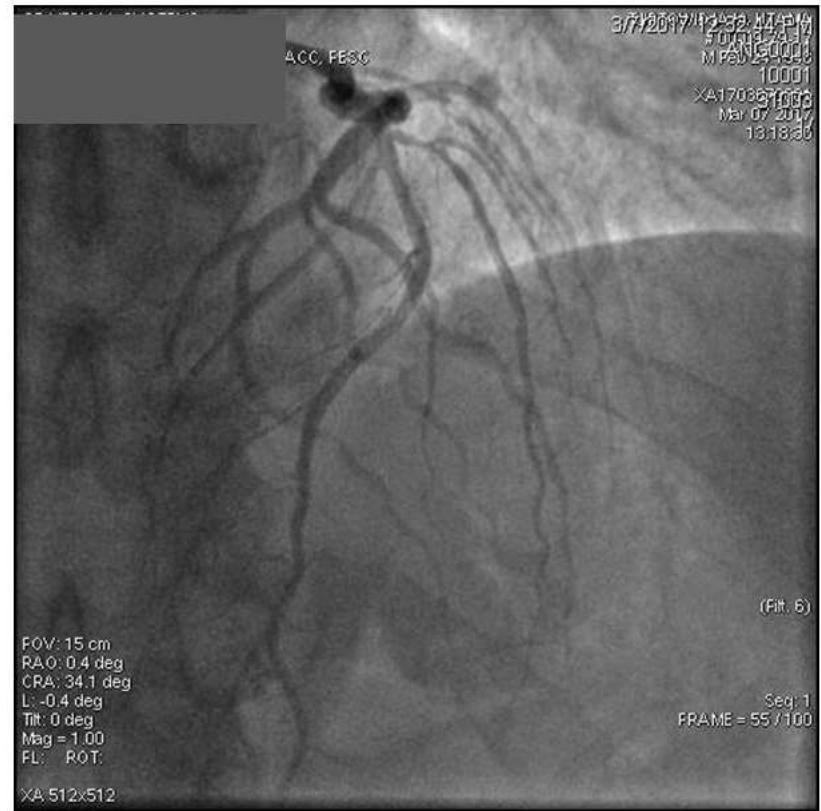
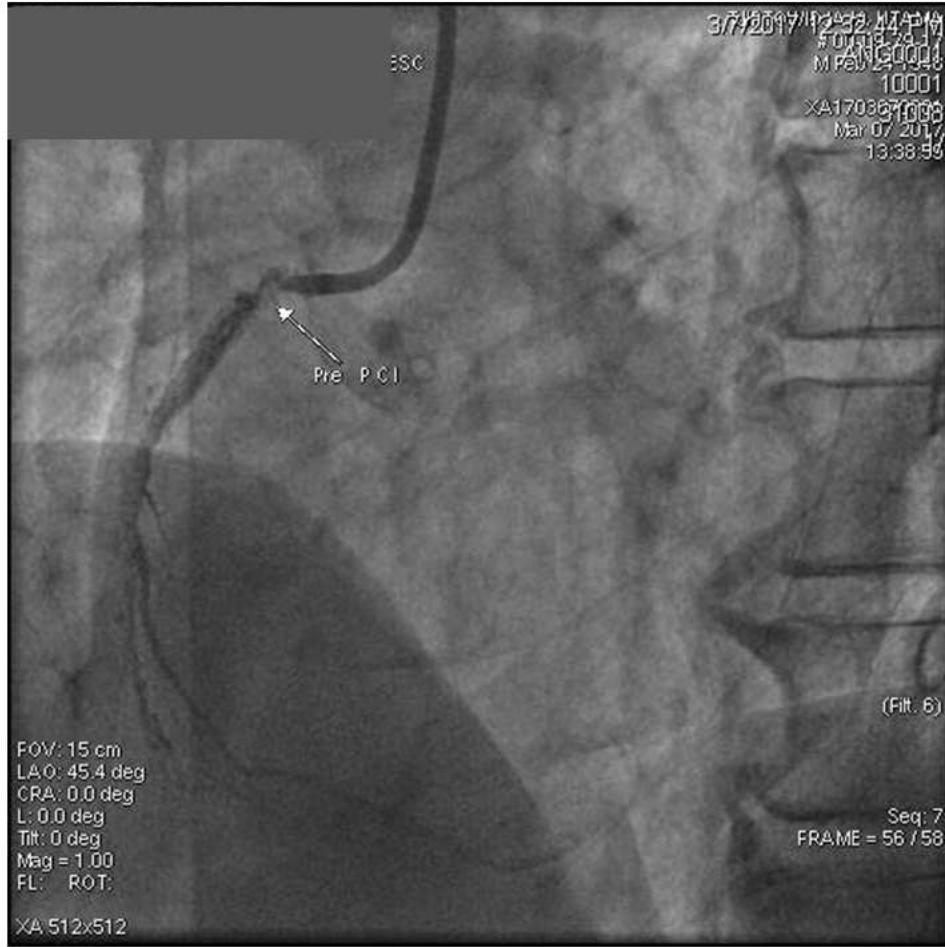
2014 Predilation



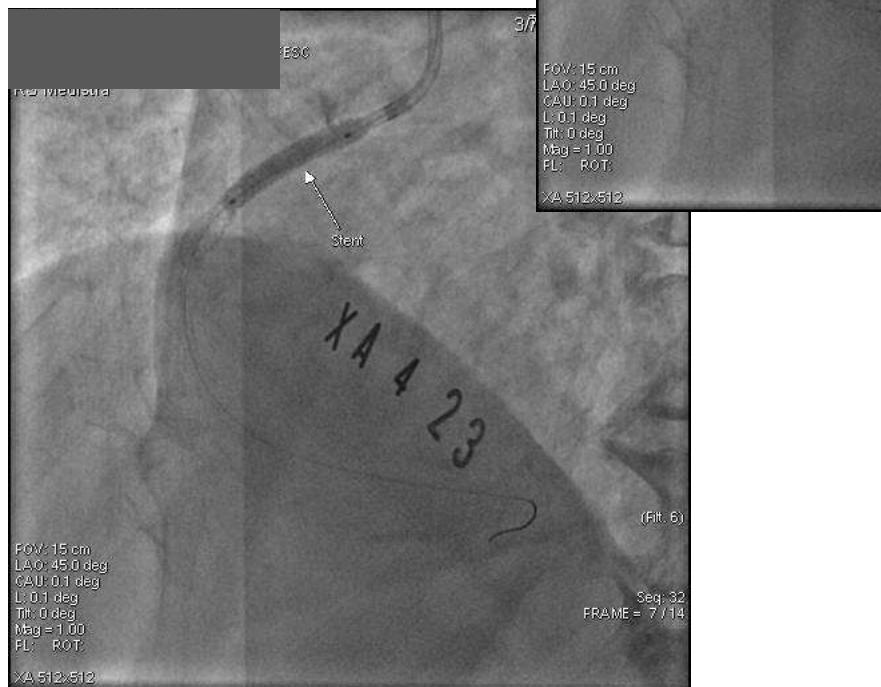
