

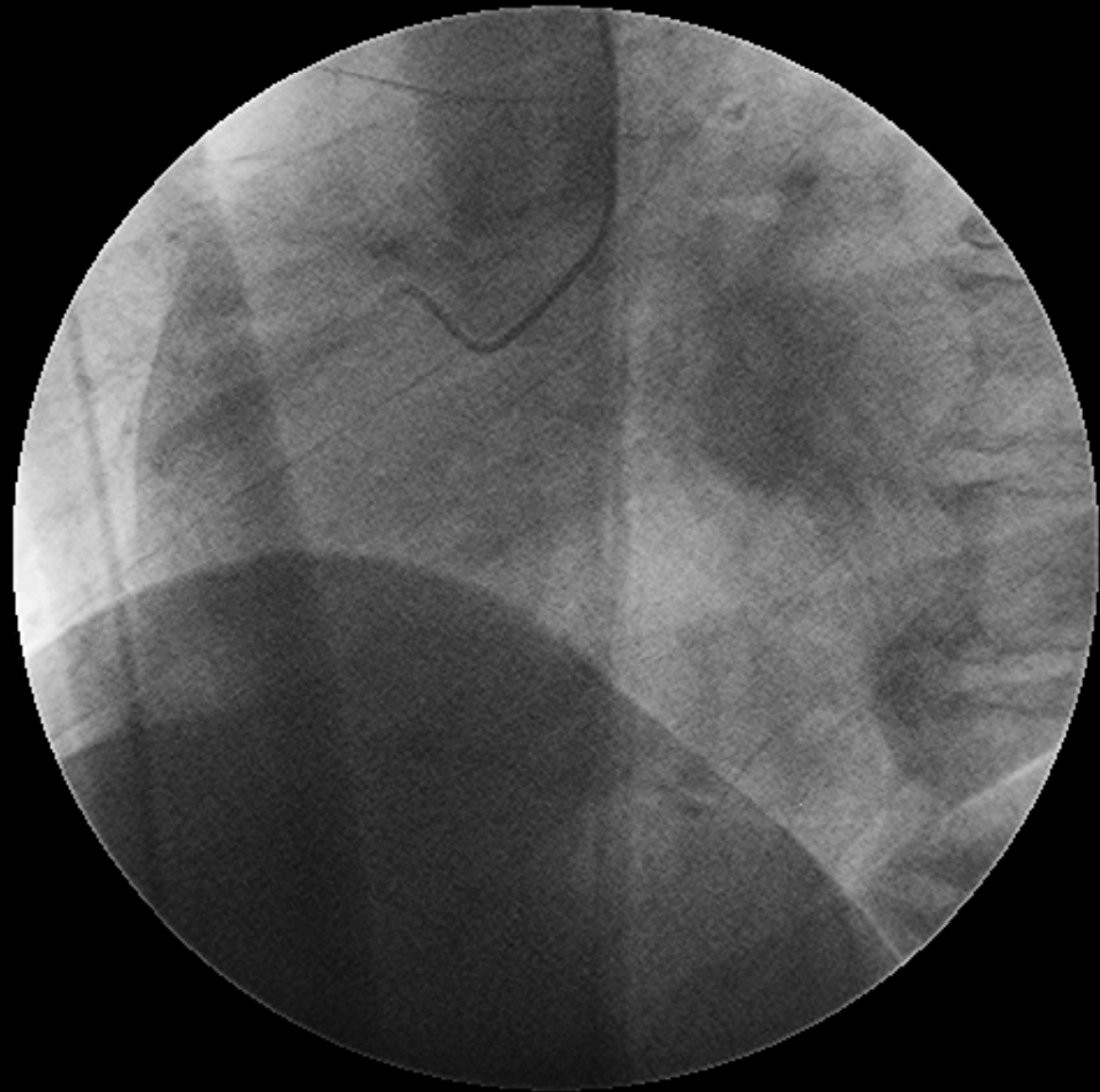
How to Treat a Patient with 3 CTOs ?

Toyohashi Heart Center
Yasushi Asakura M.D.



