

# Rotational Atherectomy

Complication:

A Burr Stuck in Stent

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69 yr old lady

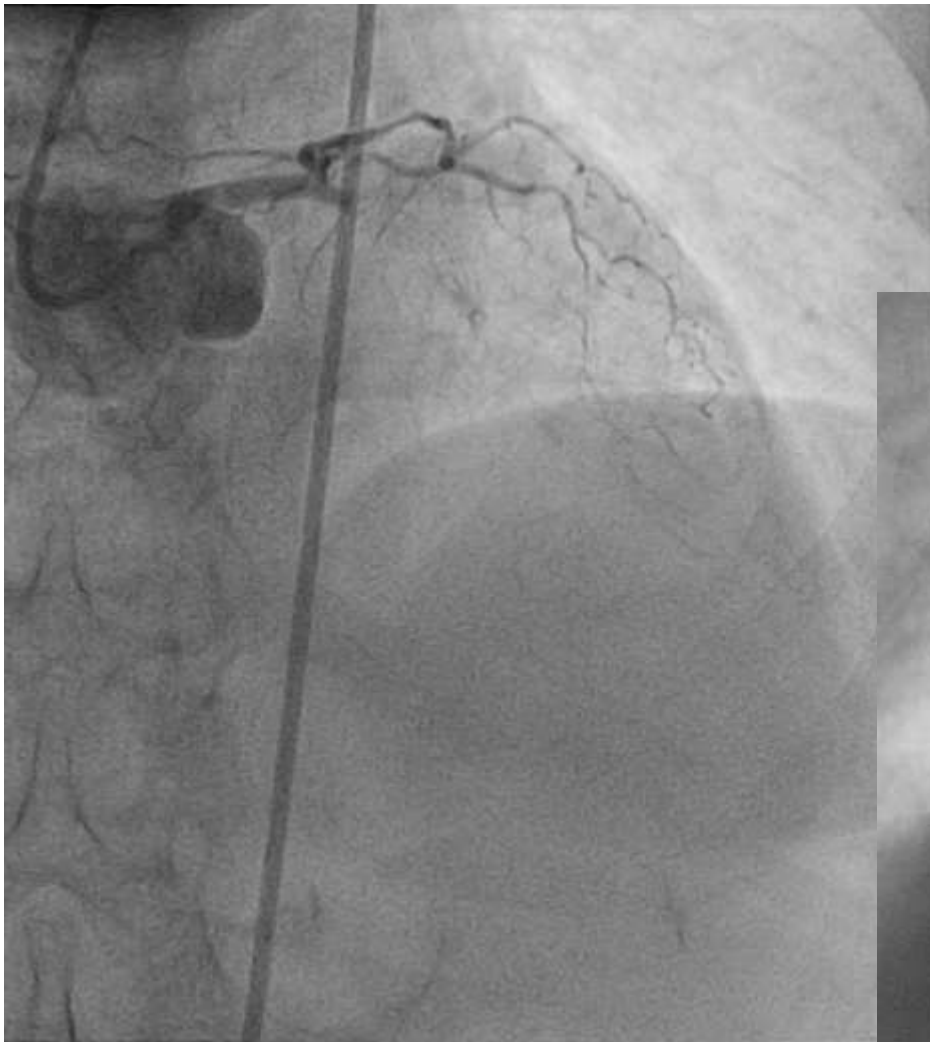
1. Coronary artery disease  
Anteroseptal MI in 2012
2. Diabetes mellitus
3. Dyslipidaemia
4. Chronic Kidney Disease Stage III

PCI to near ostial LAD CTO in Sept. 2017  
Calcified lesion.

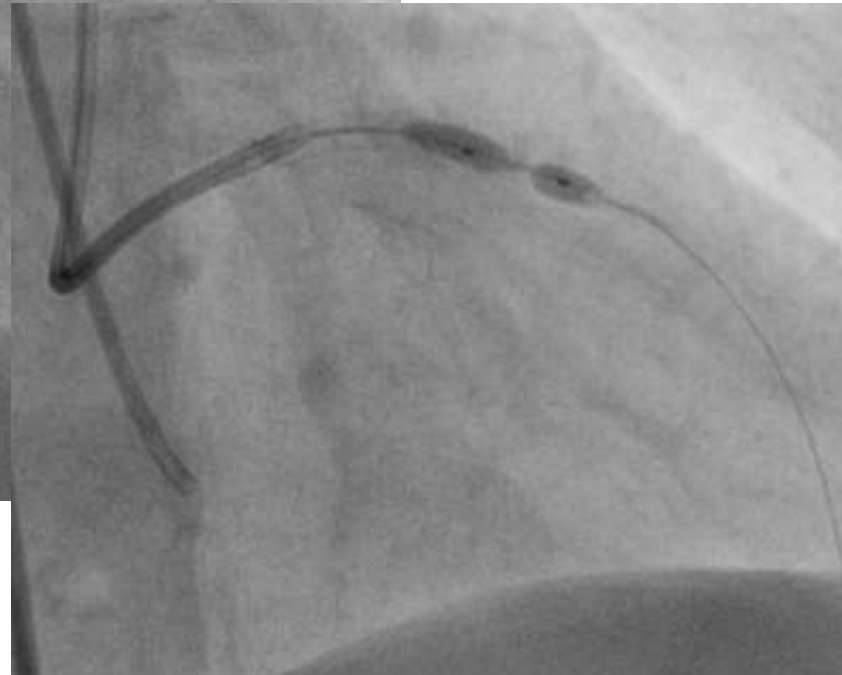
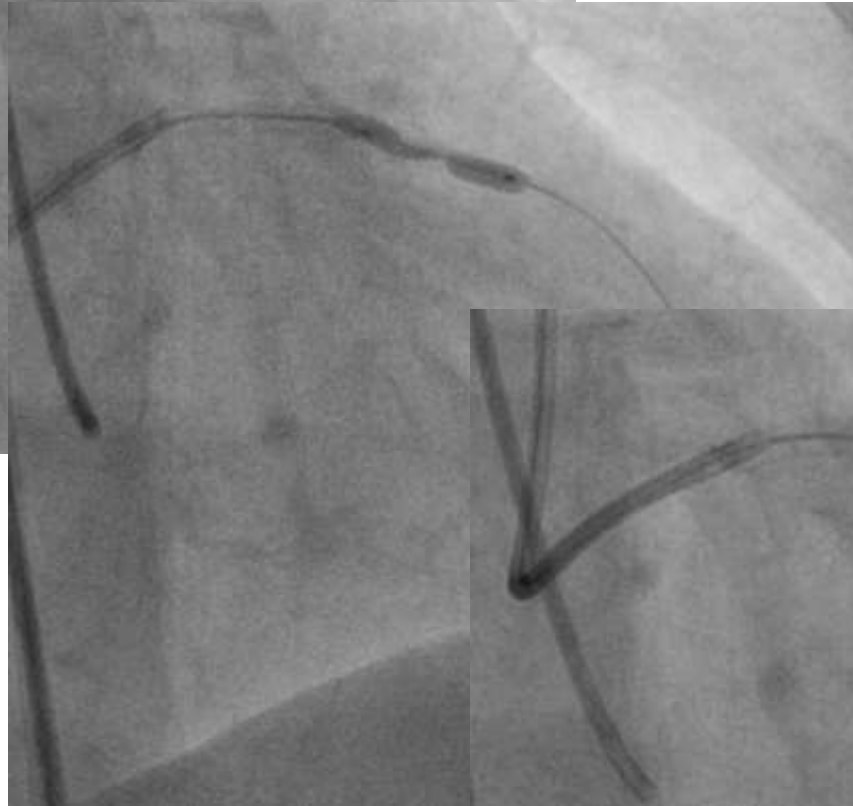
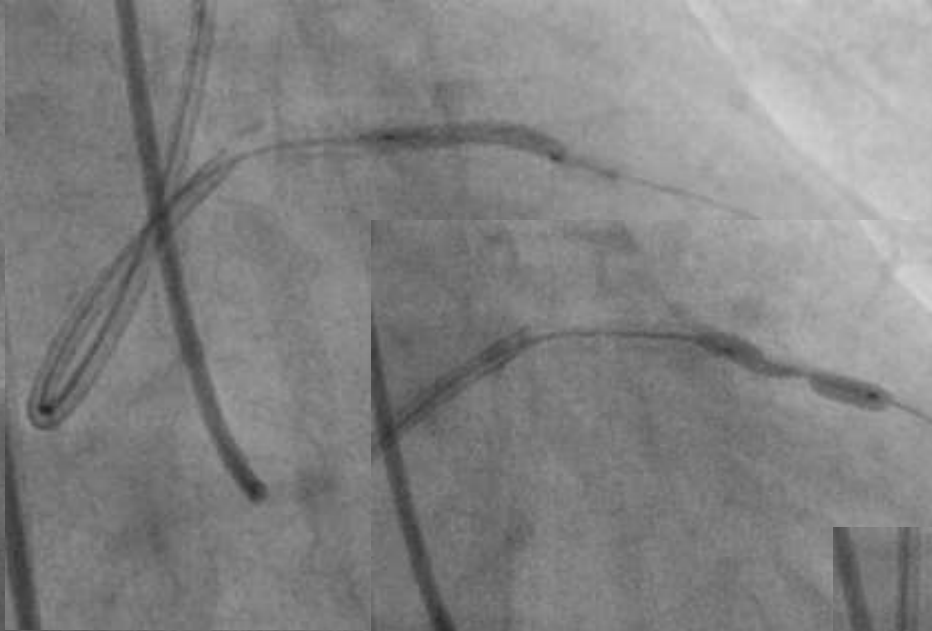
Implanted stent to proximal LAD but  
failed to implant another stent to midLAD