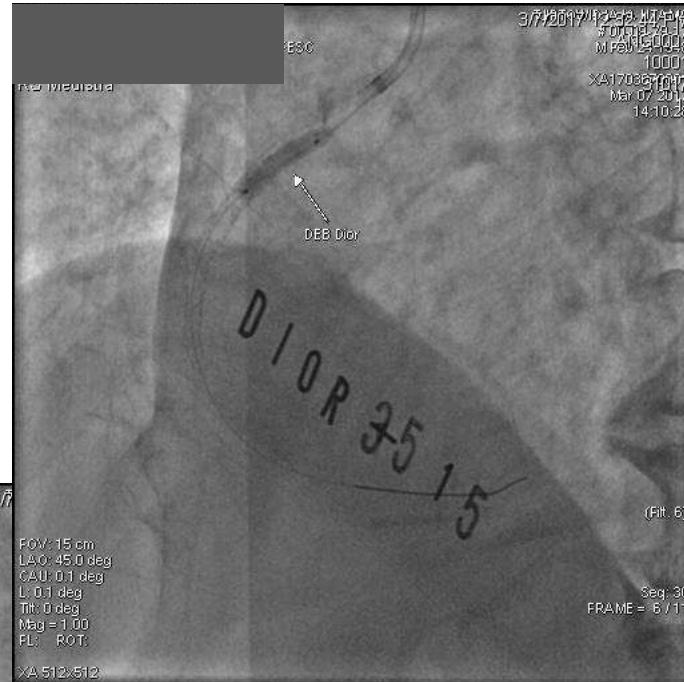
2014-BVS



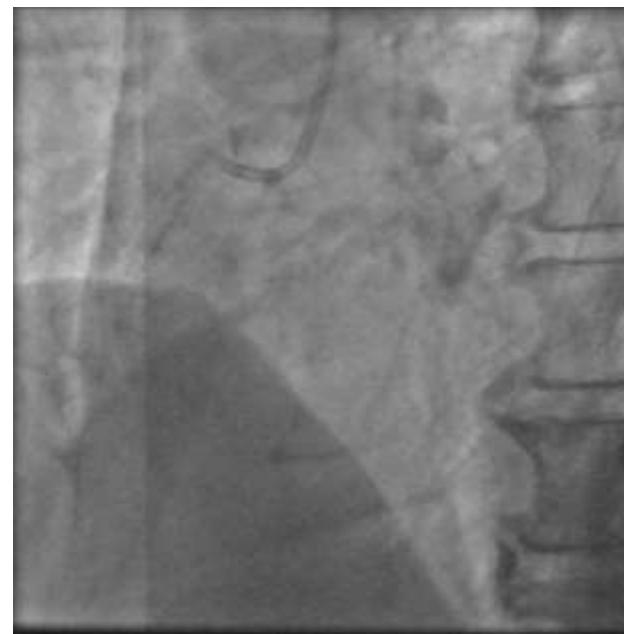
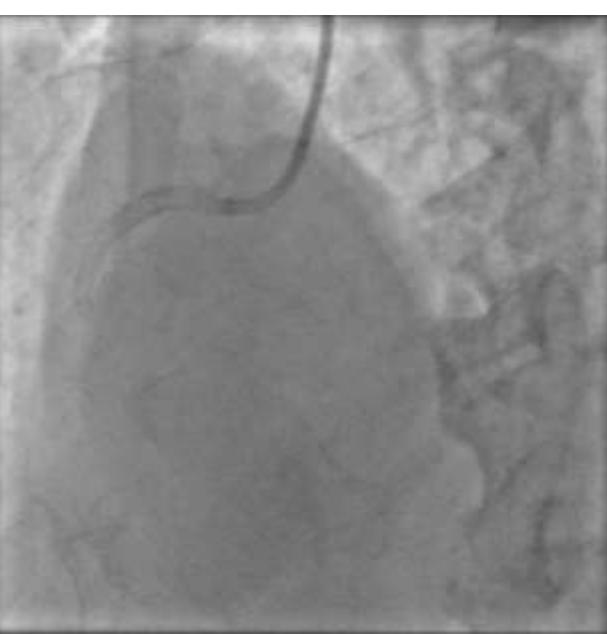