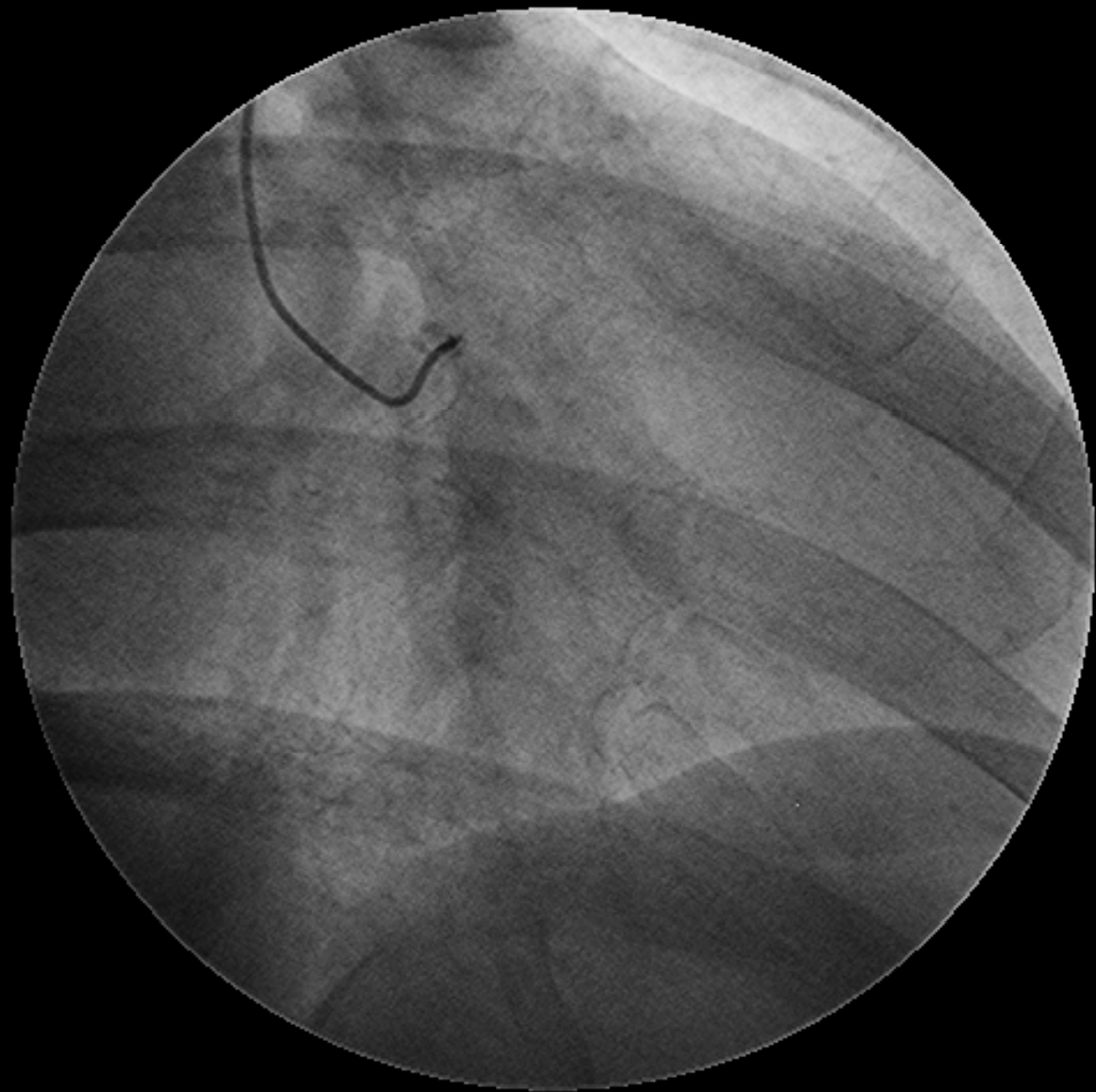


Case
RCA



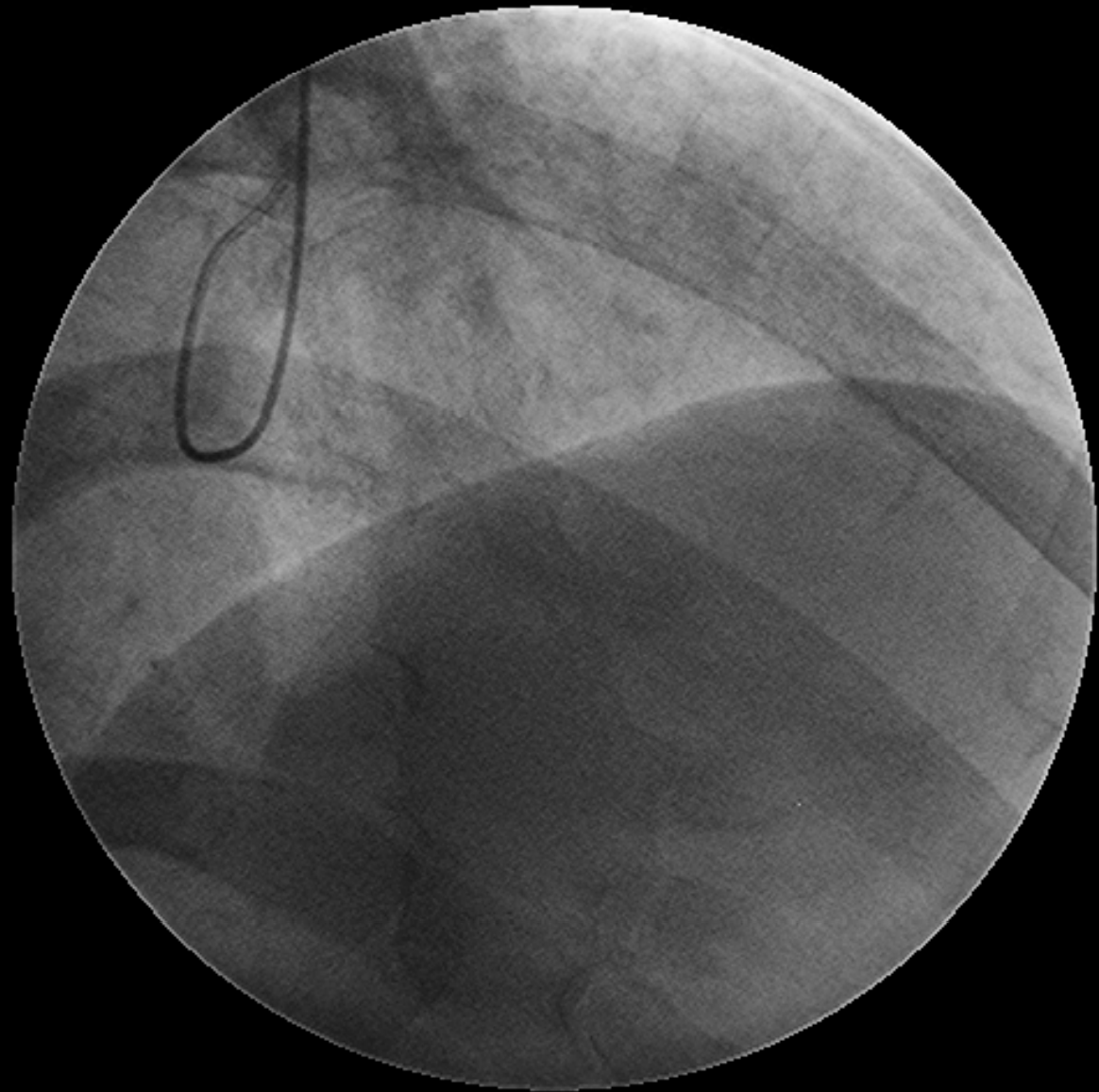


RCA
RAO



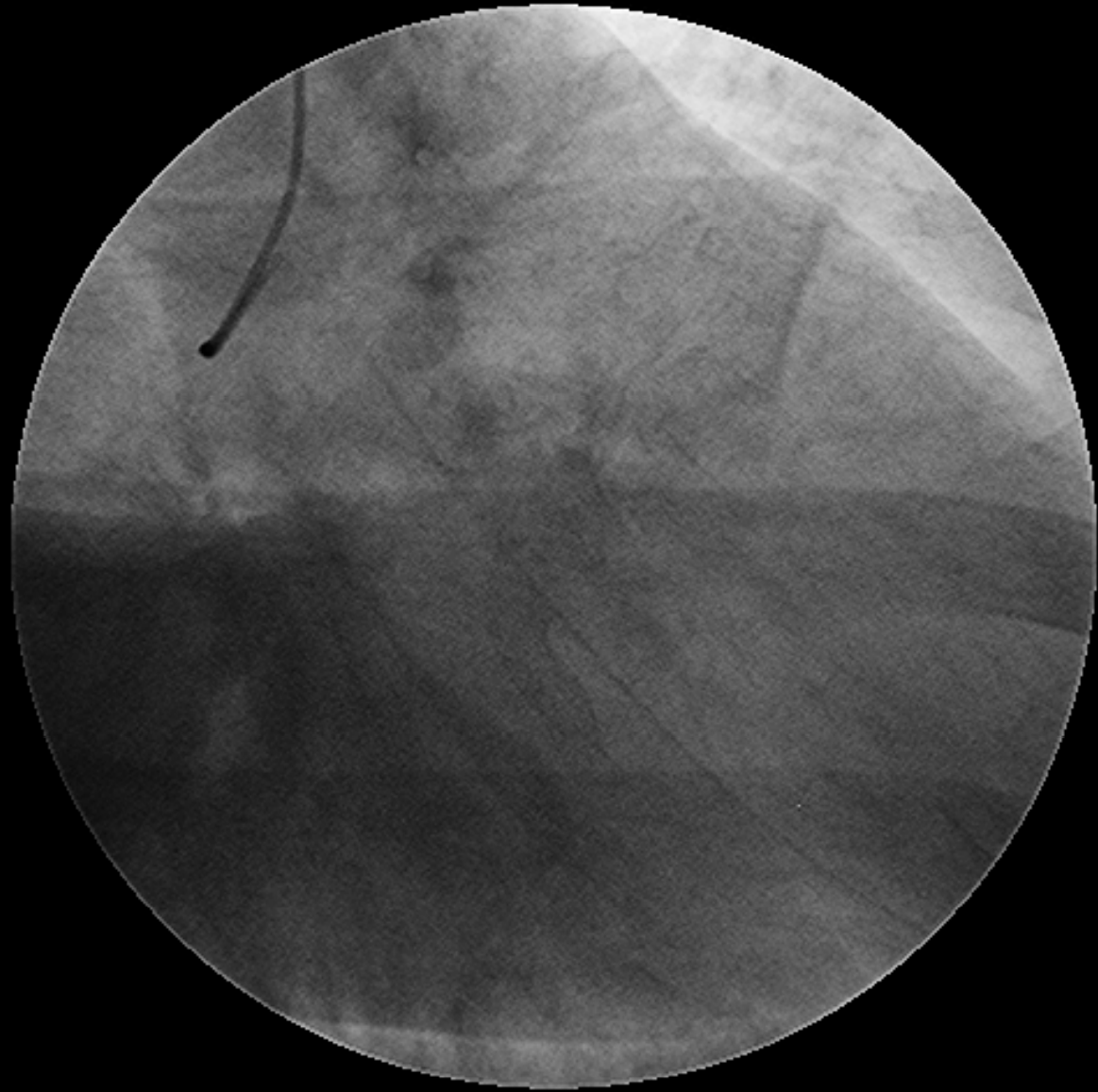


LCA
RAO
Cranial





LCA
RAO





How to Treat ?

CABG!???

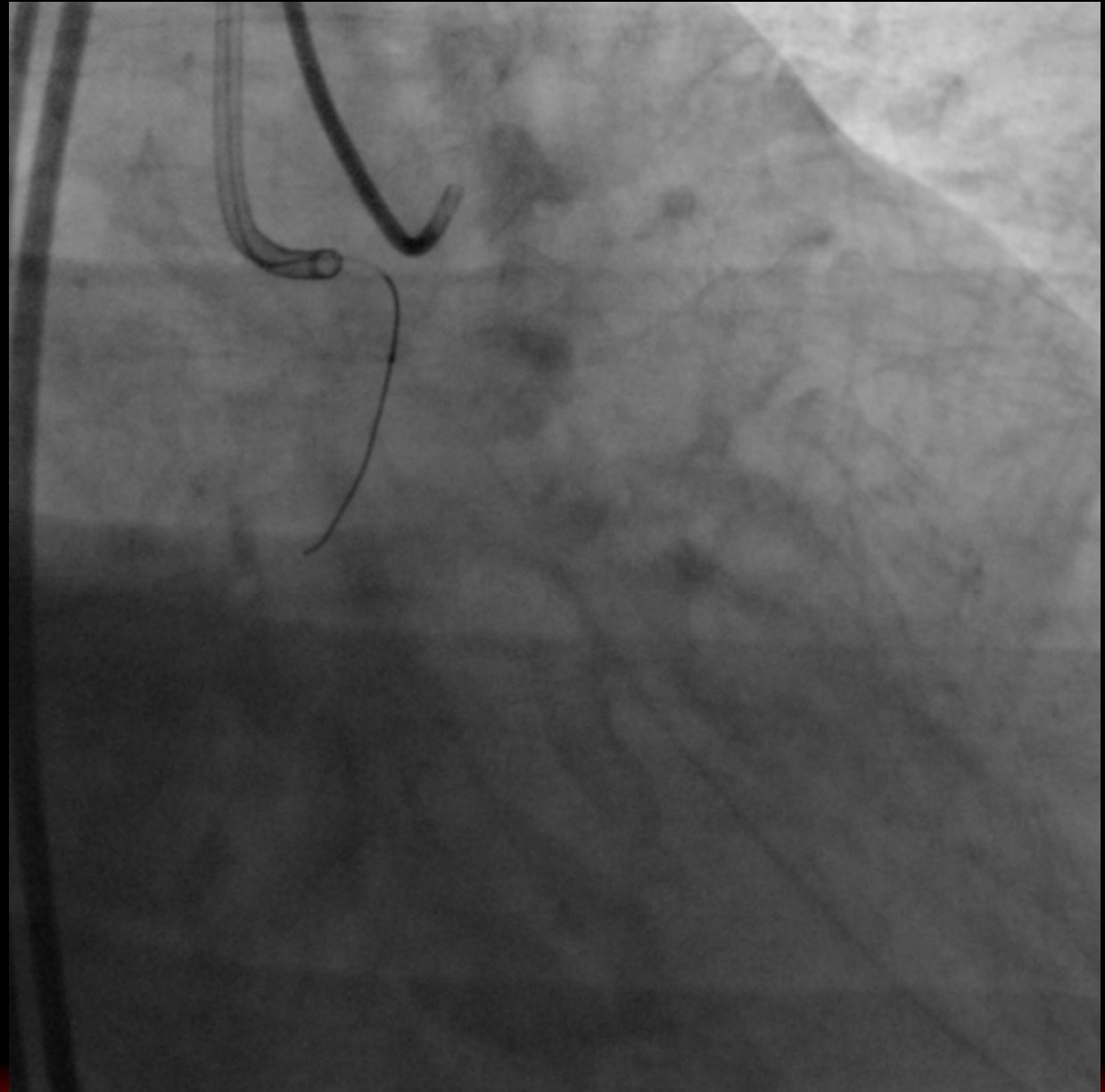
Give up?