Unstable angina 2 weeks post PCI

# Syntax Score 24

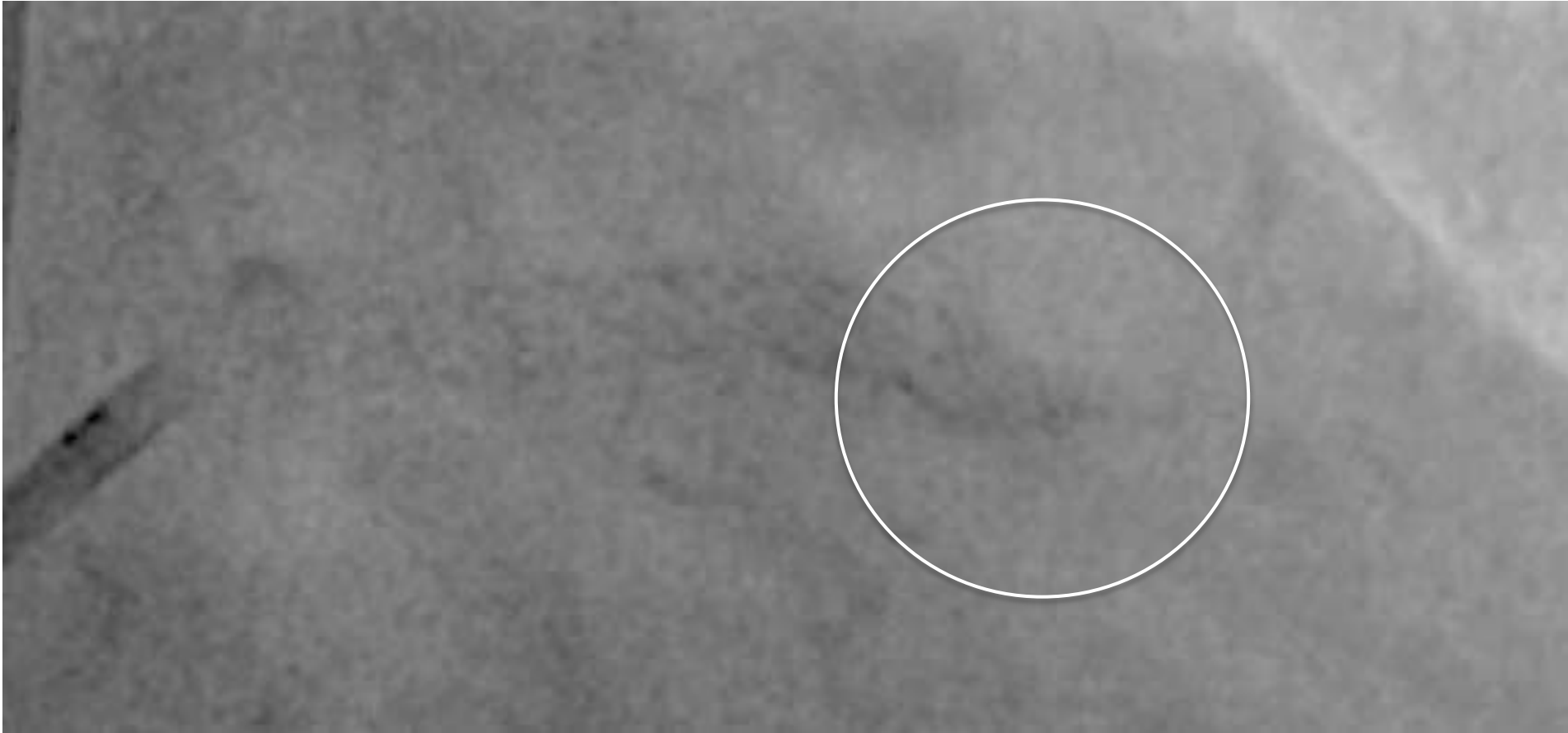


2.5 x 15 mm NC Balloon till 26 Atm

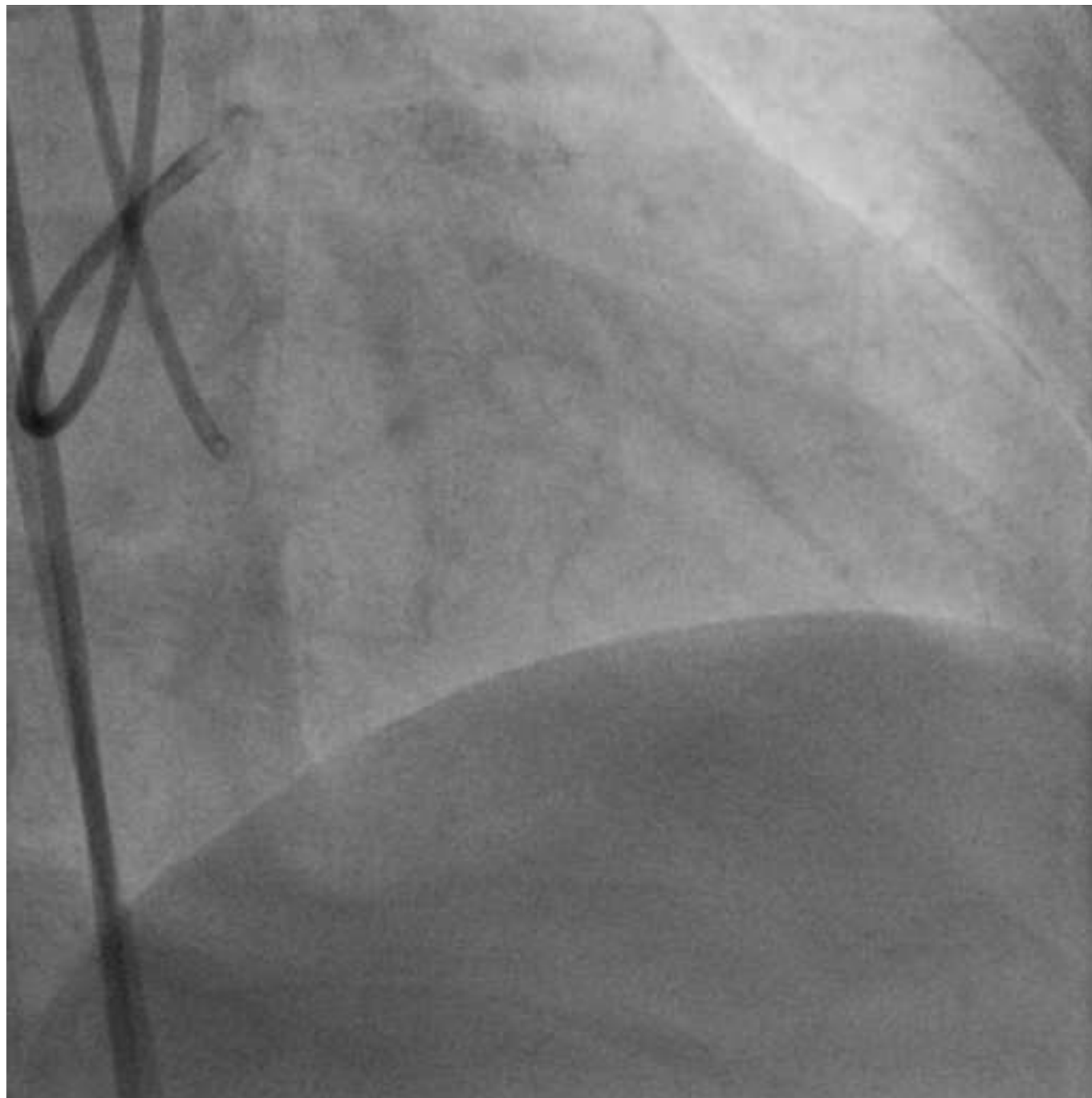