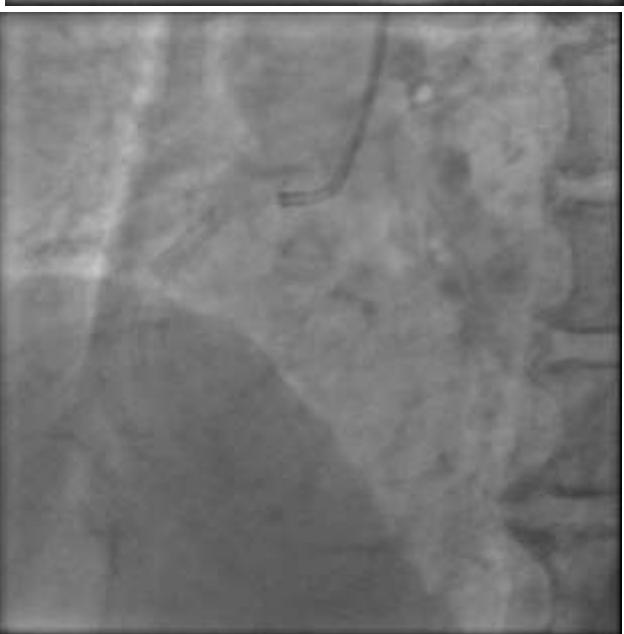
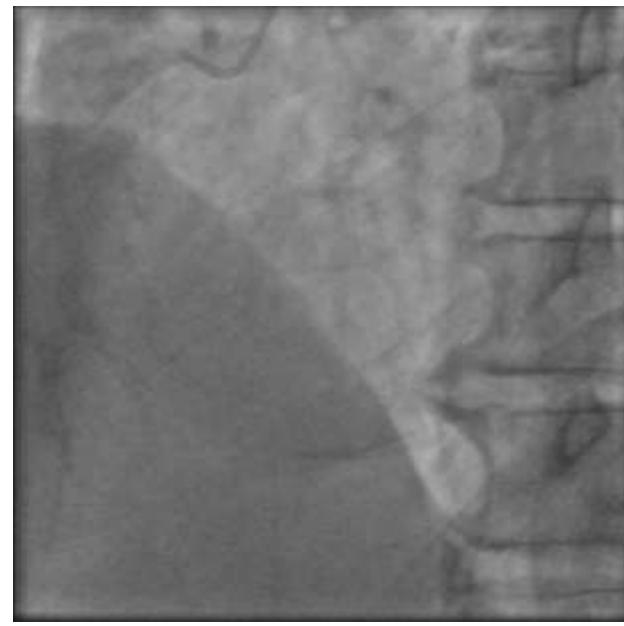
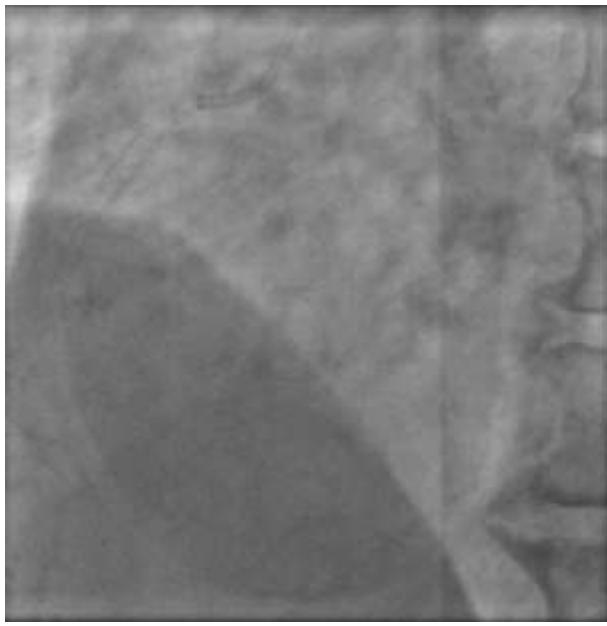