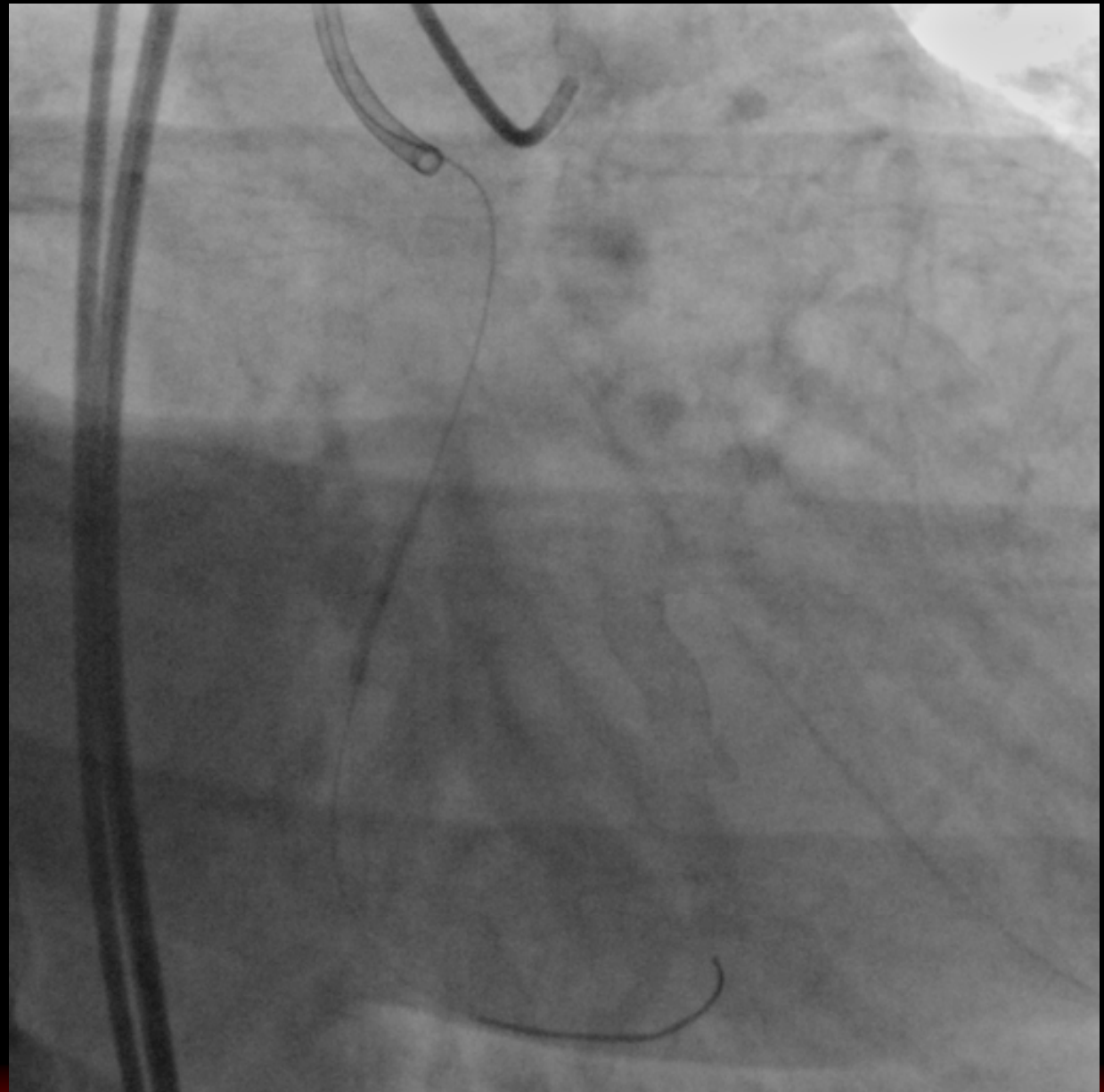
**PCI
to
LCX**

Miracle 3g



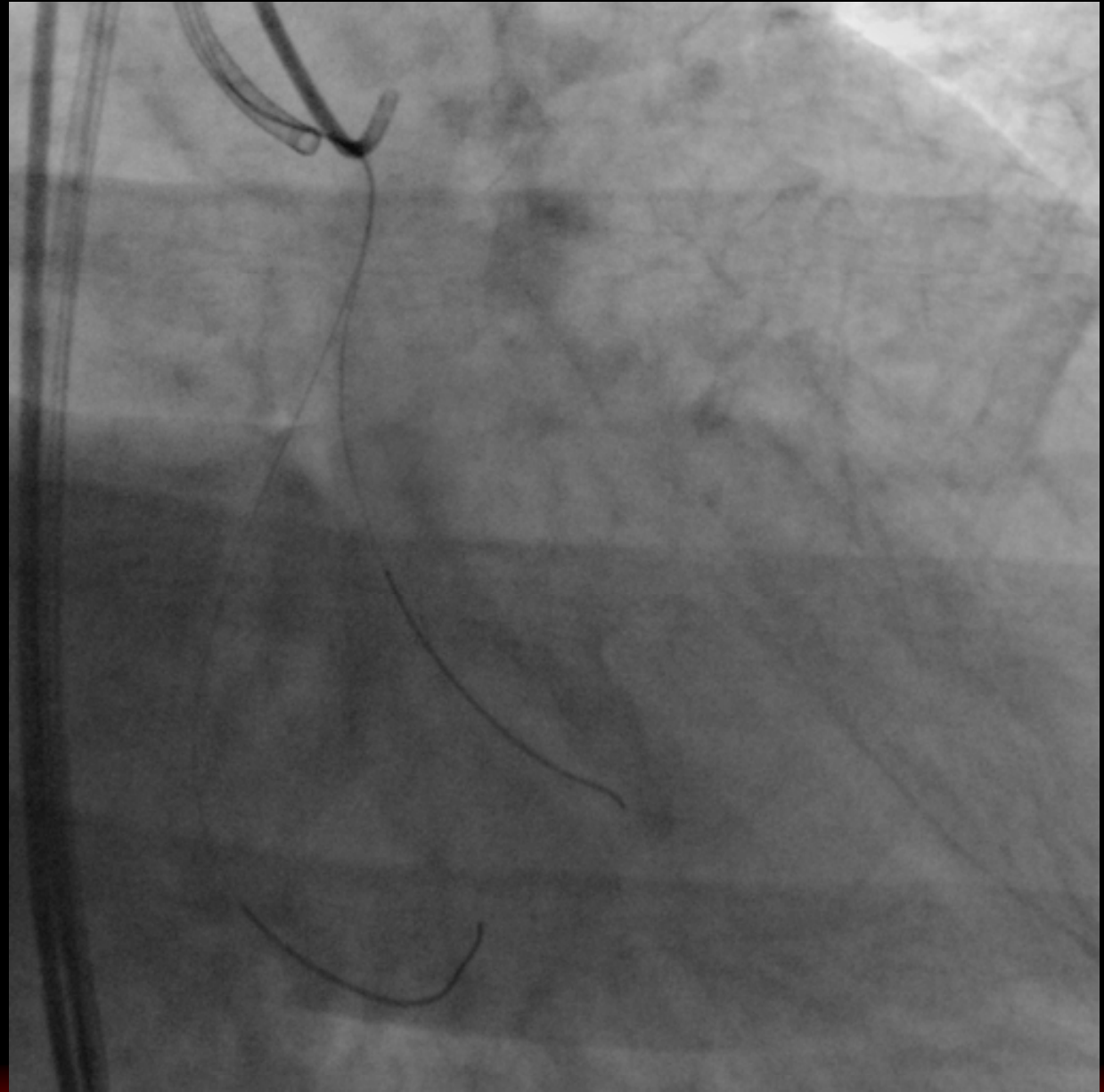


1.5 mm Balloon



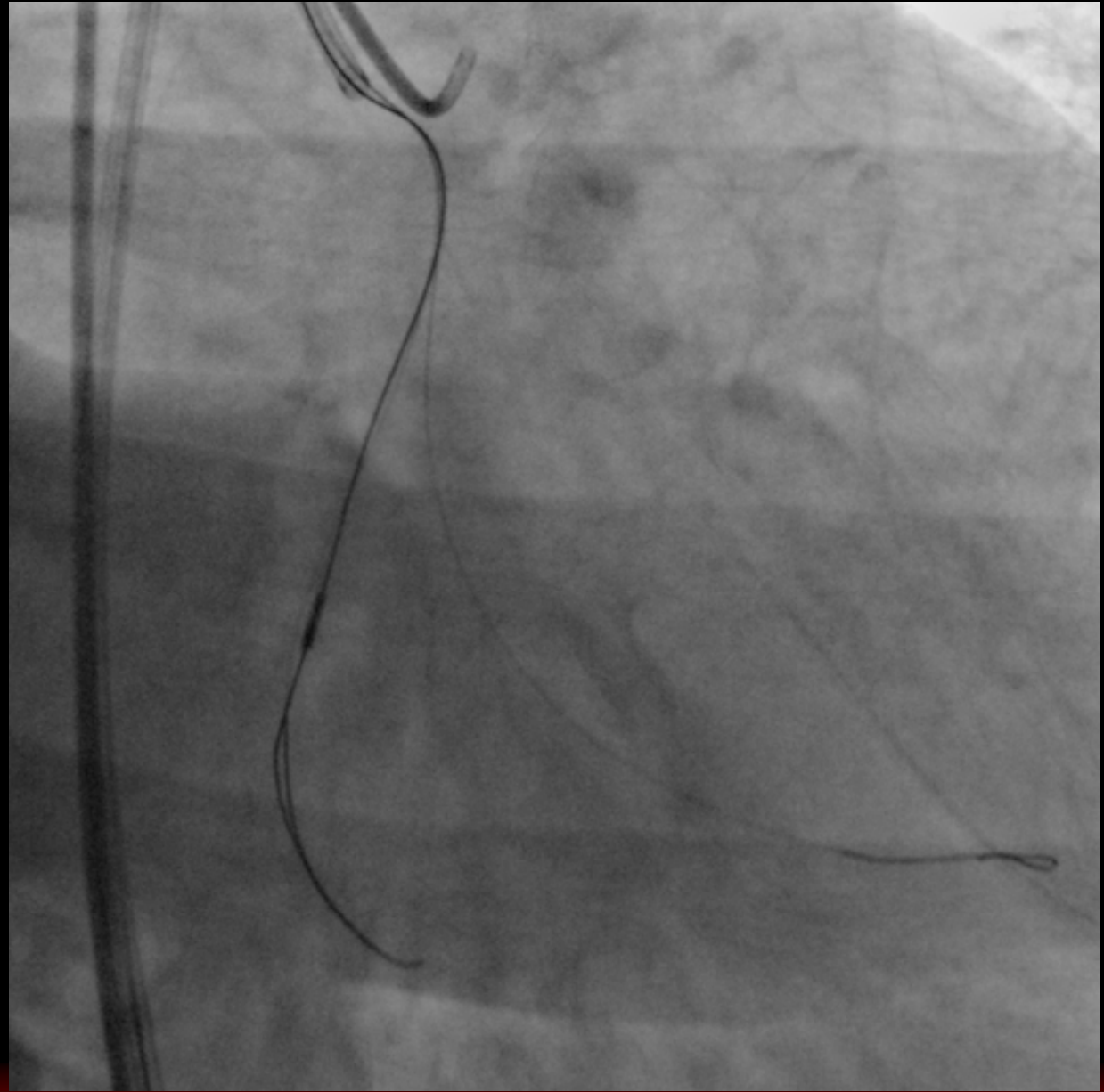


Failed Wiring



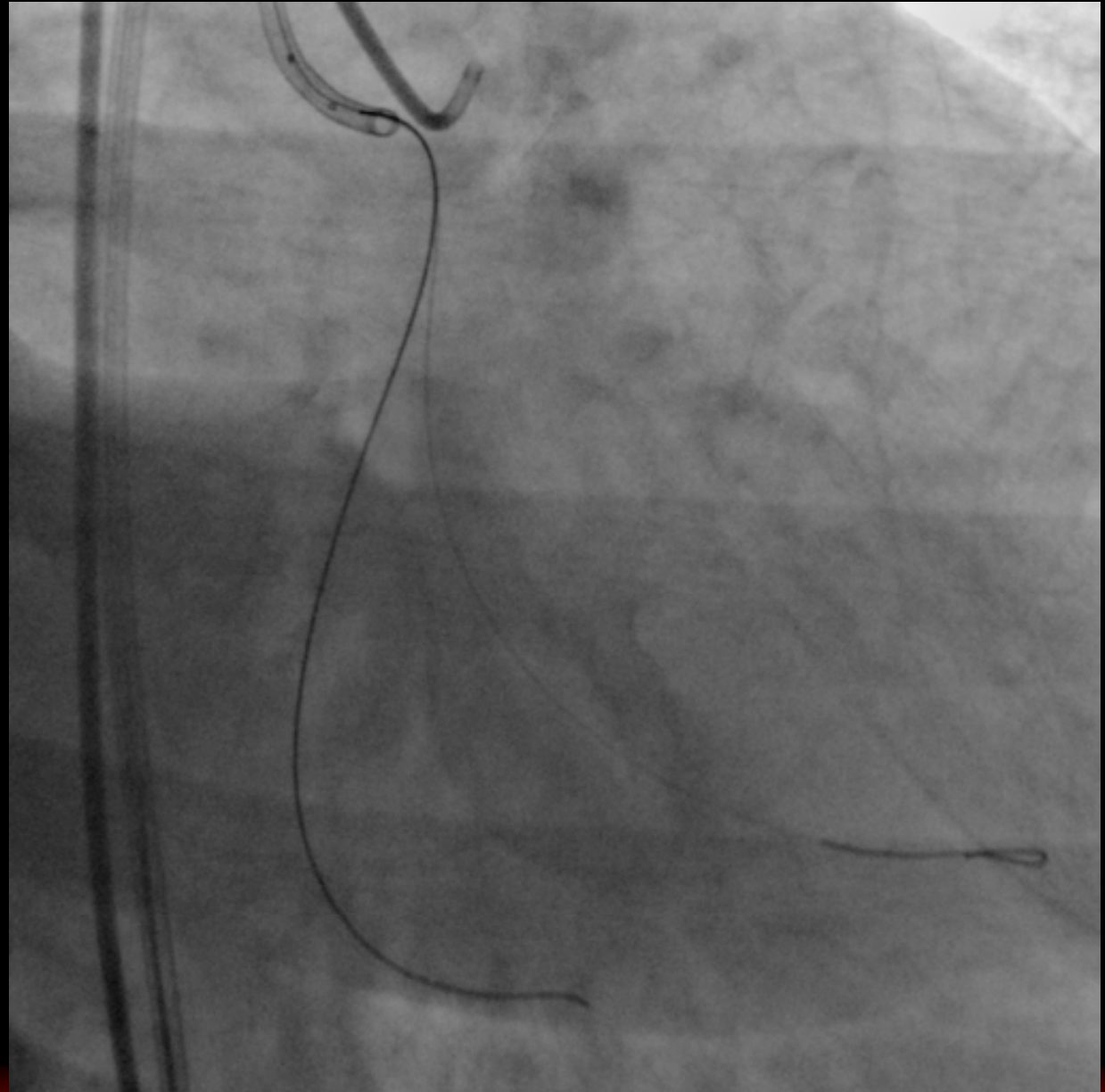


IVUS Guided Wiring