3.0 x 15 mm NC Balloon till 30 Atm

Stent not expanded

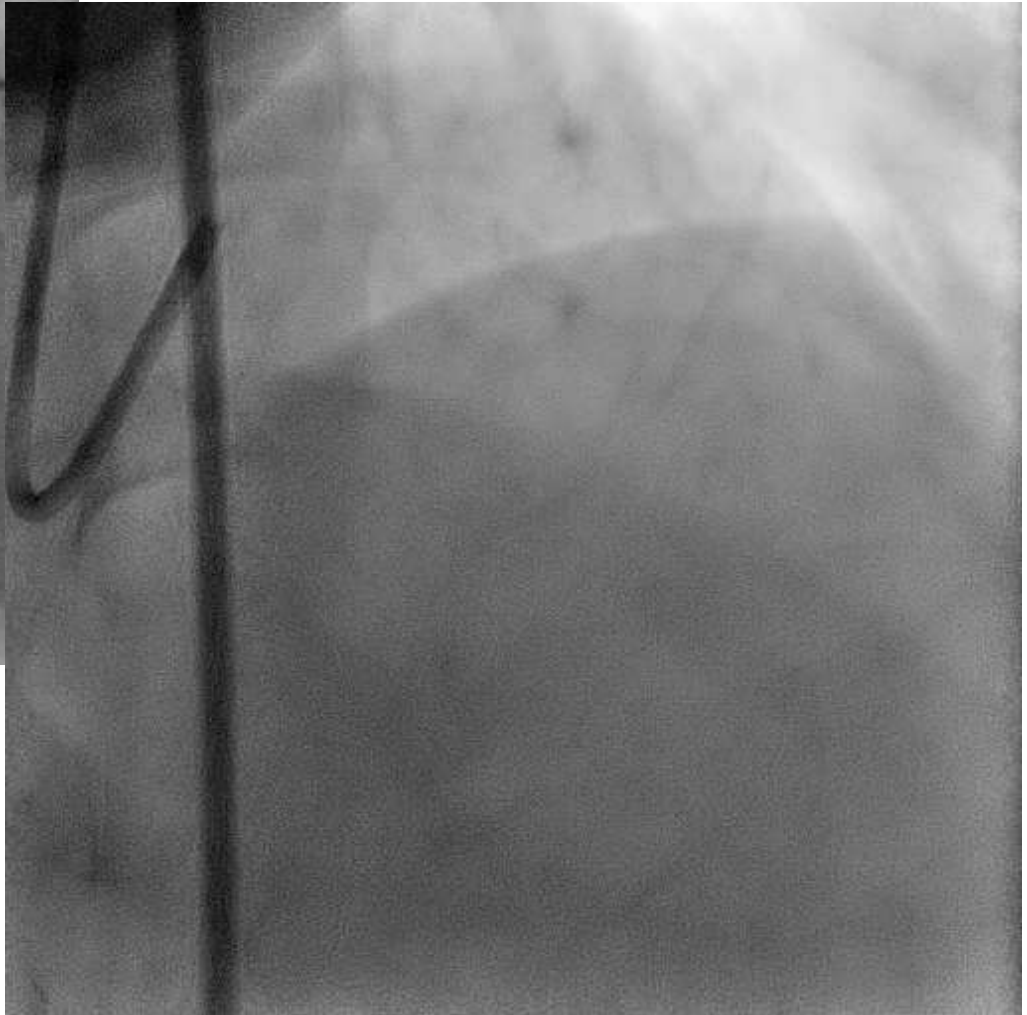


LAD  
Results  
post PCI

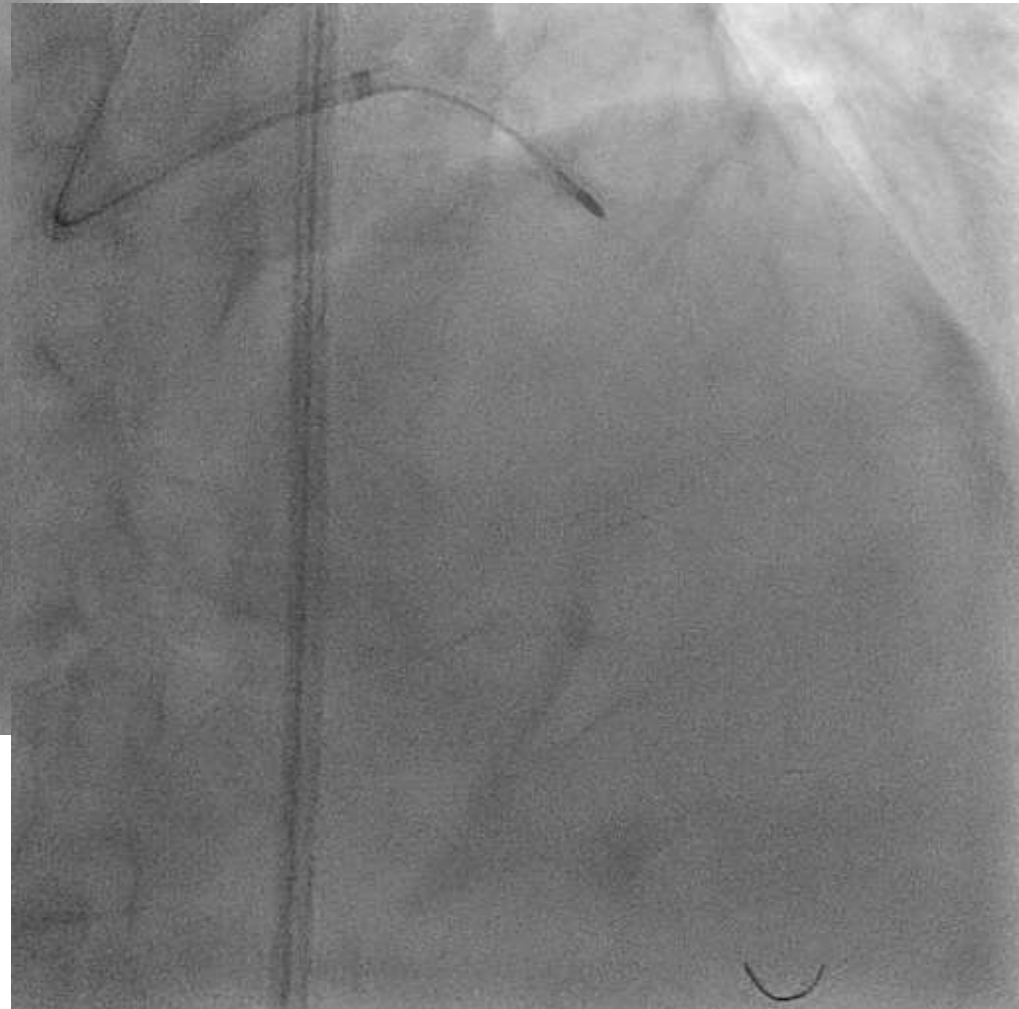
