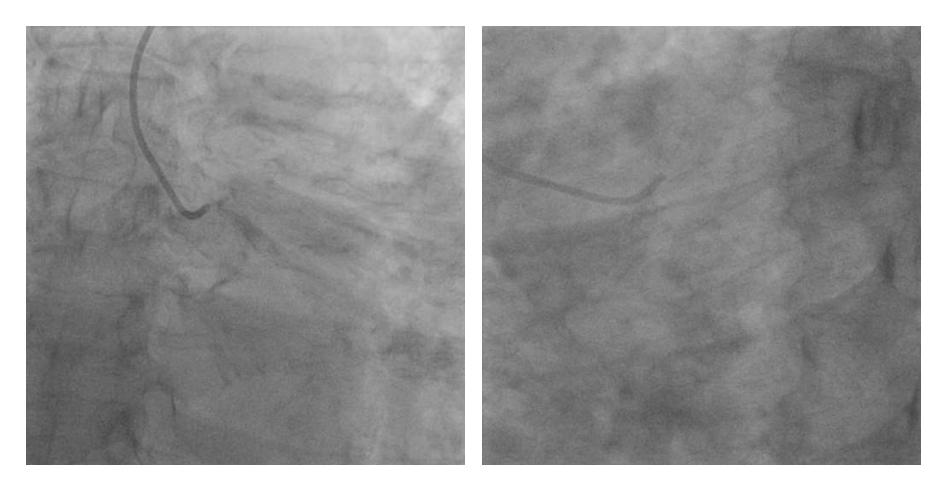
Difficult Decision Making in LM Intervention: Scabies Not Only Itching

Tien Ping Tsao, MD Heart Center Cheng Hsin General Hospital Taipei, Twiwan

- 84 y/o male
- Precordial tightness and SOB for 1 year
- Hyperlipidemia
- PCI with BMS to proximal LAD and LCx at other hospital on March 2015.
- Re-CAG on Sep. 2015 due to recurrent angina and it showed in-stent restenosis of ostial LAD and LCx, he was transferred to our hospital
- Echocardiography showed aoritc valve calcification with PPG of 44 mmHg, AVA 0.86 cm2, mild MR, LVEF 37%
- At that time, the patient refused surgical AVR/CABG or PCI/TAVI and he was discharged after medical Rx

The Second admission

- The patient re-experienced anginal symptoms and SOB and agreed to undergo PCI + TAVI
- He received a coronary angiography on Dec. 7, 2015



Very short LM Severe in-stent restenosis in ostial and proximal LAD Severe in-stent restenosis at LCx ostium And 75% stenosis at mid-LCx



LM stenosis

- PCI for LM bifurcation was about to start, and staged for TAVI was planned, but the patient's son changed his mind and requested CABG and surgical AVR, therefore, PCI was stopped
- On the next day, the patient's family decided PCI and TAVI again
- However, the patient complained of severe itching over trunk and limbs with extensive skin rash
- We consulted dermatologist and scabies was diagnosed
- The patient received topical scabicidal treatment for several days. We considered it was a highly contagious disease, PCI would be performed after scabies solved, he was discharged.