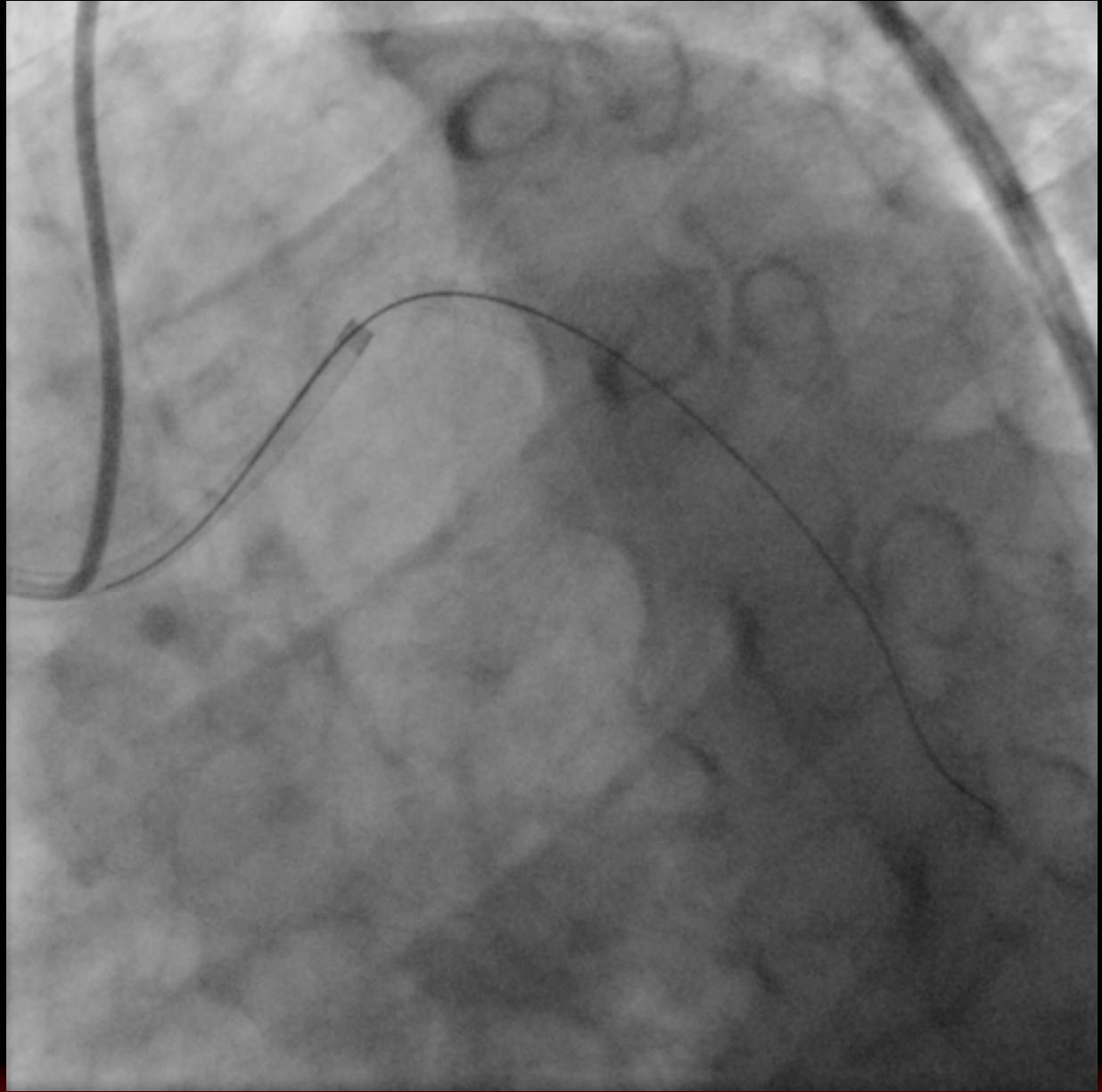


Successful Wiring



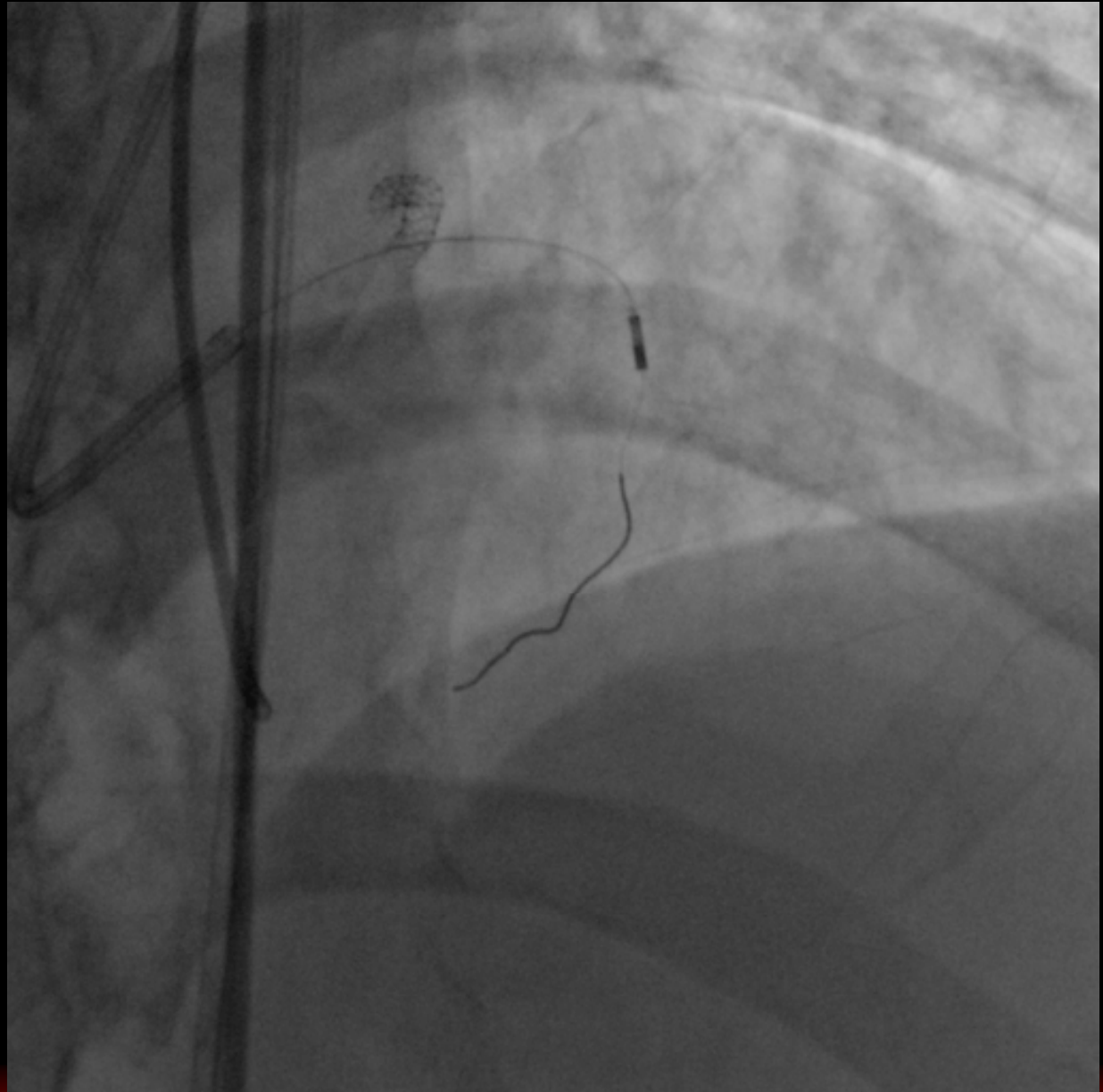


After Stenting



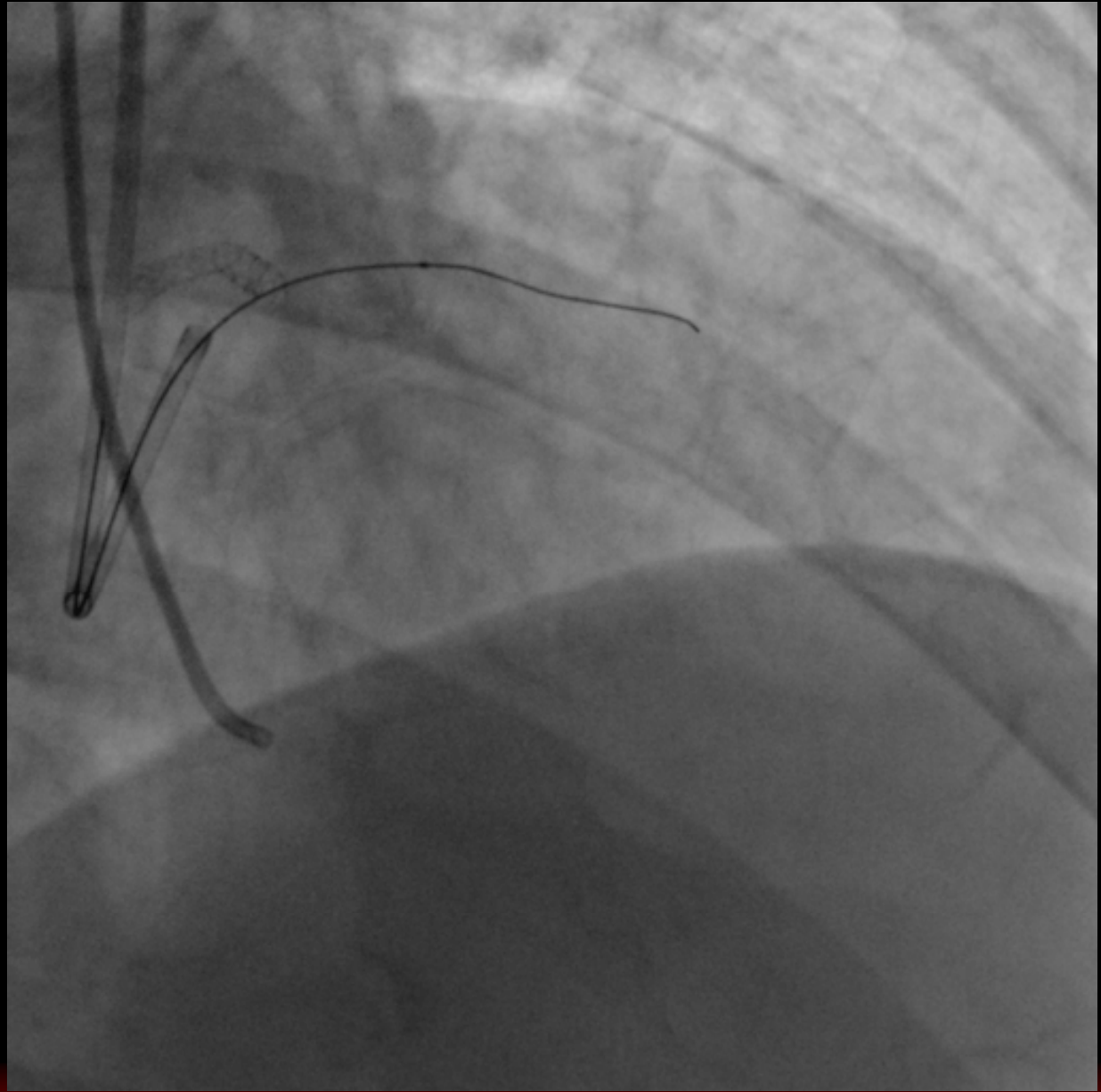


PCI to LAD



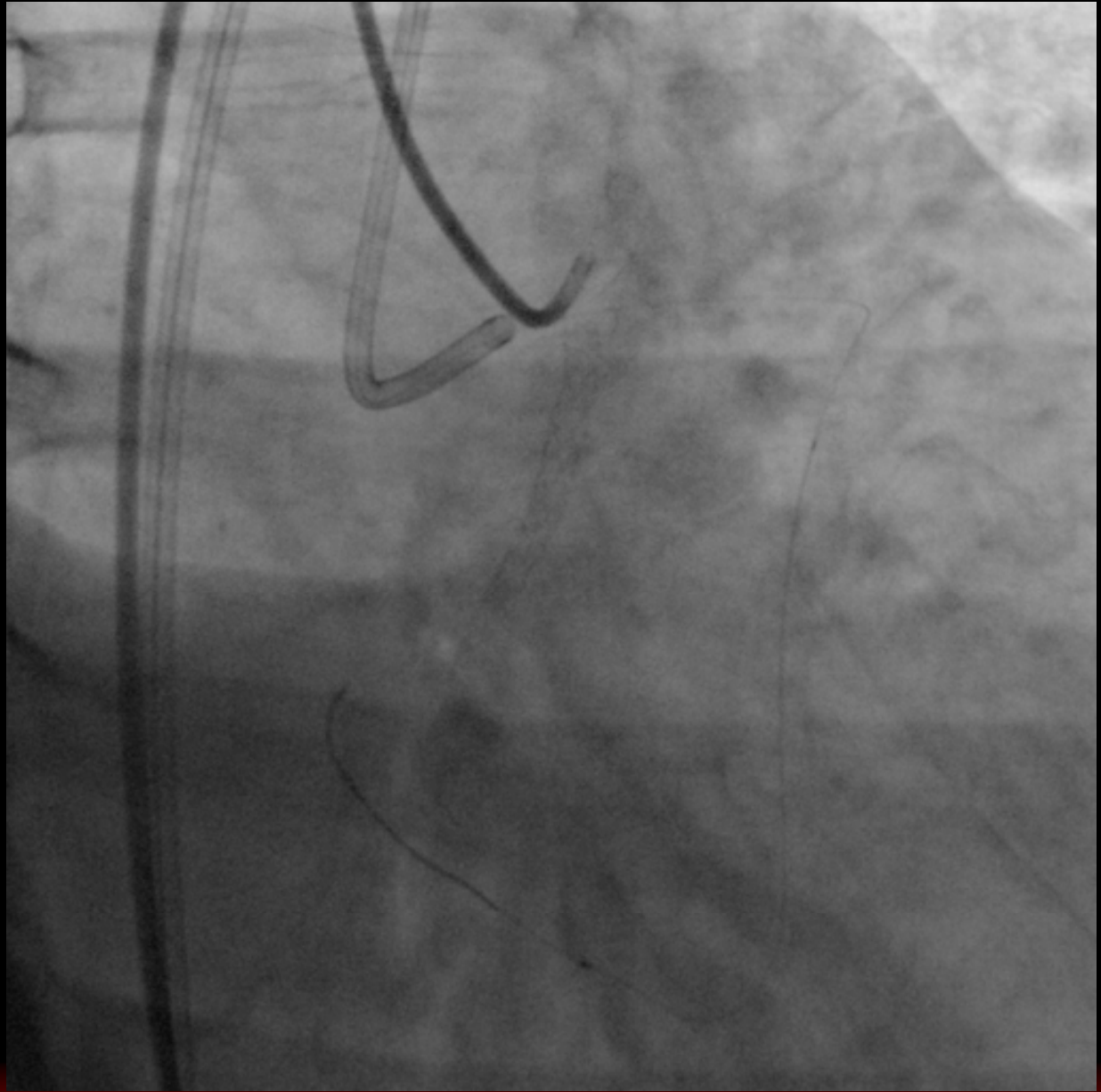


Failed Wiring