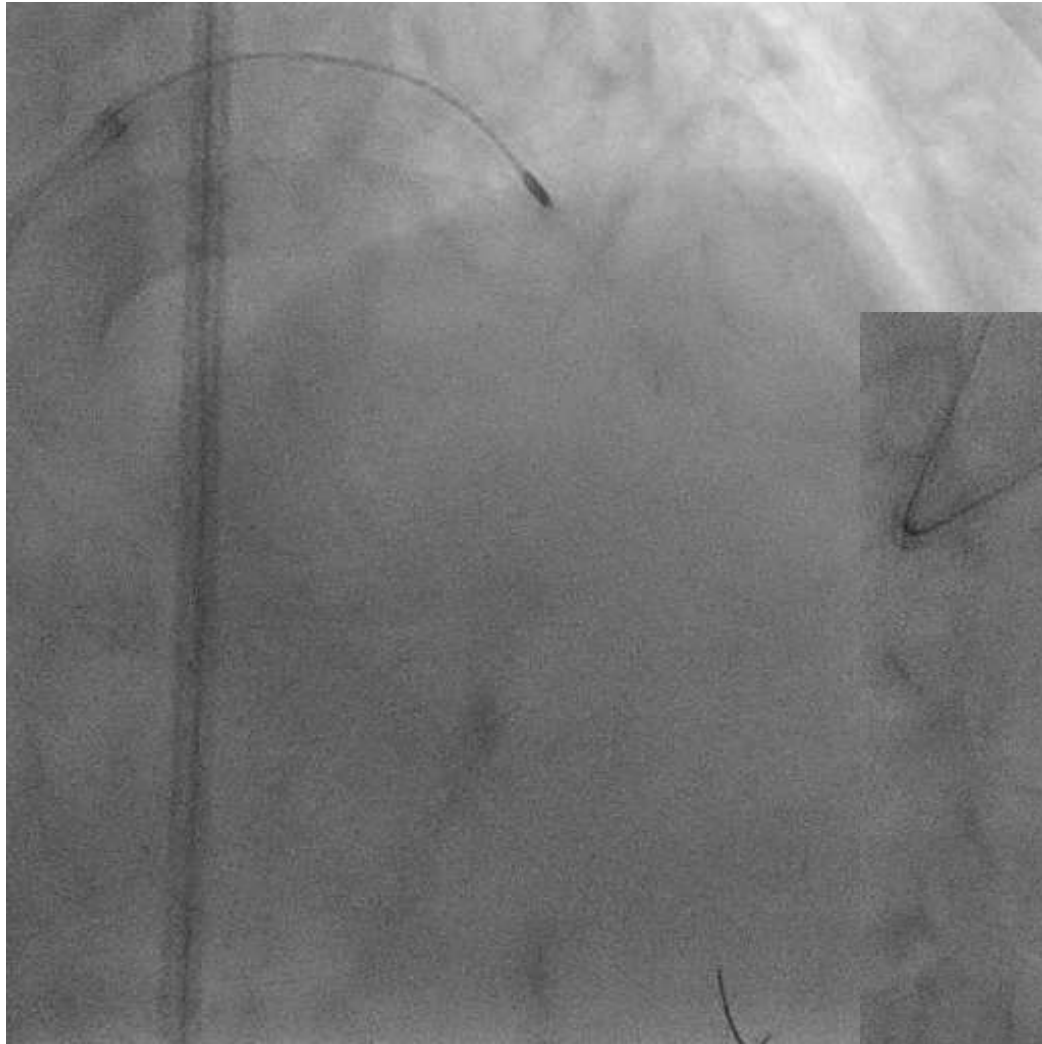




2 days post PCI

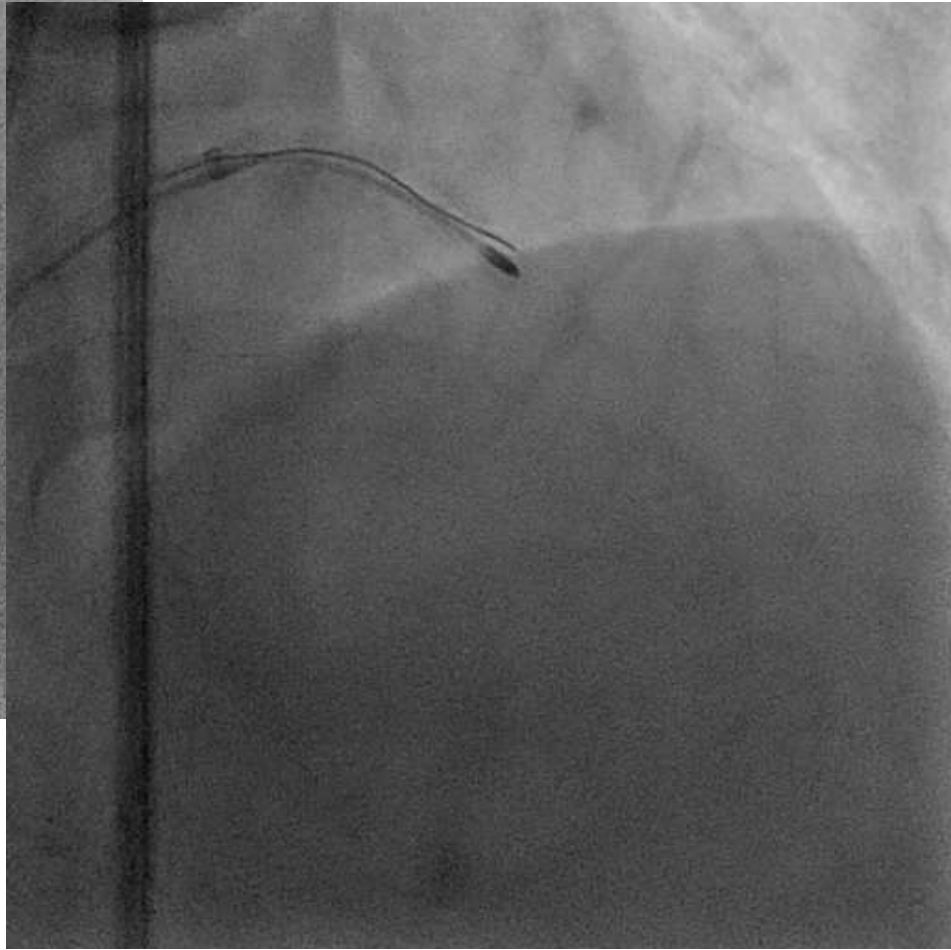
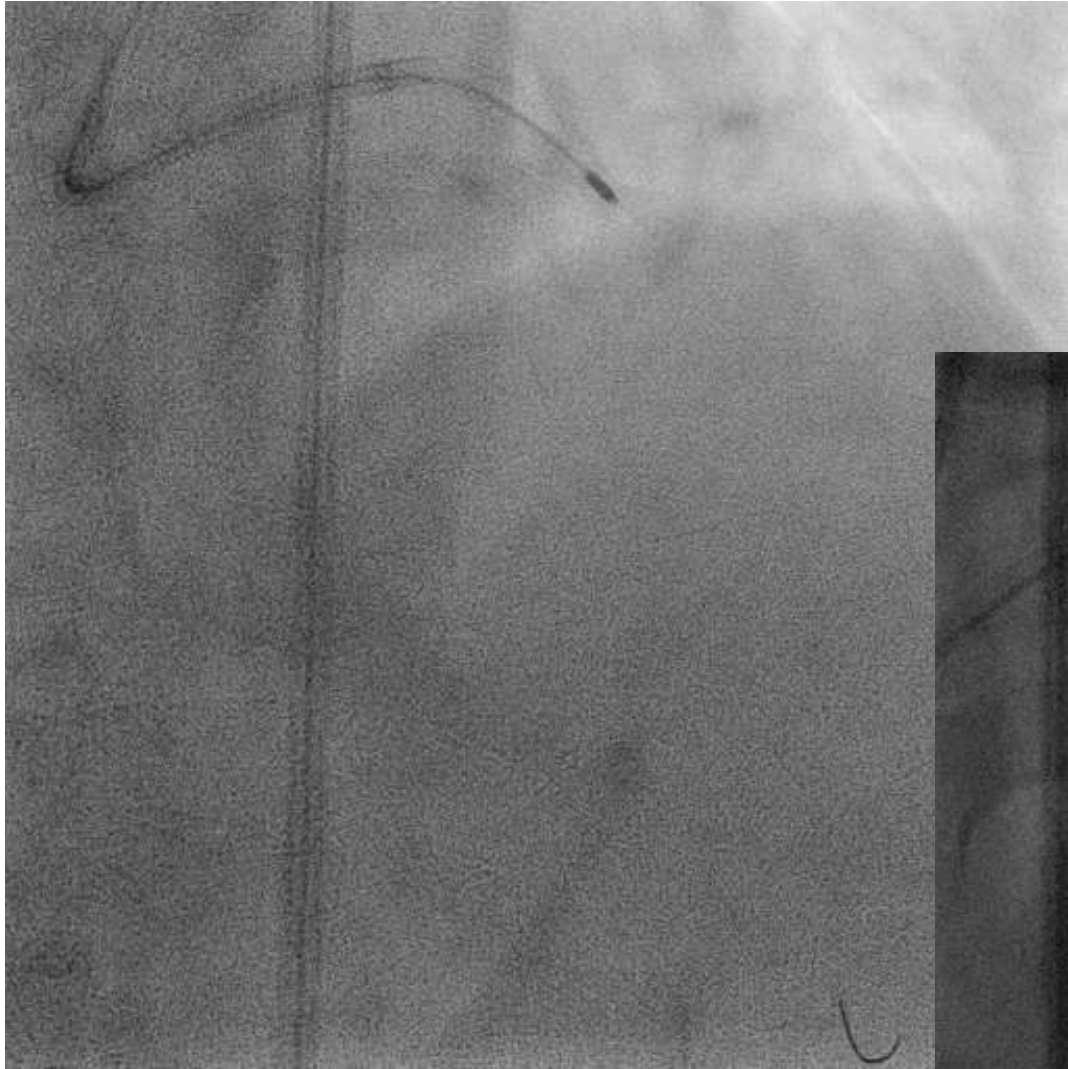