2017 – BVS ISR



2017 DEB and DES



The Whole Cines



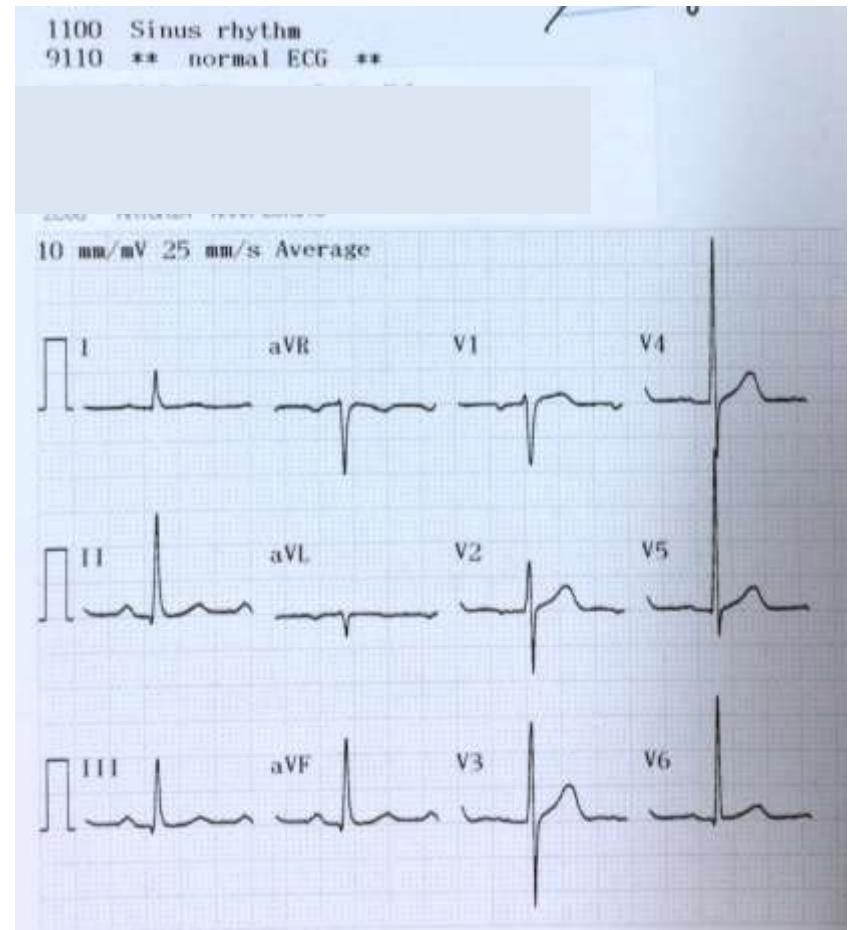
What should we do?