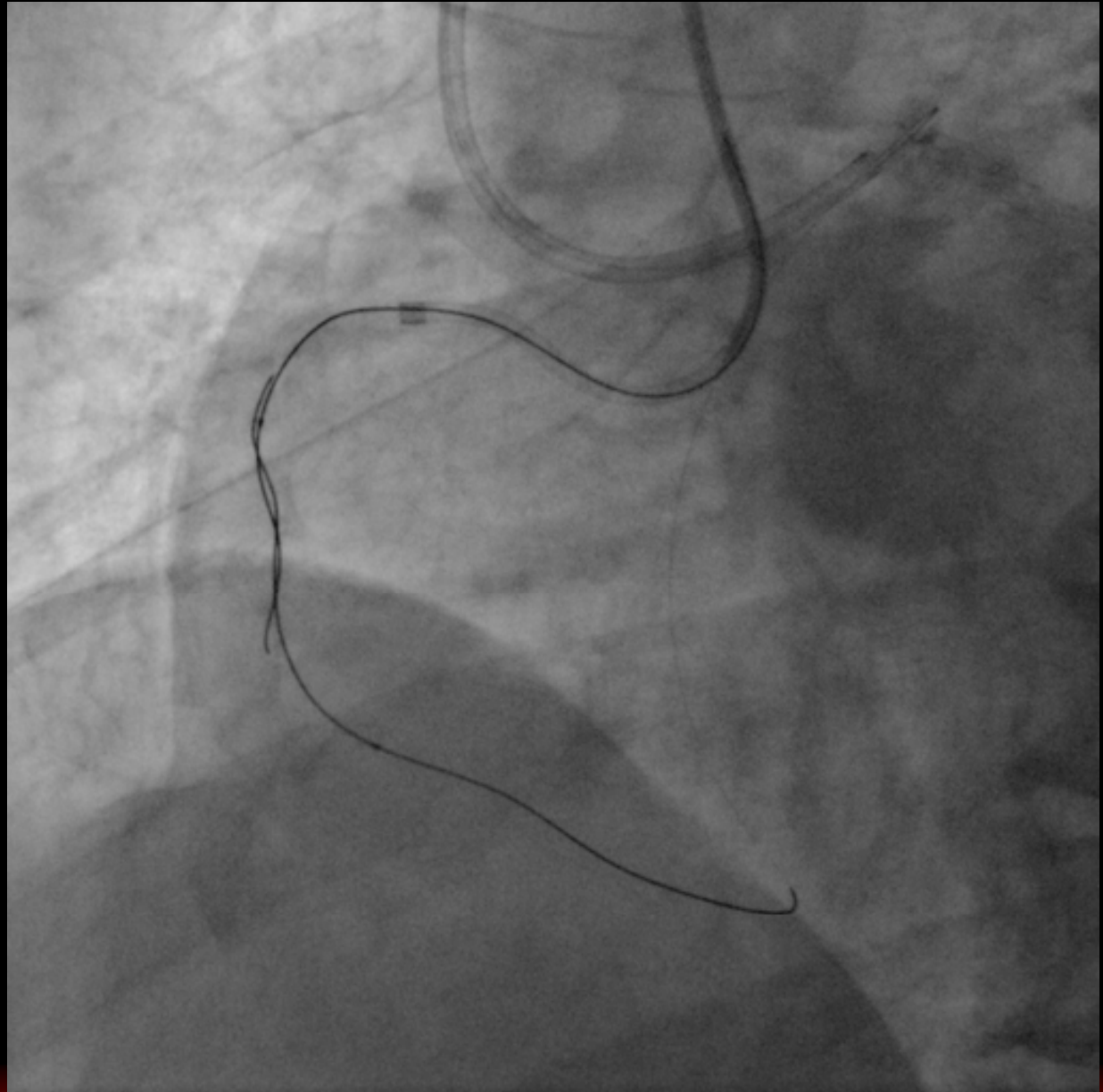
PCI to RCA





PCI to RCA

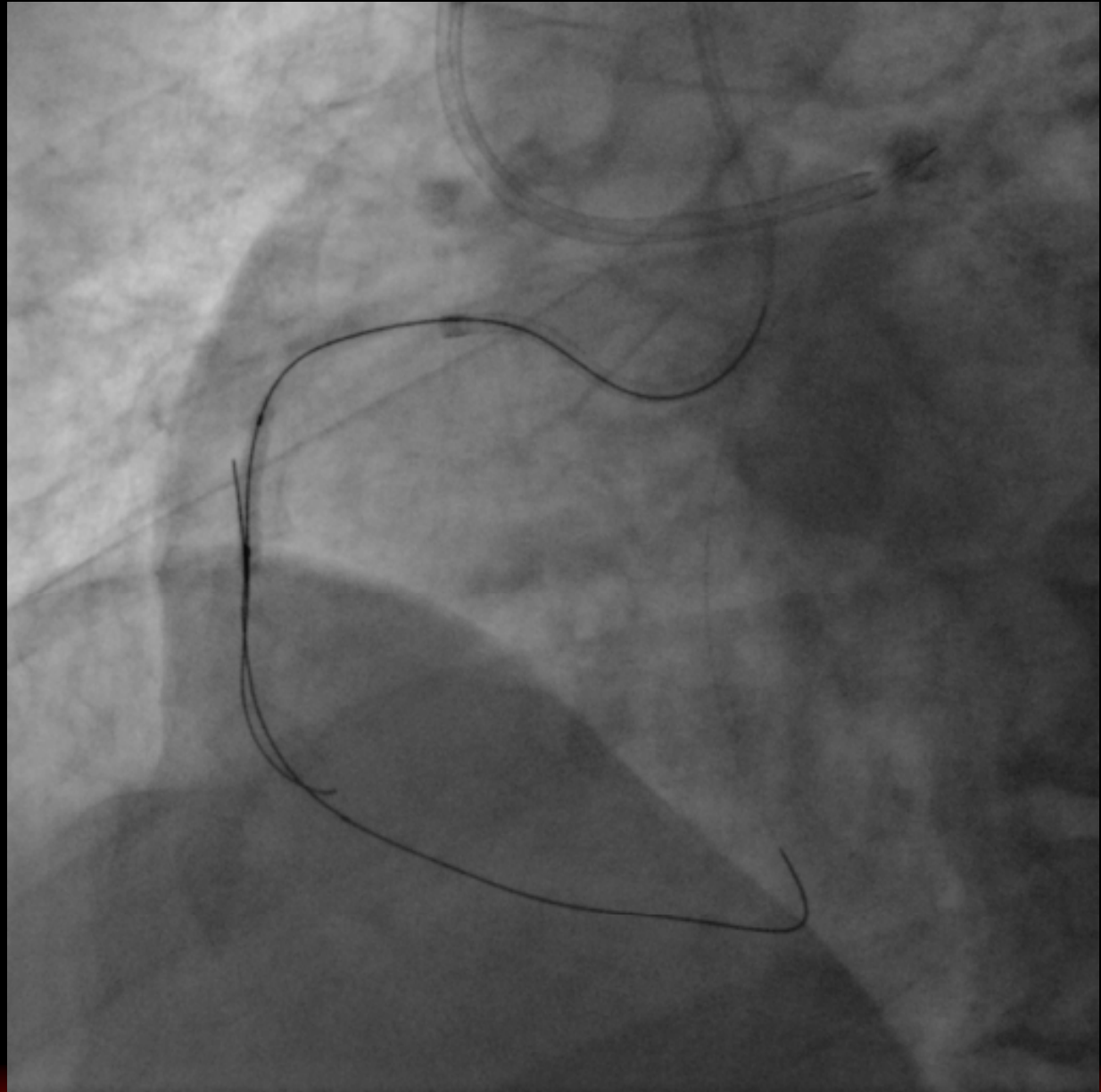
Kissing Wire Technique





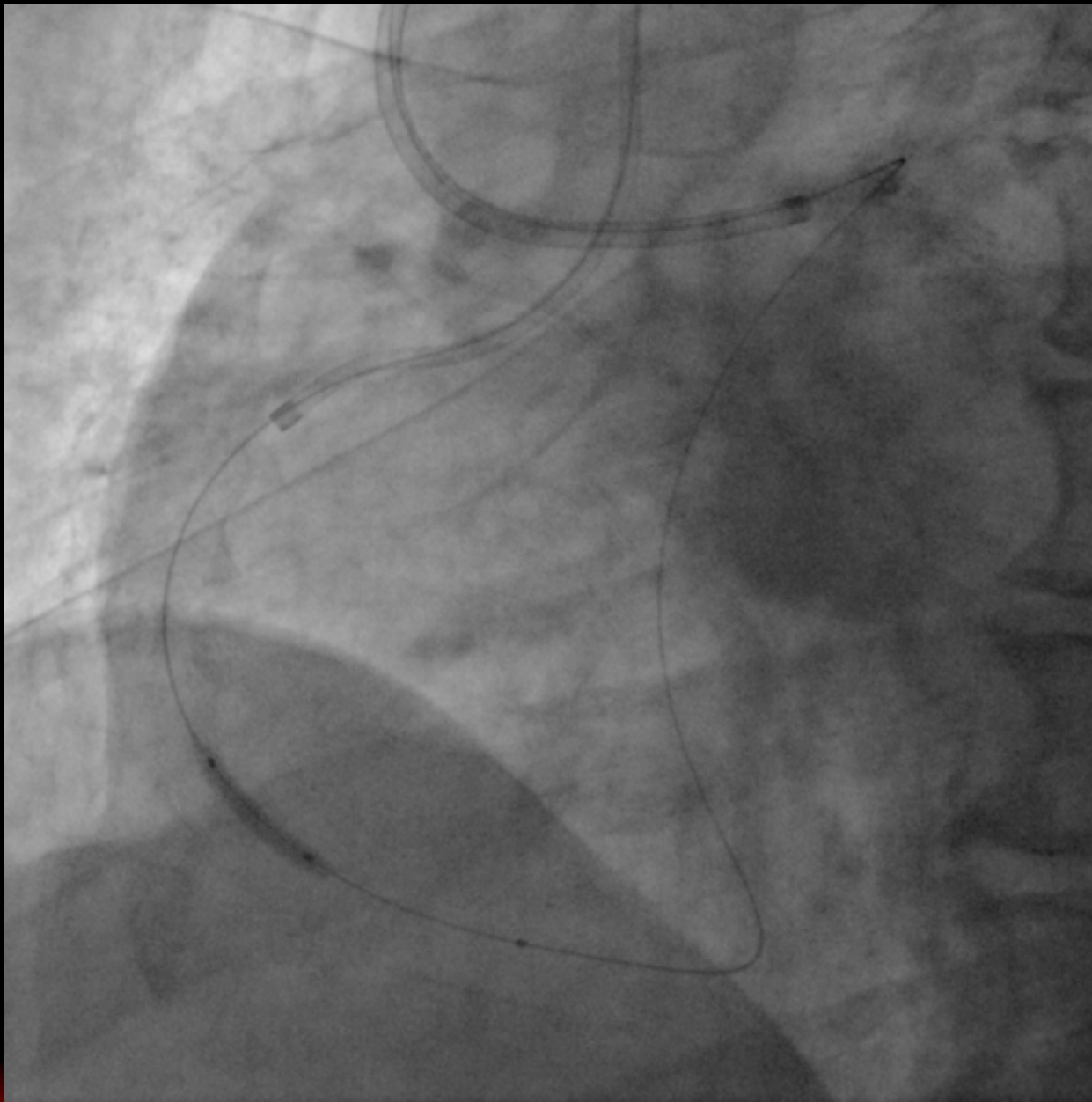
PCI to RCA

Reverse CART Technique



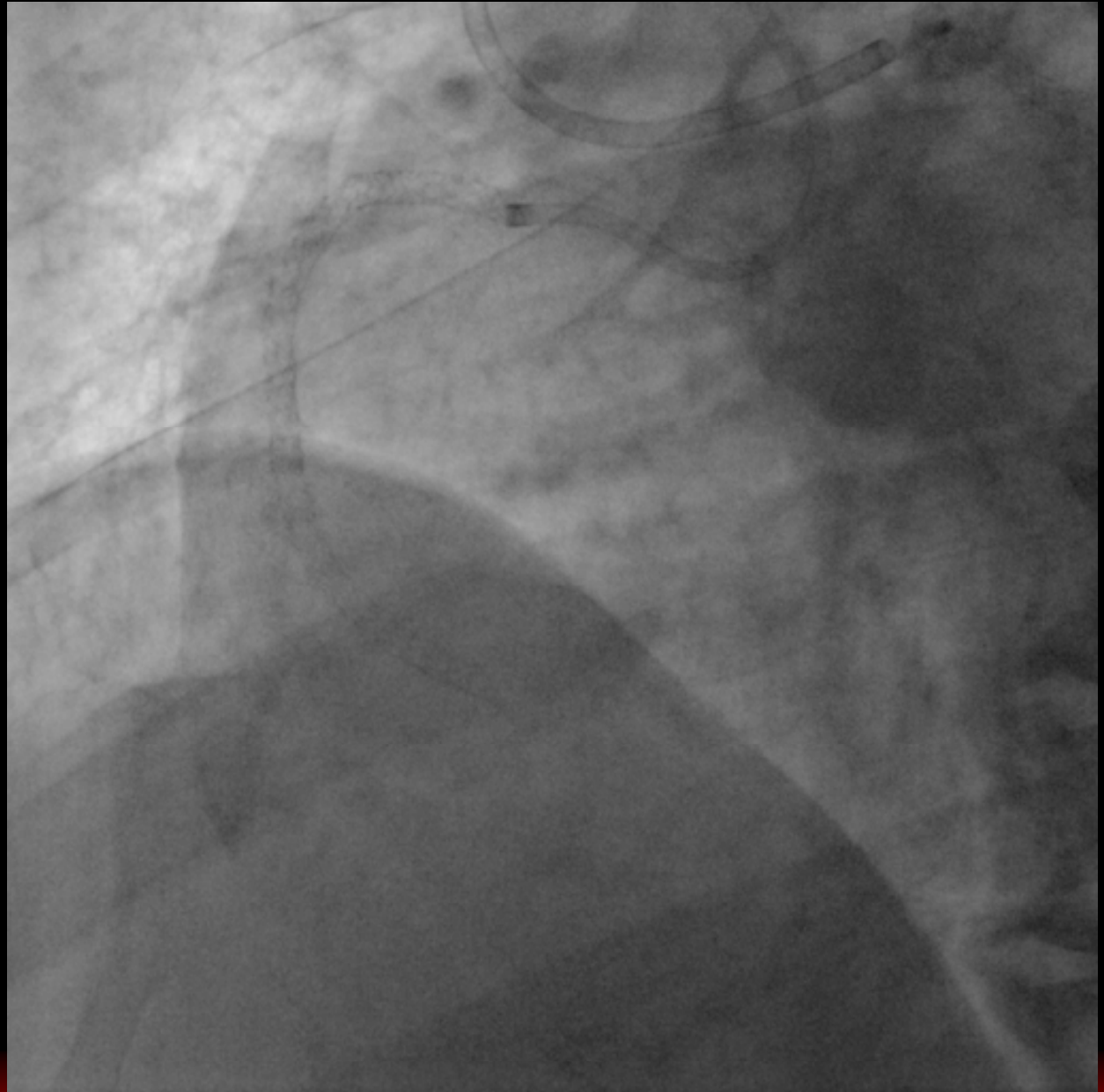