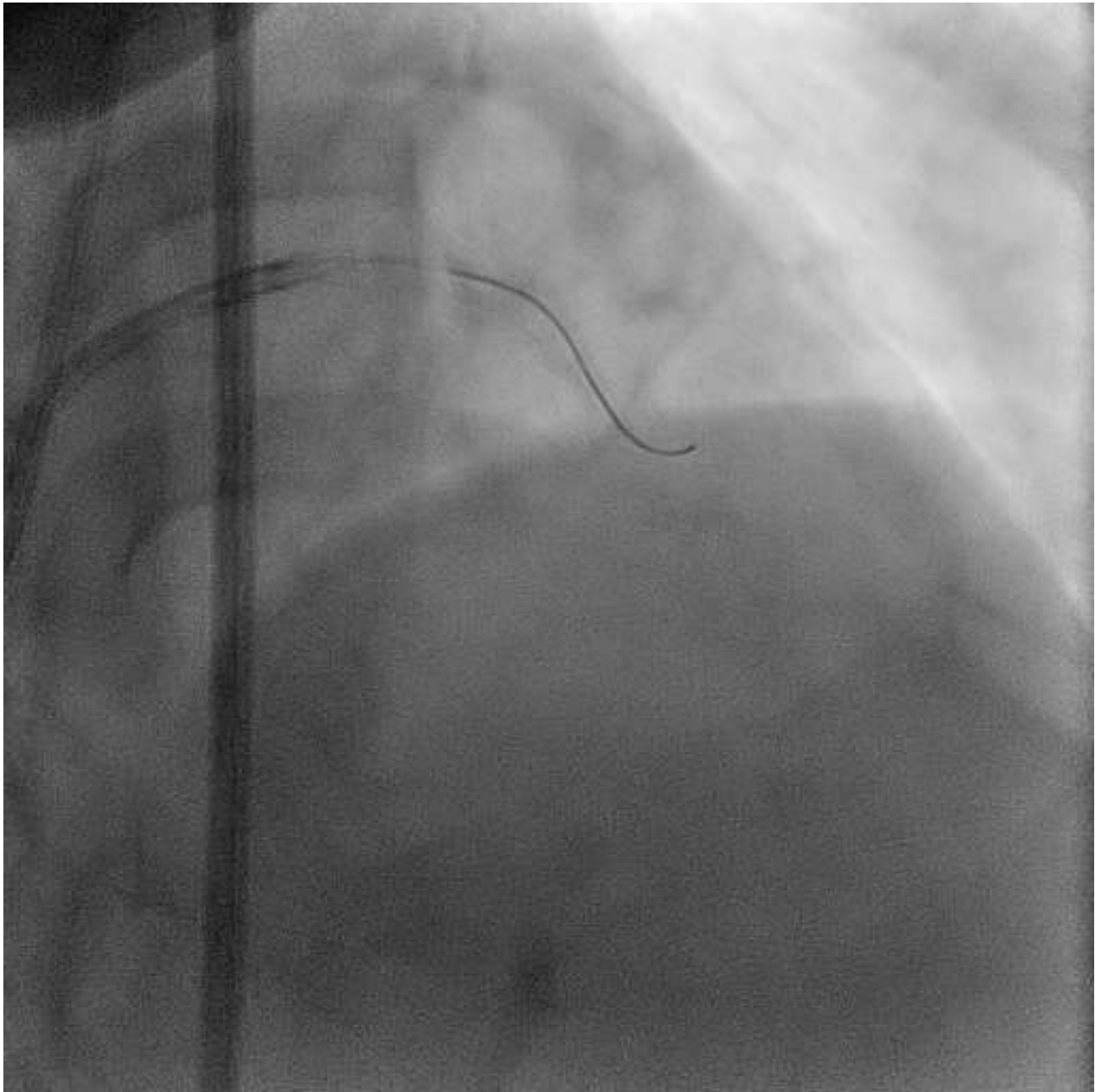
1.25 mm Burr at  
180,000 rpm



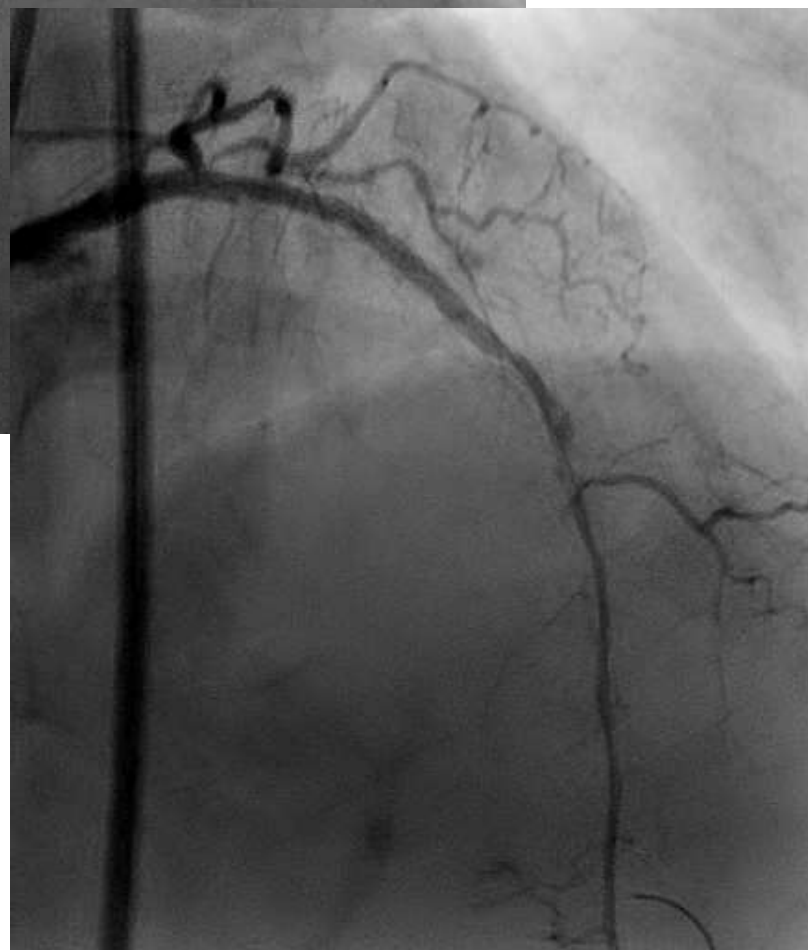