- Angiography and stent RCA again?
- Angiography and RCA bypass surgery?
- OMT and let go the non dominant RCA ?



Follow-up

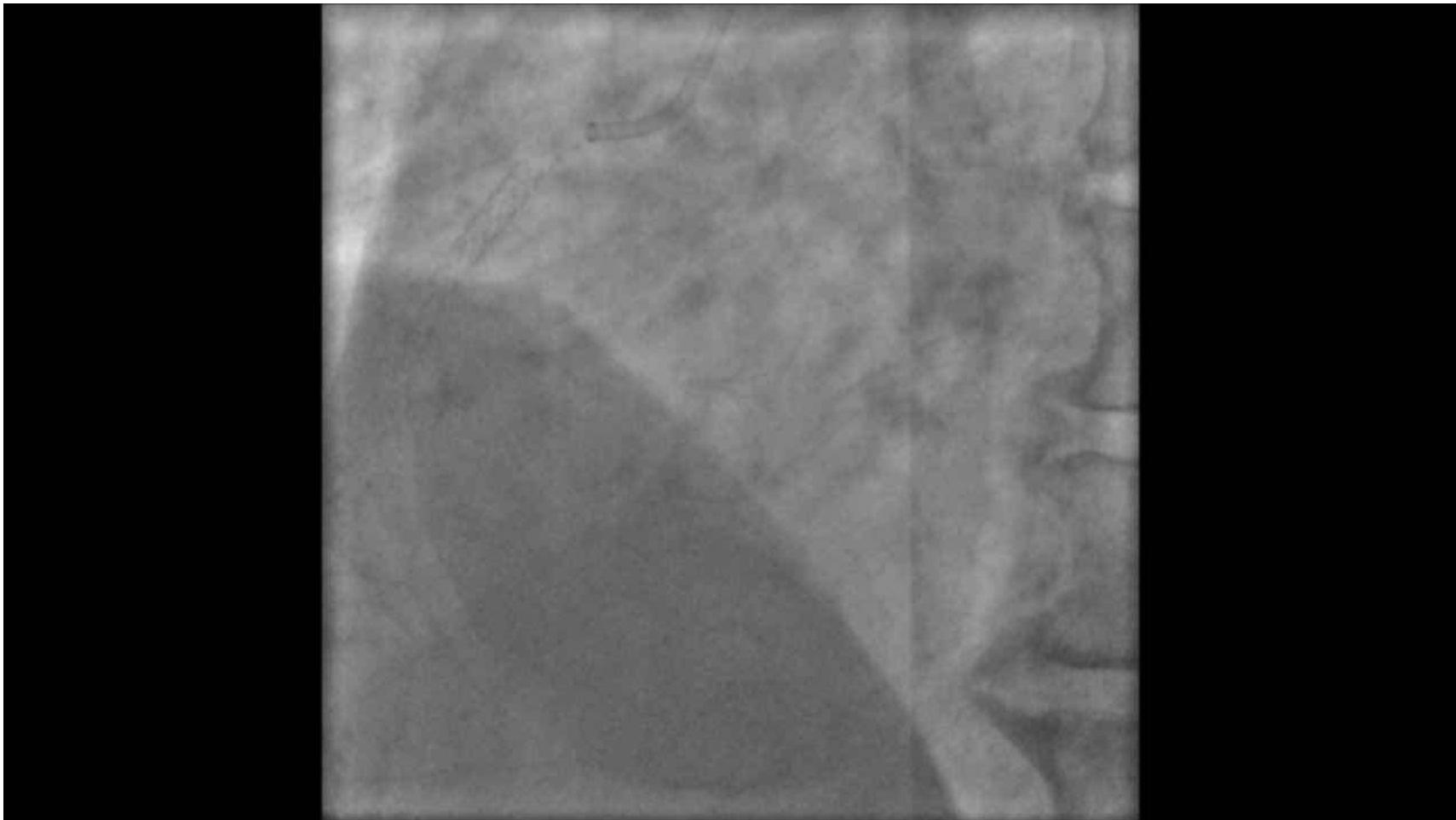
- Minimal angina
- ECG : normal
- Optimize antiangina medicine
- Three months F/up