Balloon



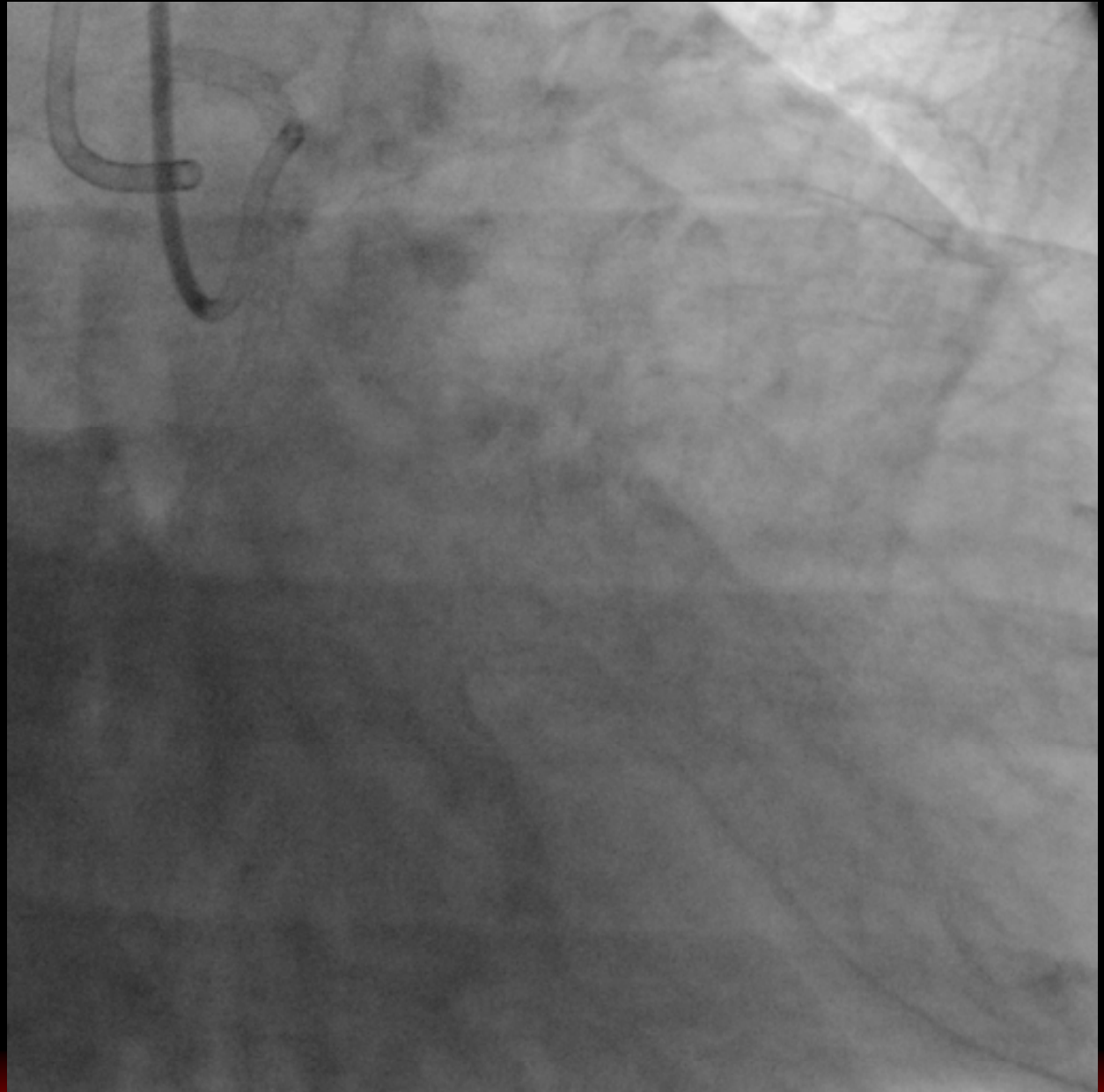


Final



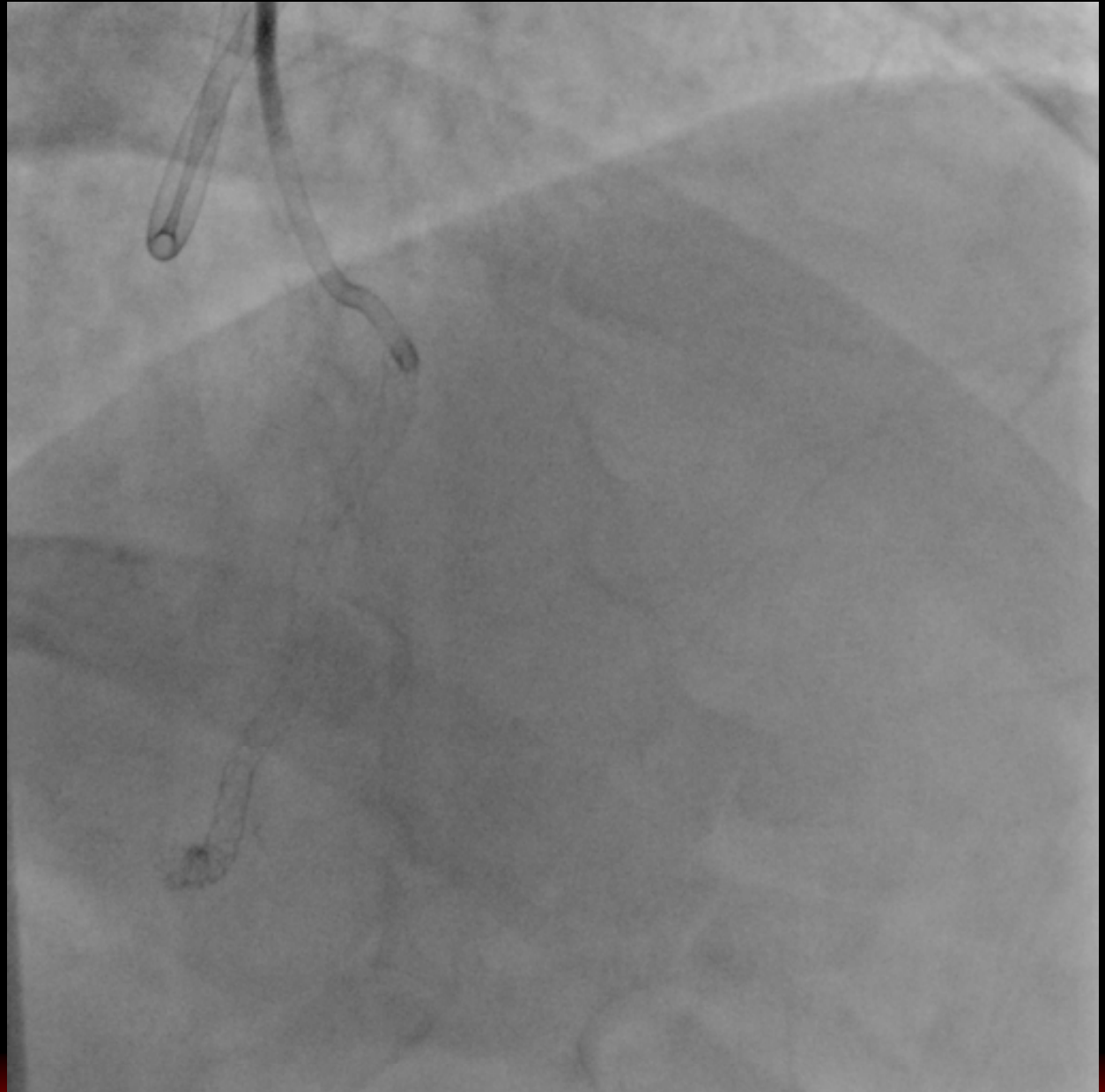


Final



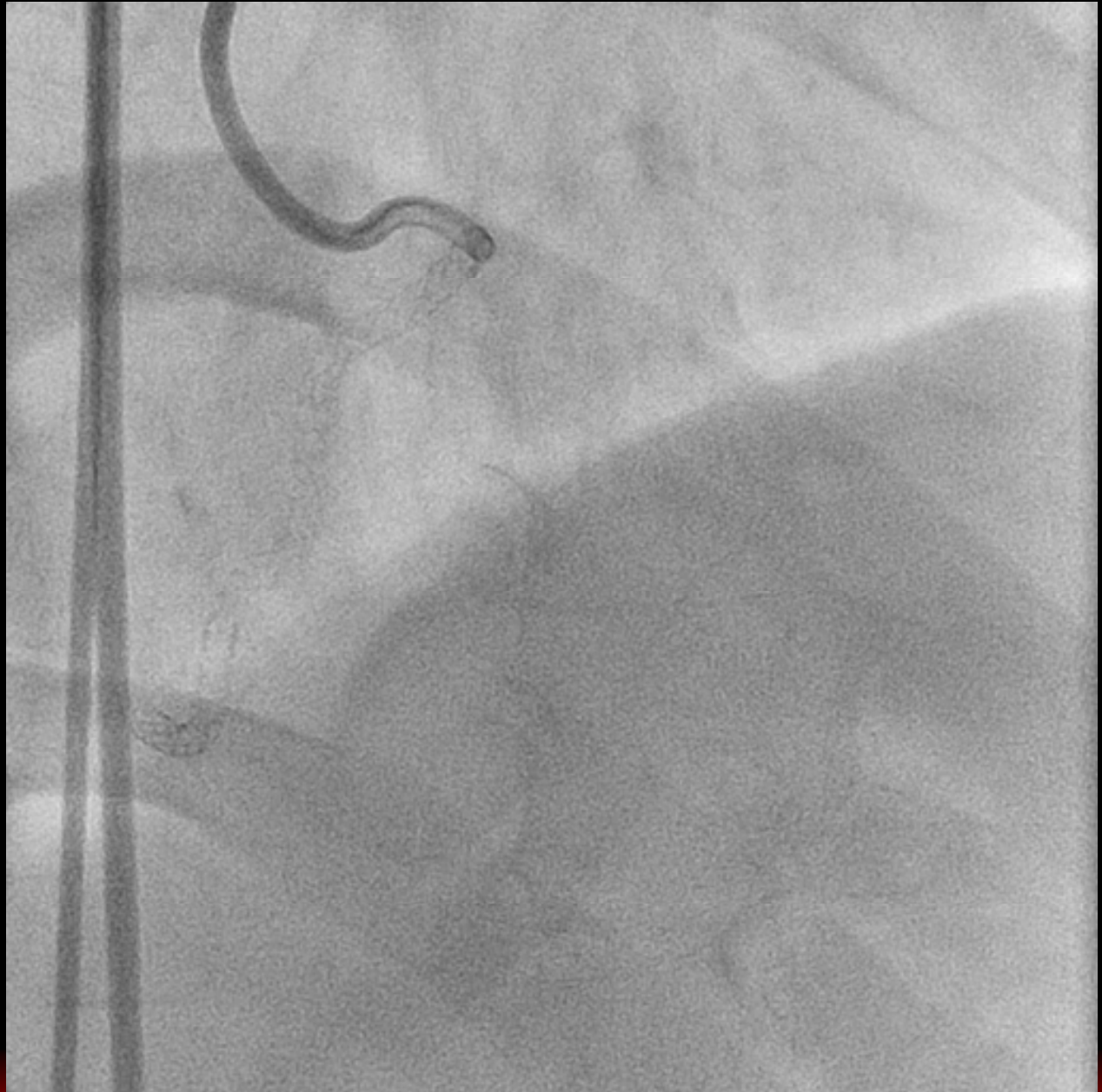


Final



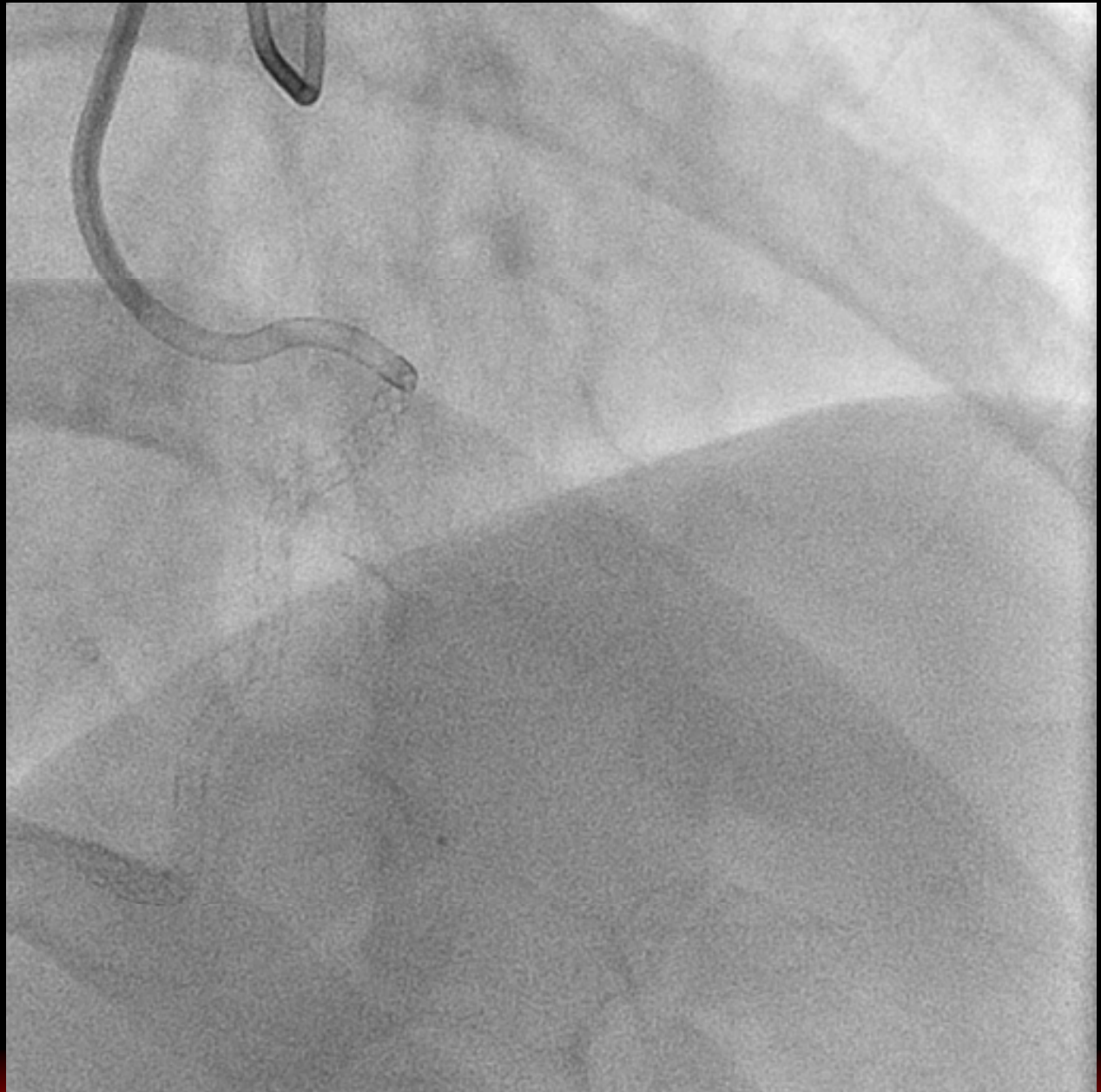


**After
1 week**