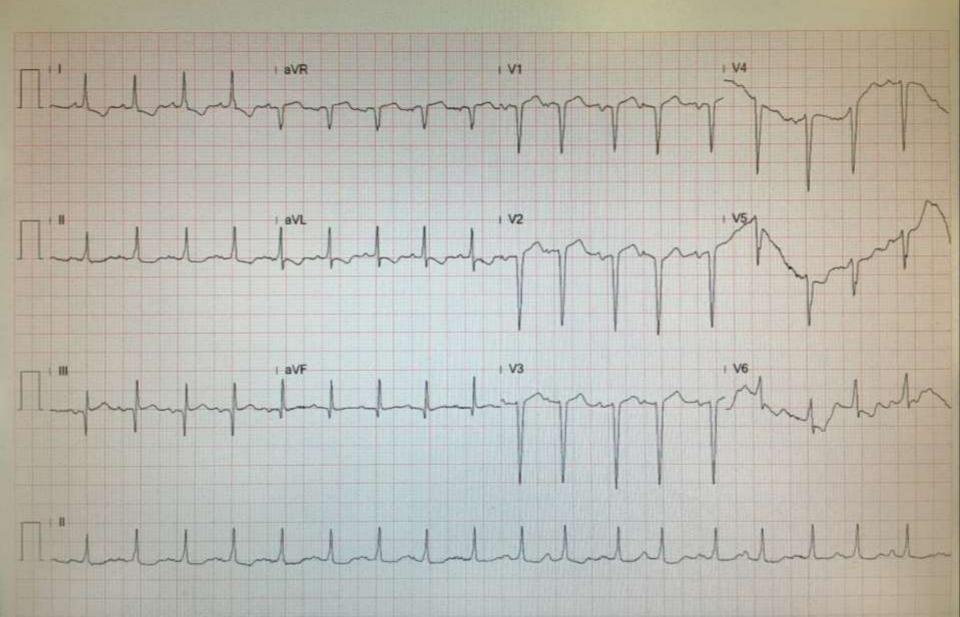
The third admission

- Two days prior to his re-admission, he developed increasing breathlessness and was brought to our ER where Troponin I was 9.5 ng/mL and CxR showed pulmonary congestion. He was admitted to CCU.
- After admission, he received a pre-TAVI CT scan, however, the patient developed ventricular arrhythmias with loss of consciousness in CT room. He was sent to ER where cardiac defibrillation, endotracheal intubation and ACLS were performed
- He received ECMO placement in CCU, his consciousness returned clear
- After discussing with family, PCI and TAVI undertook urgently

Patient ID: A495052	
Order Number: 20151220	3063
Age: 84 Years	
Sex: M	
Name: 排雲喜	
Comment:	

2015/12/20 1	0:14:00
Vent rate:	112 BPM
PR int:	173 ms
QRS dur:	103 ms
QT/QTc:	336 / 402 ms
P-R-T axes:	30 27 141

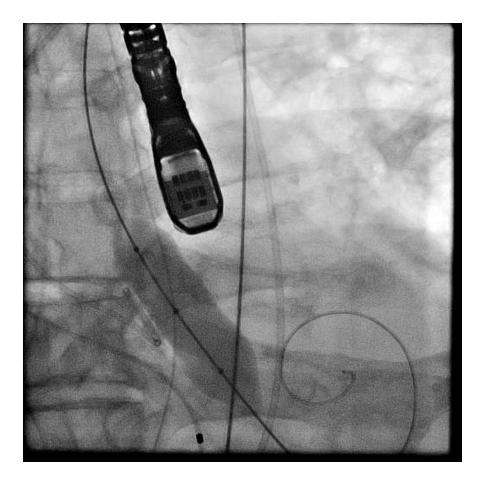
sinus tachycardia with APCs old anterior wall Mi ST depression, possible subendocardial injury Reviewed By : 9285章 下涨(中心醫專字S1549), Date : 2015/12/23 01:38:07