 - No angina
 - Normal ECG



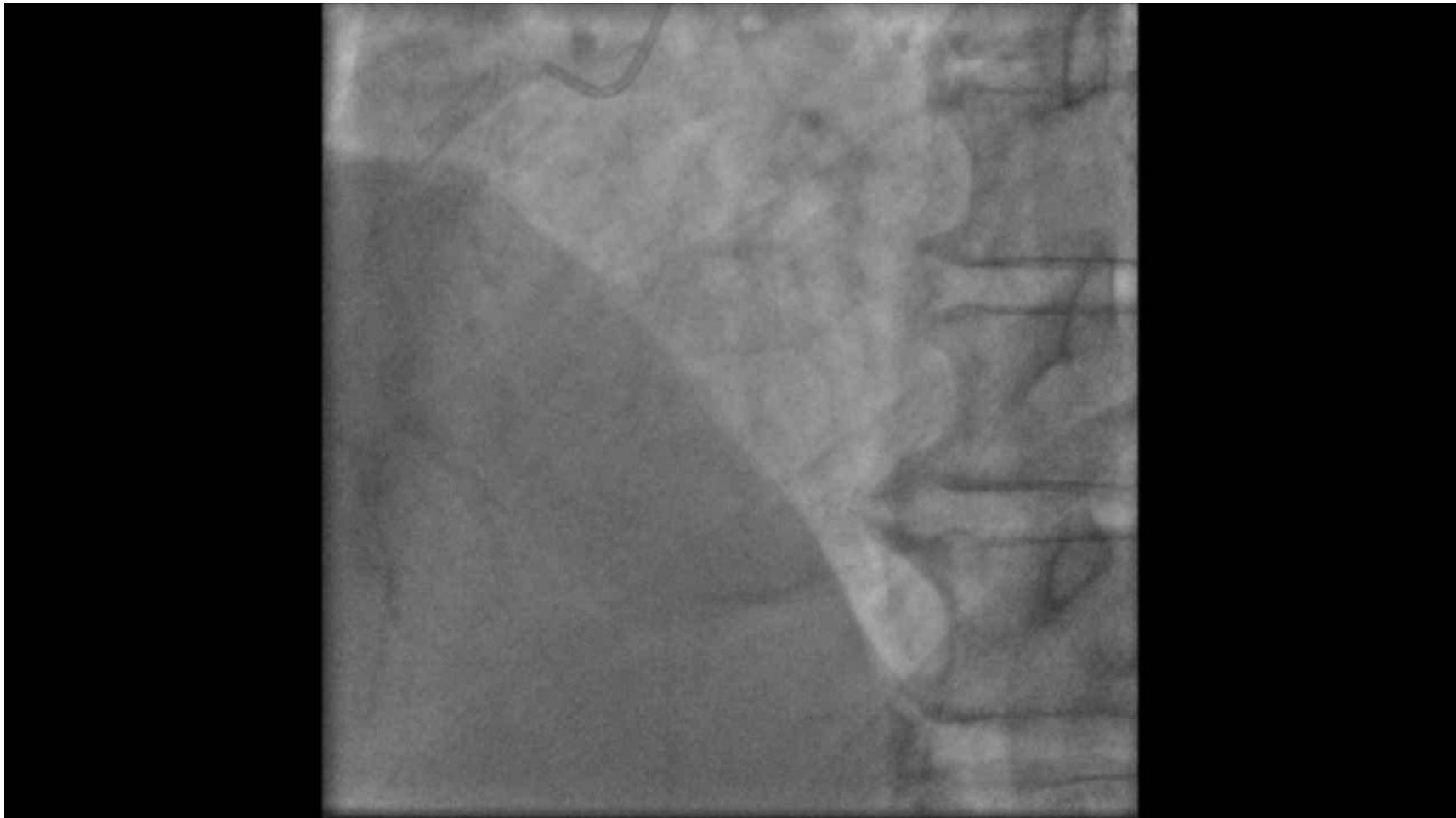
2012-DES ISR



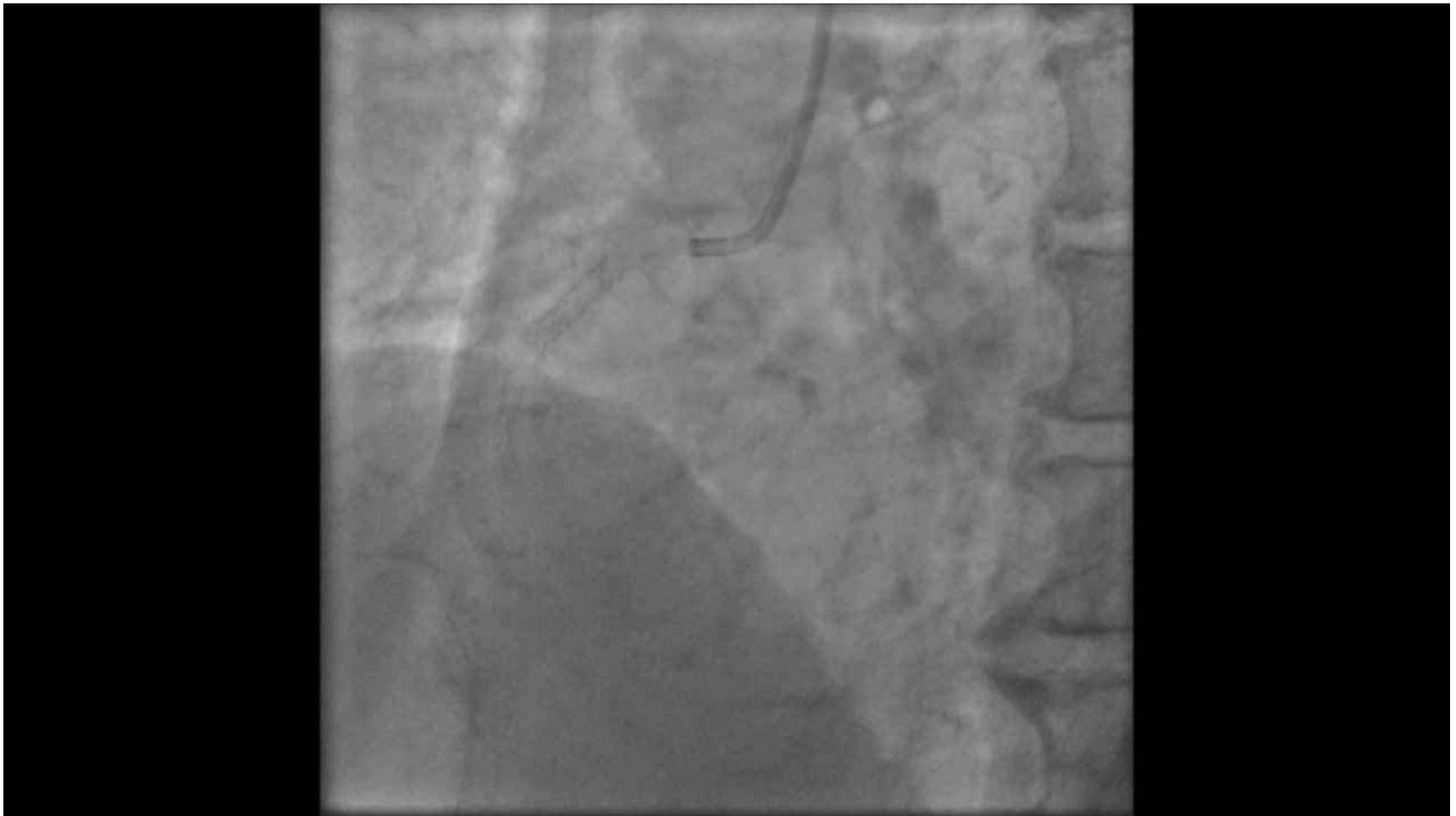