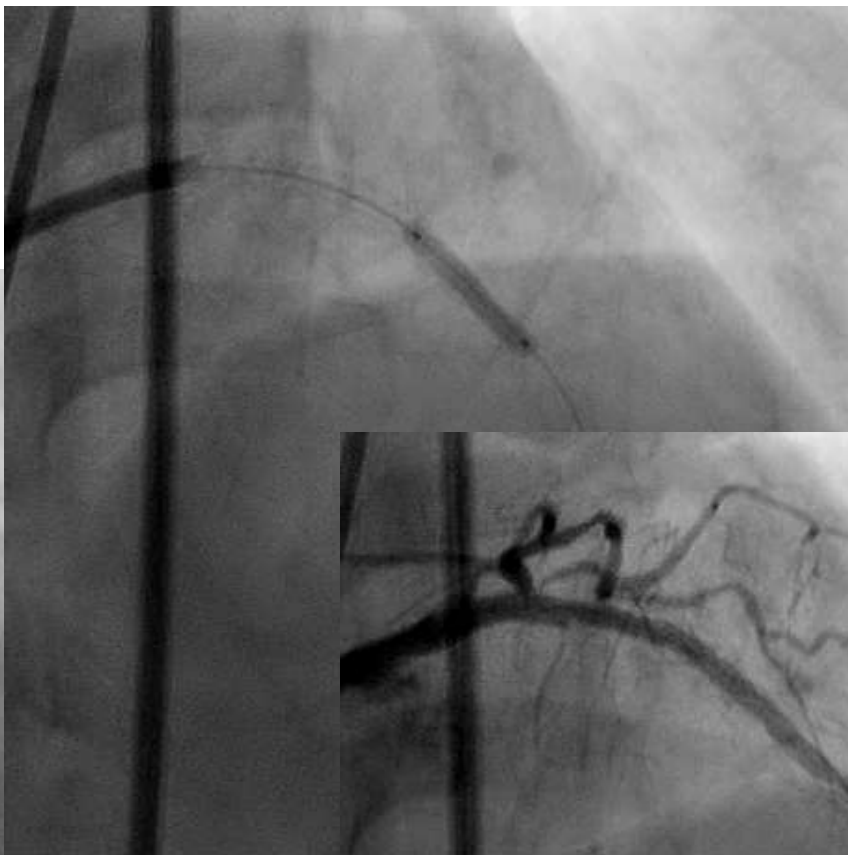
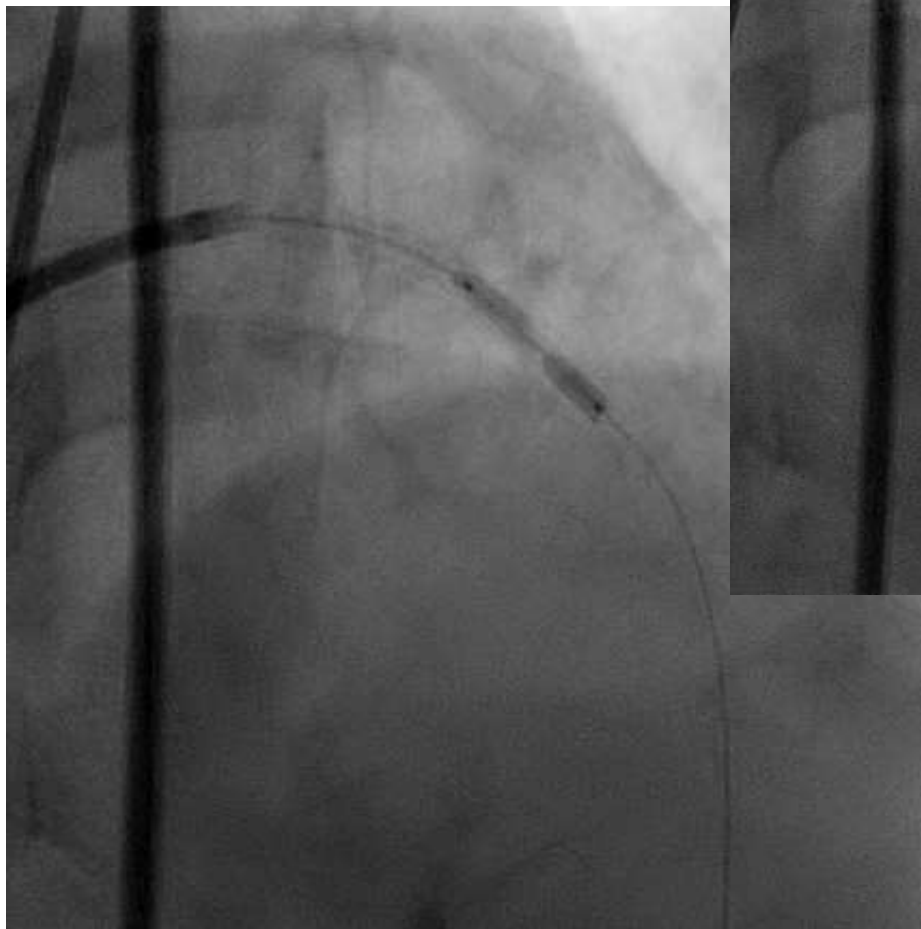
Burr Stalled