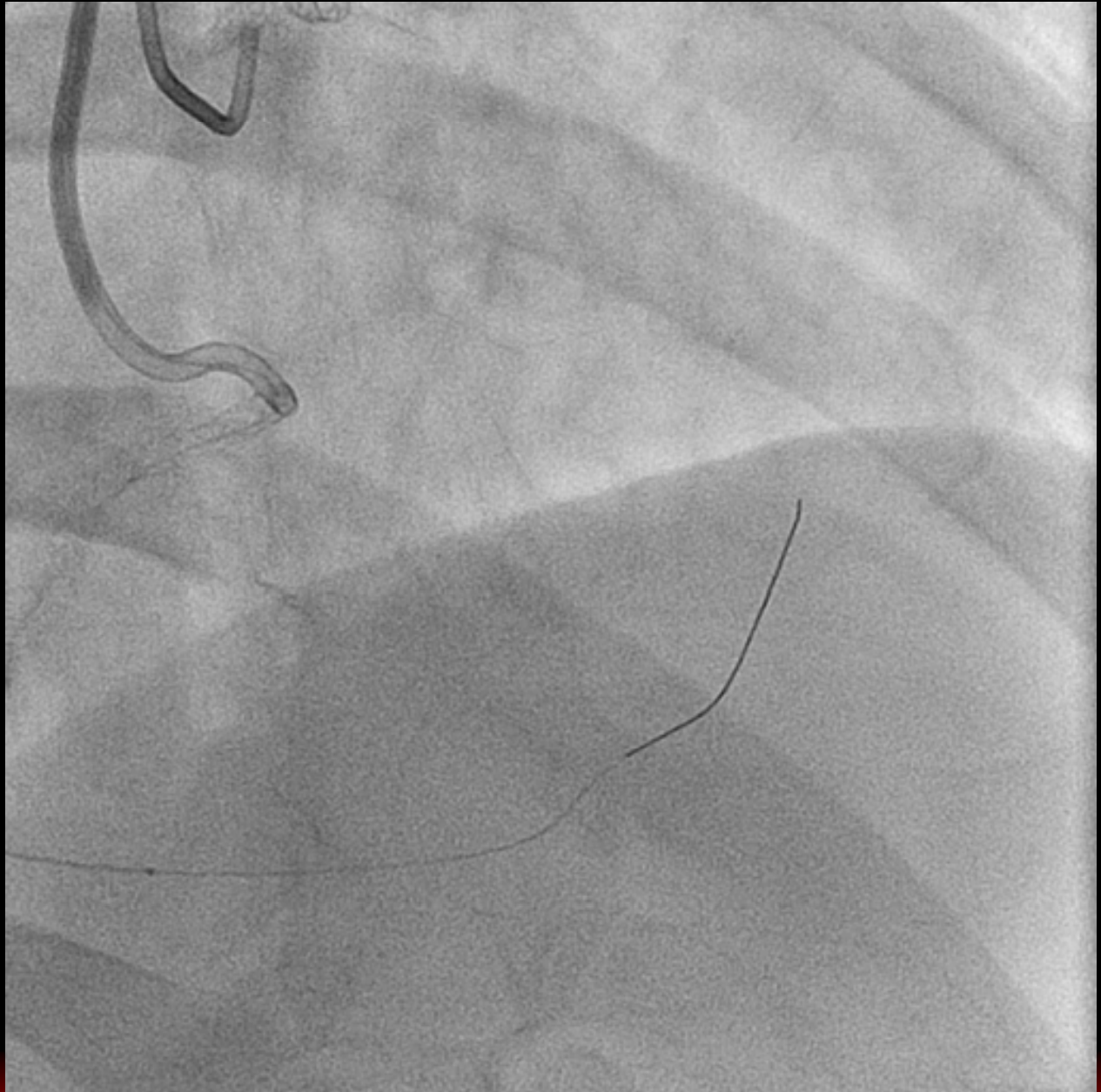
Selective Angio





Retrograde Wiring

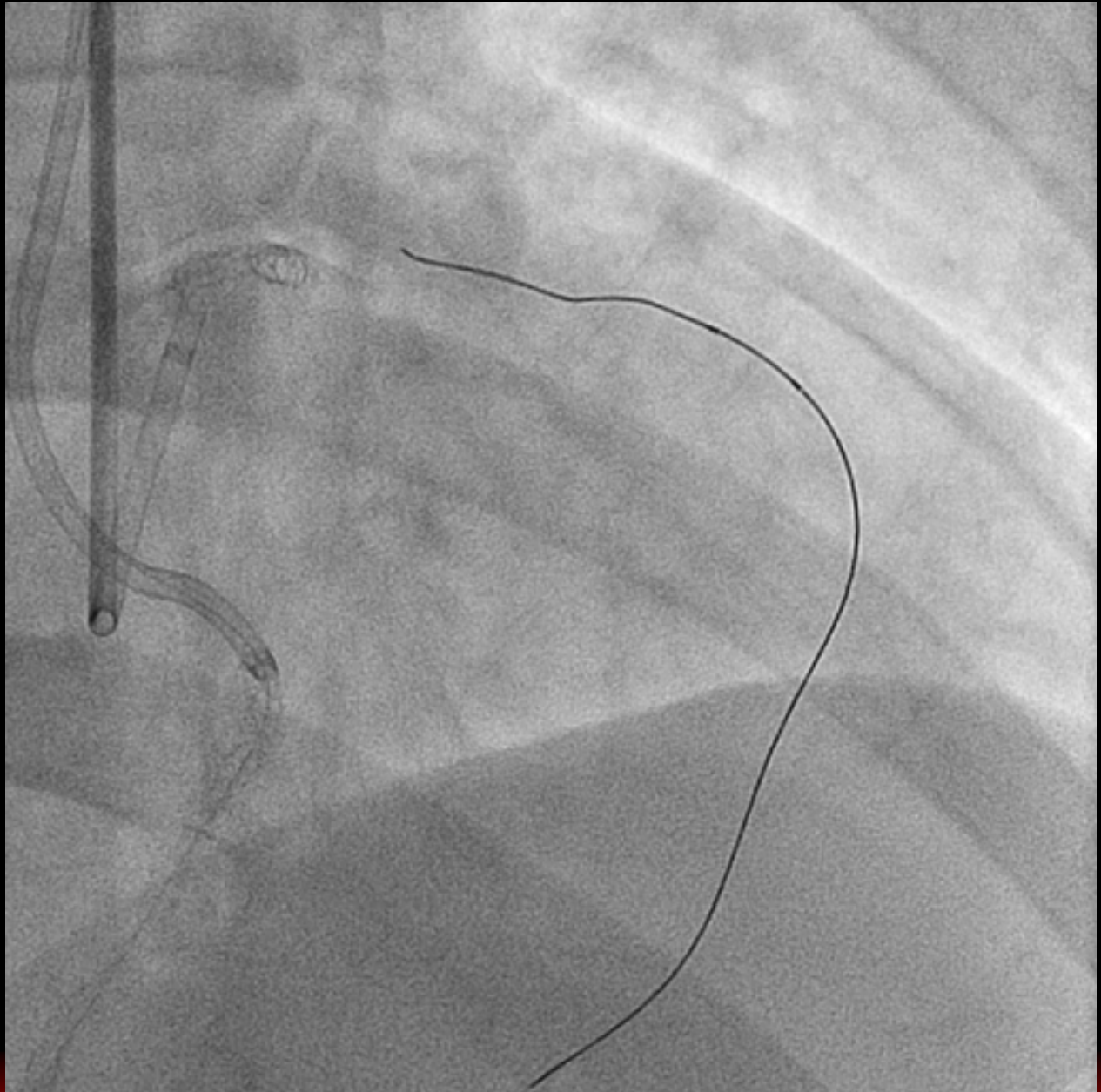
Fielder FC





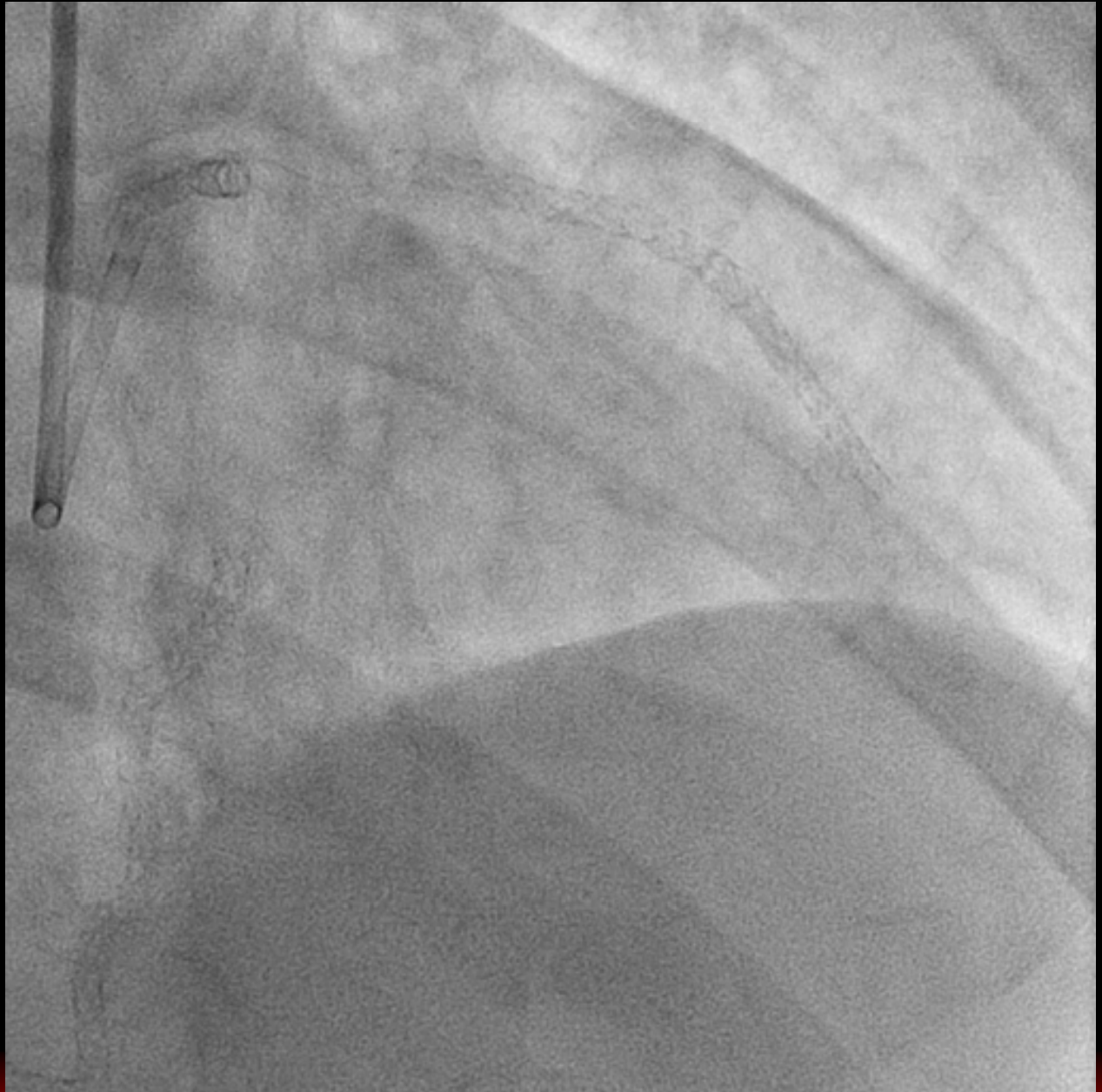
Successful Wiring

Miracle3g



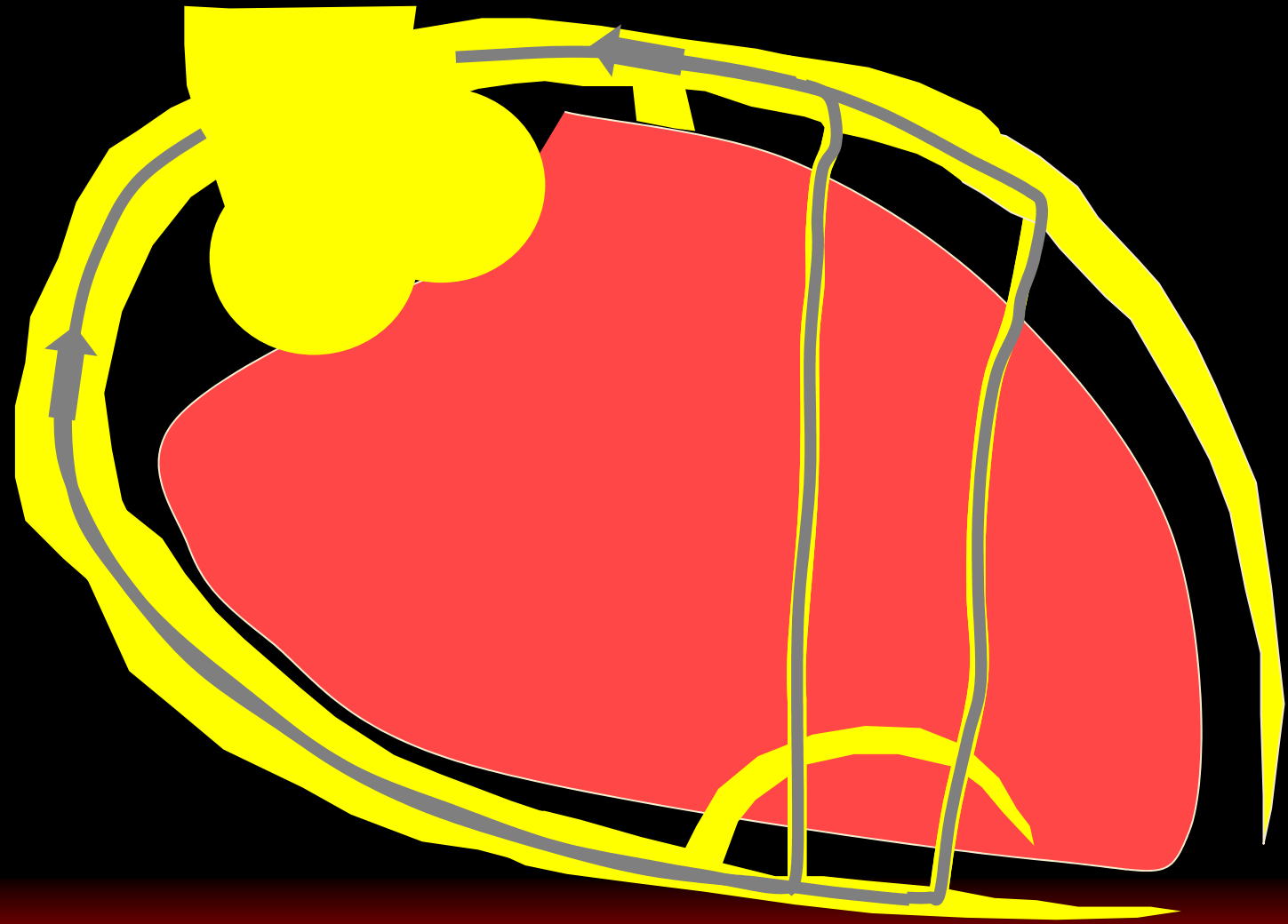


Final





PCI to Occluded RCA & LAD





Summary

1. Three CTOs were successfully opened using IVUS guided wiring and retrograde approach.

2. The retrograde technique was an indispensable strategy for this patient with complex CTOs .