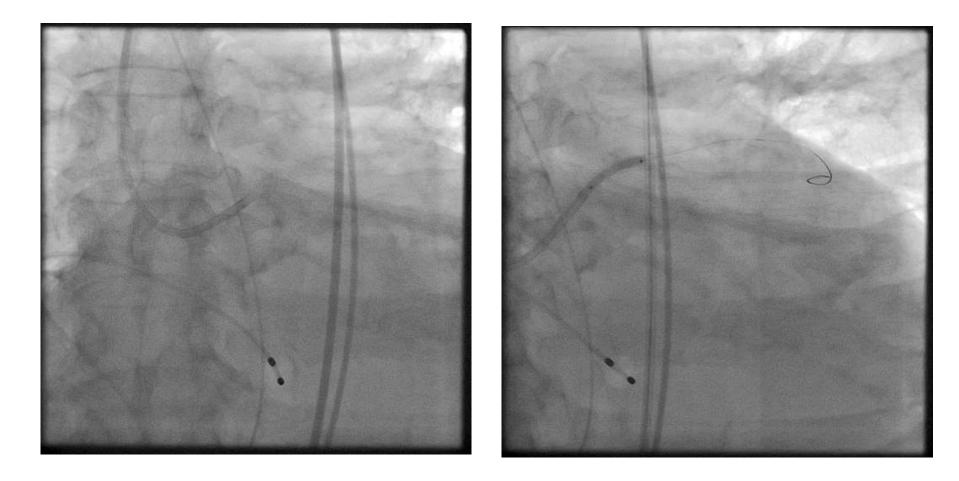
Pre-PCI TEE



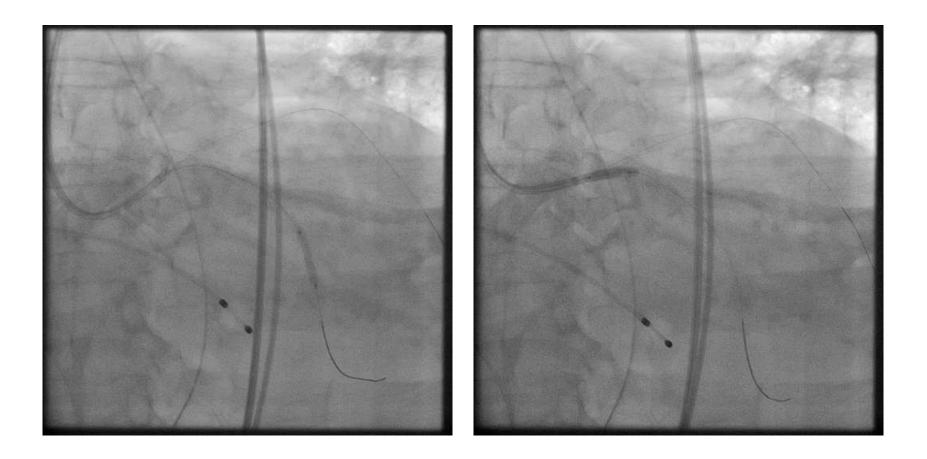
BAV with 20 mm balloon



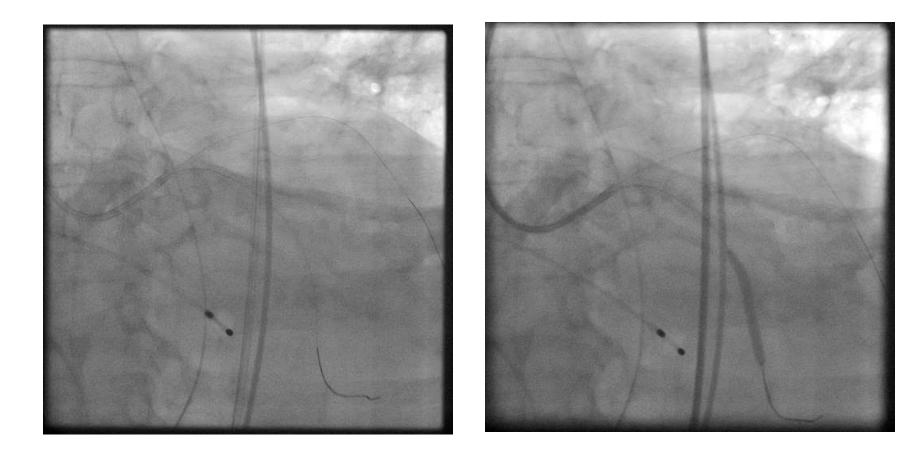
GC: EBU 3.5 6F, GWs: Pilot 50 2.5 x 15 mm balloon dilated LM to LAD at 12 atm



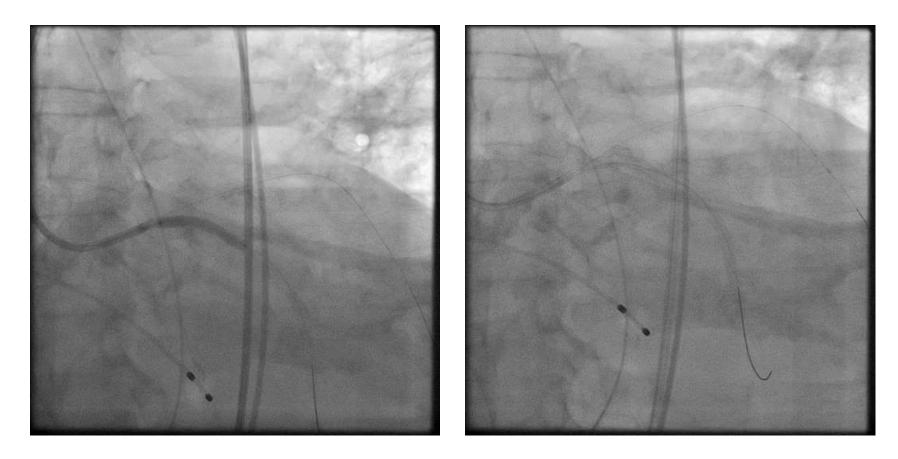
A 2.5 x 15 mm balloon dilated mid-LCx and LM-LCx