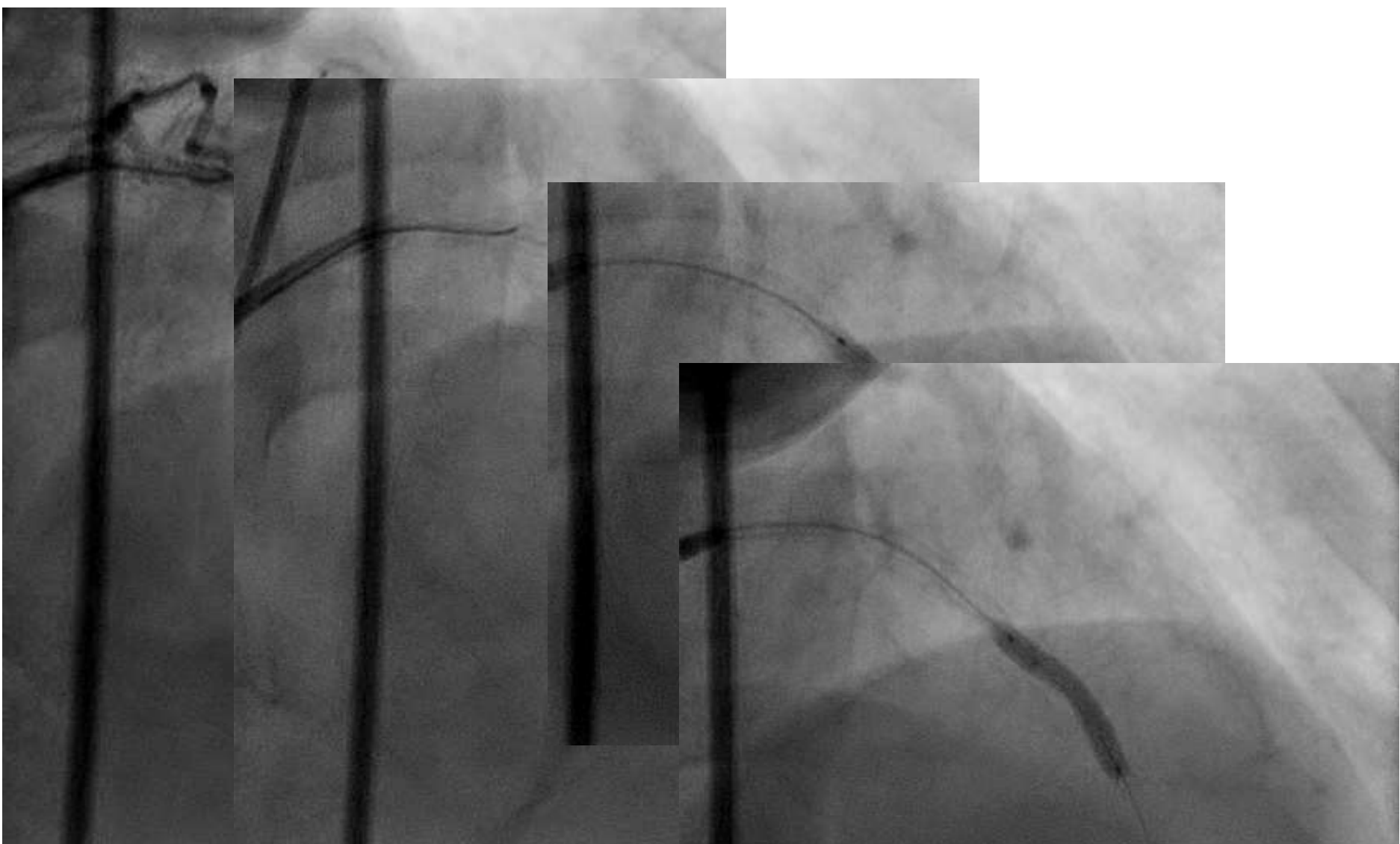






OPN NC 2.5 x 15 mm  
At 20 & 35 Atm

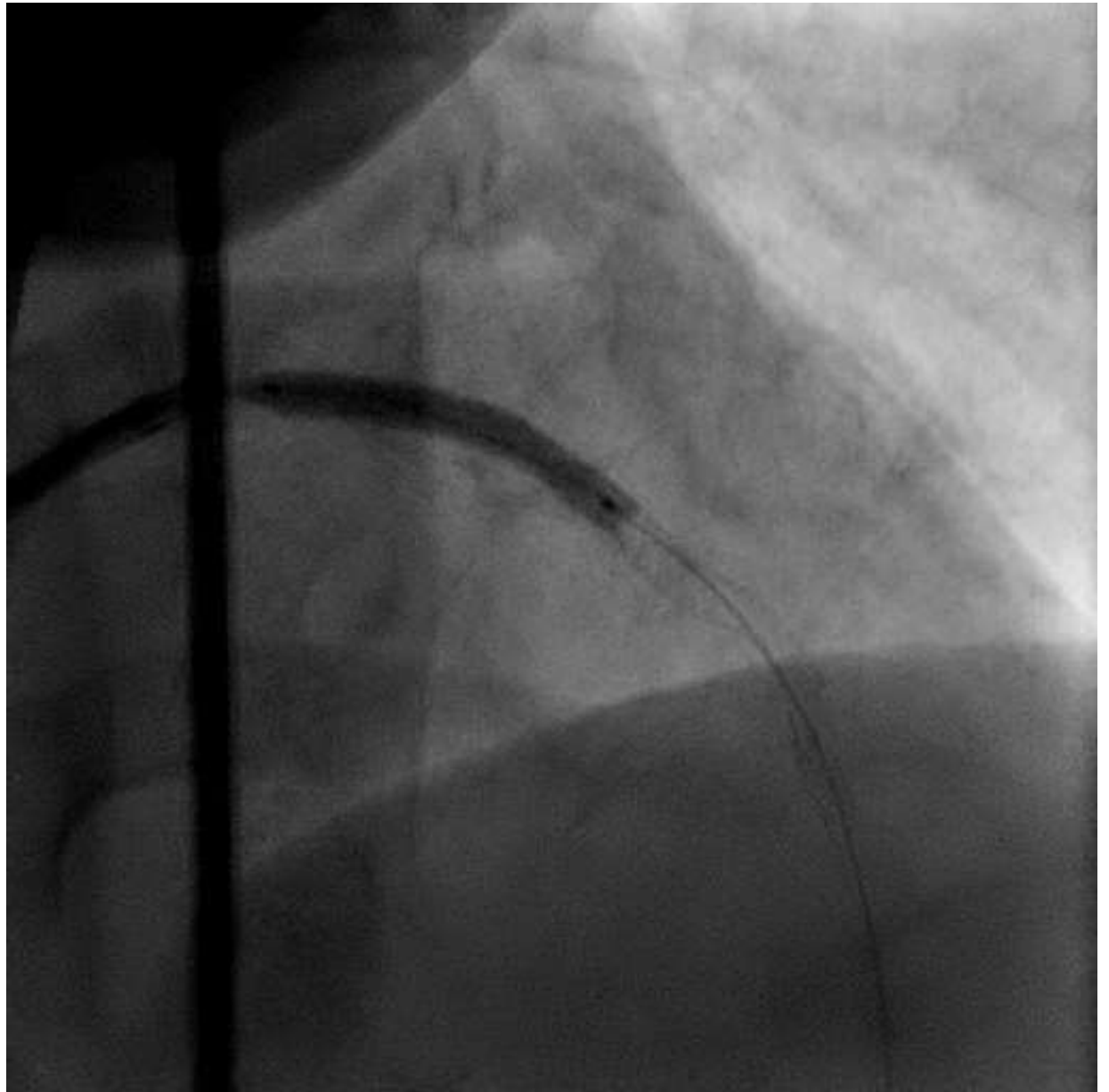


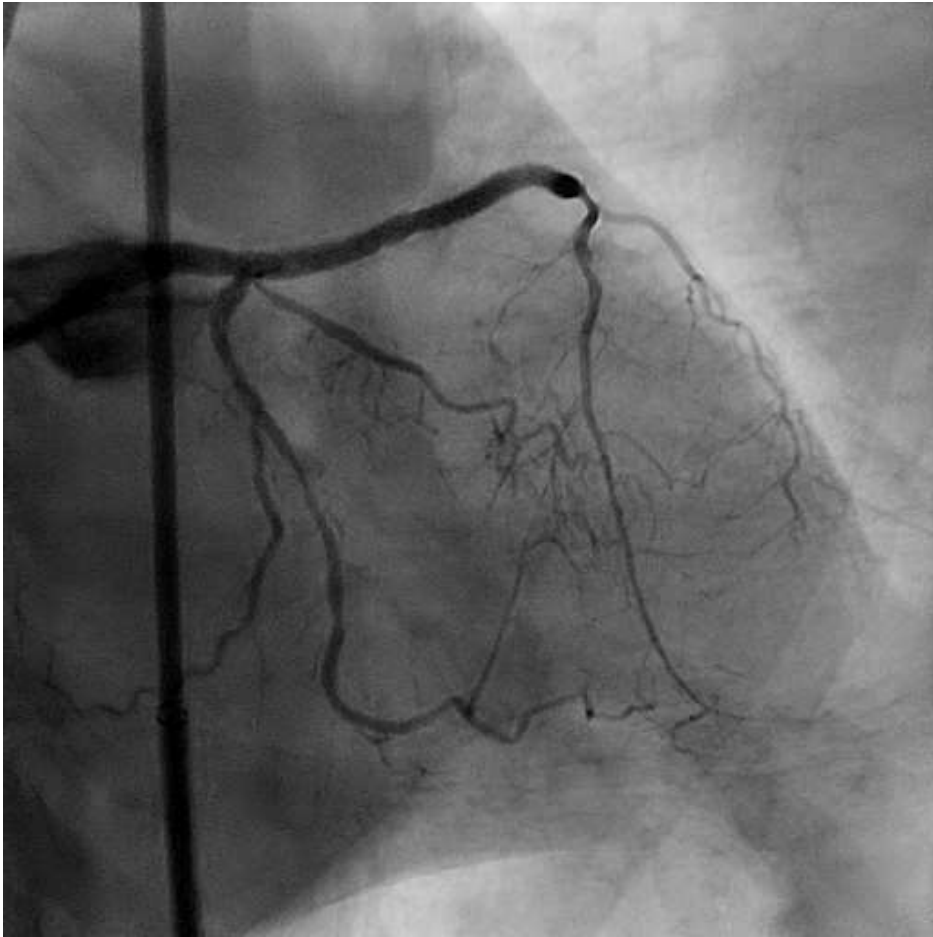


Ultimaster 2.5 x 28 mm

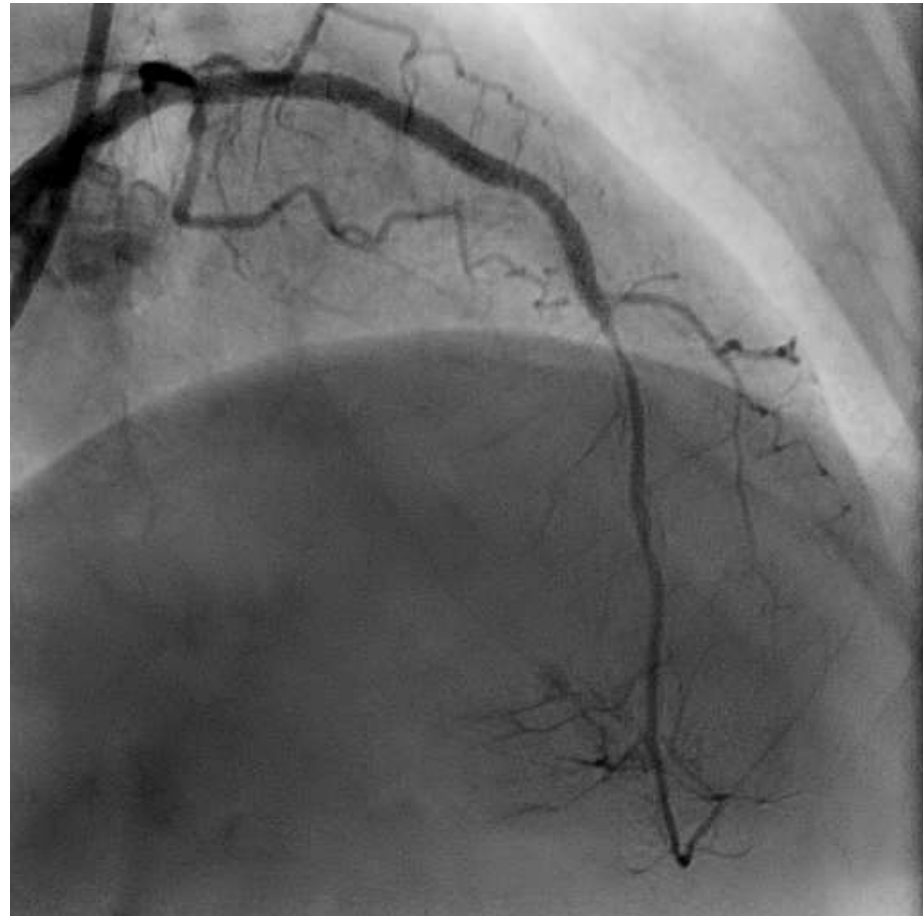
3.25 mm NC balloon 20 Atm

Sequent Please DCB  
3.5 x 25 mm

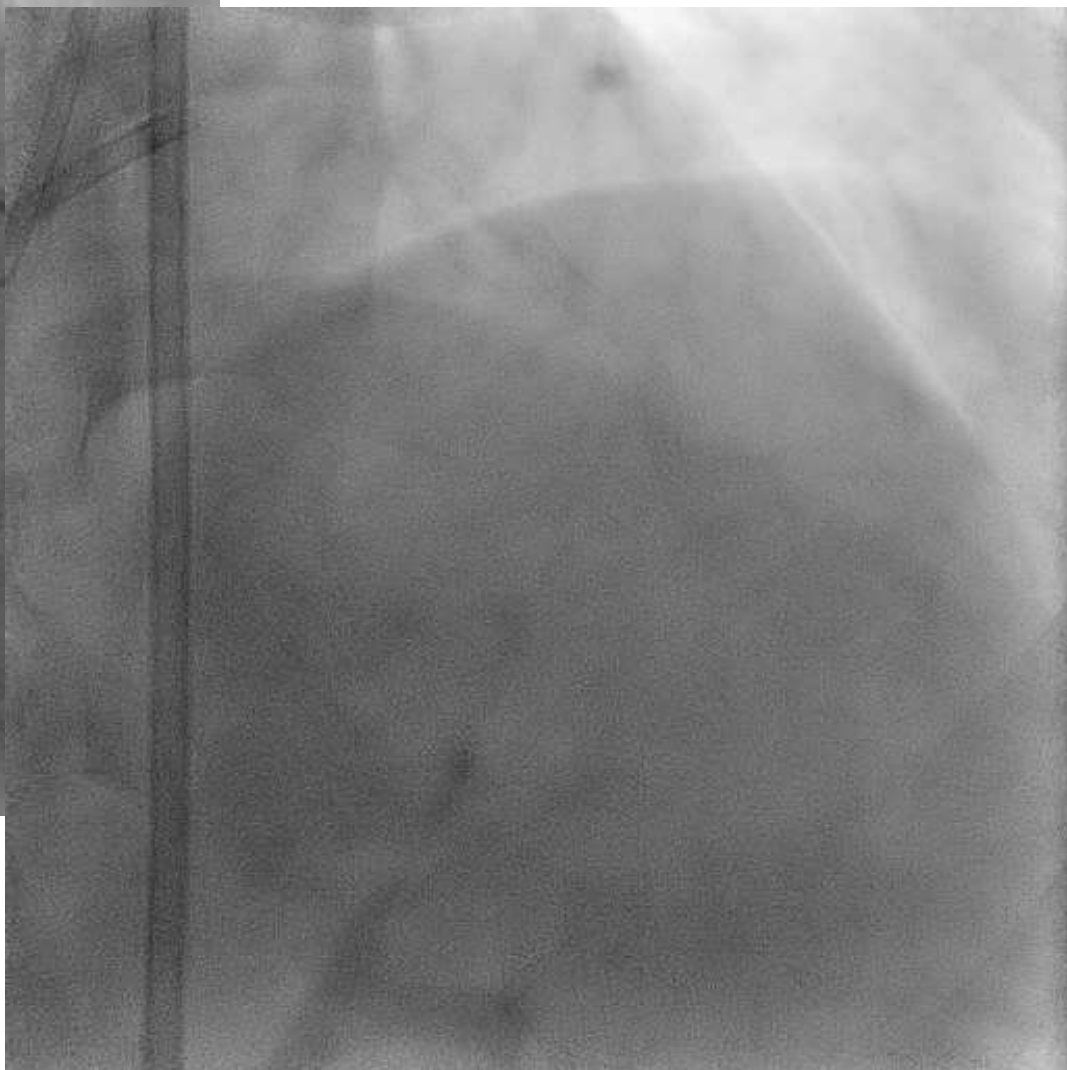




Post PCI



Post PCI



Discharged well one day post PCI

No new ECG changes and minimal CK leak

DAPT for One Year



# Summary & Conclusion

Calcified lesions need to be prepared well before implanting a stent

Never implant a stent if lesion is not satisfactorily dilated

Then think of other devices to prepare vessel better, DCB or accept results

Treatment of stent underexpansion

NC Balloon at very high pressures

OPN NC if regular NC balloon does not work

Scoring balloon

Rotational Atherectomy

Rota – small burr, don't "push" too hard

Stalled Burr may be difficult to extract

Guide cath. close to burr (care not to accordion stent)