2012-PCI DES



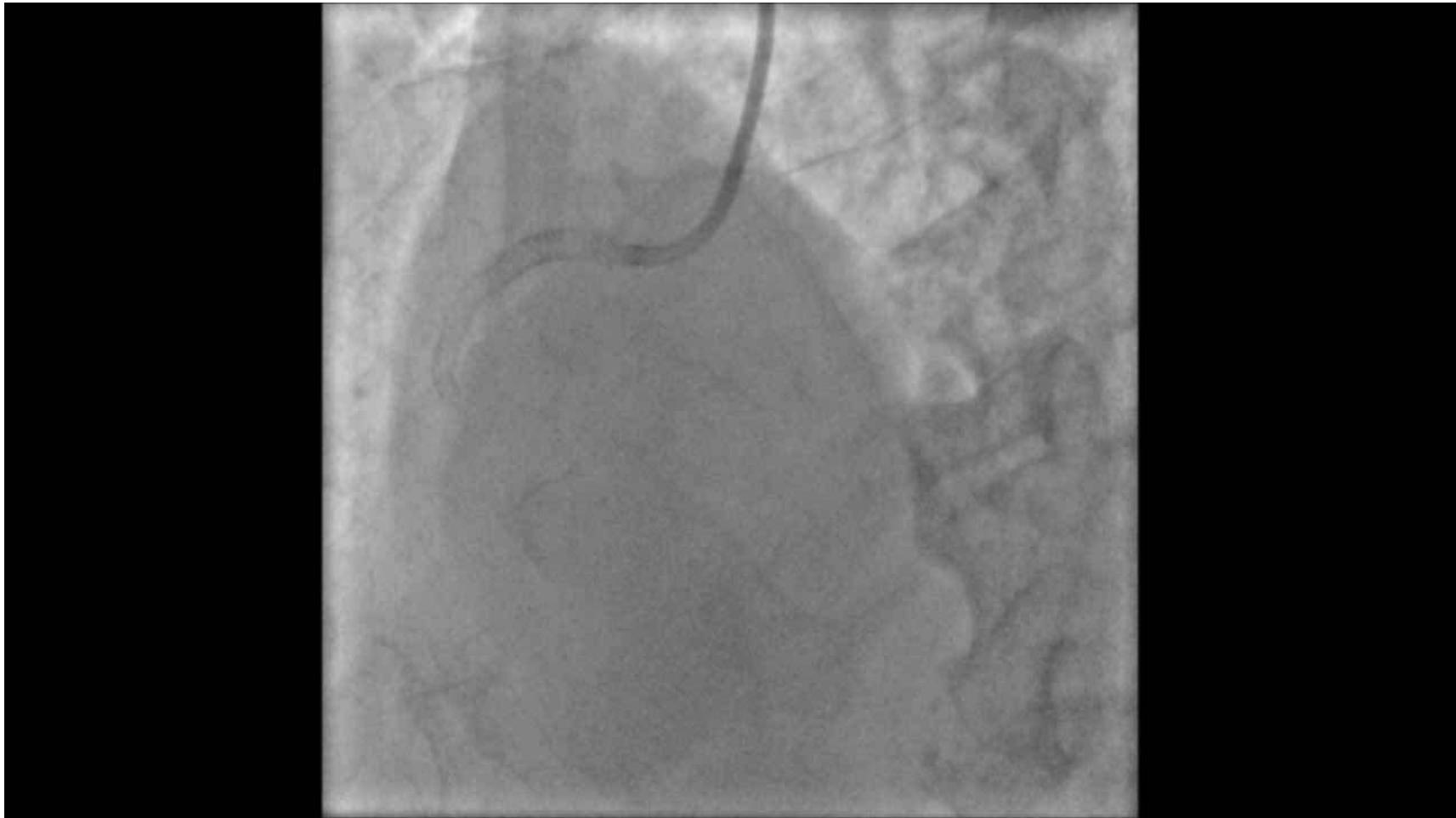
2014-ISR DES Again



2014-PCI BVS



2017- PCI DEB-DES



2017- BVS ISR