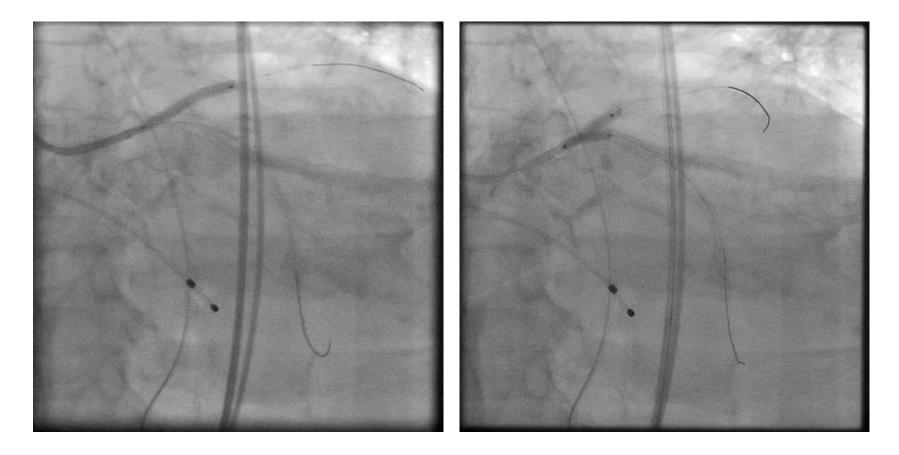
A DES 2.5 x 26 mm to mid-LCx



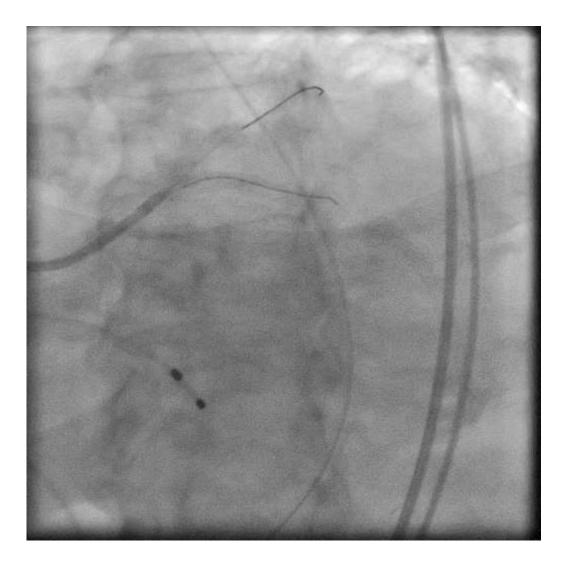
DES 2.75 x 26 mm to LM-LCx



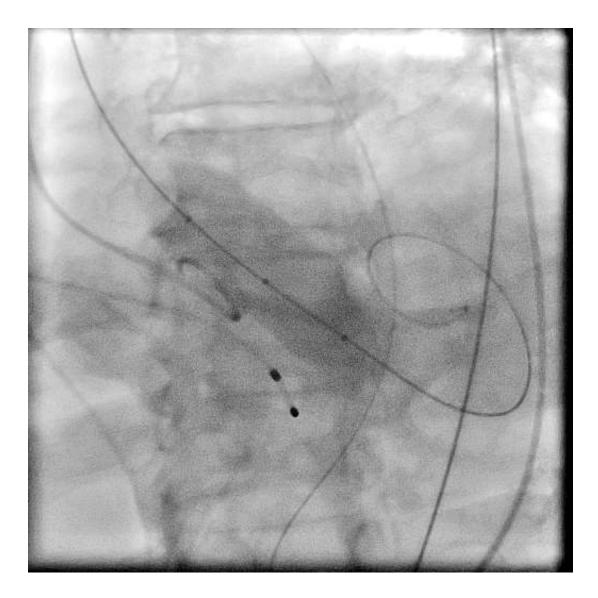
Re-wired LAD, A DES 2.75 x 22 mm to LM-LAD as Culotte stenting Kissing balloon inflation both 2.5 x 15 mm balloons



Final angiography



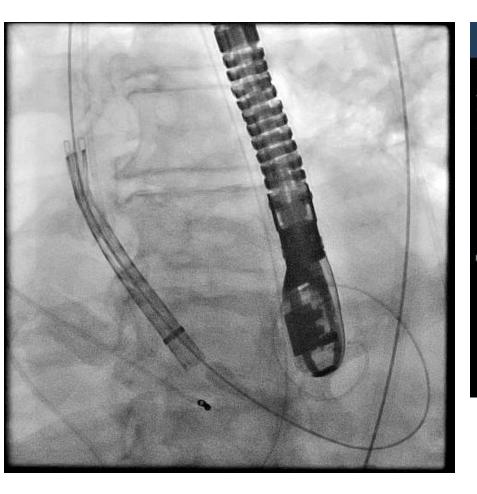
TAVI



25 mm balloon for valve sizing

CoreValve 29 mm

01:35

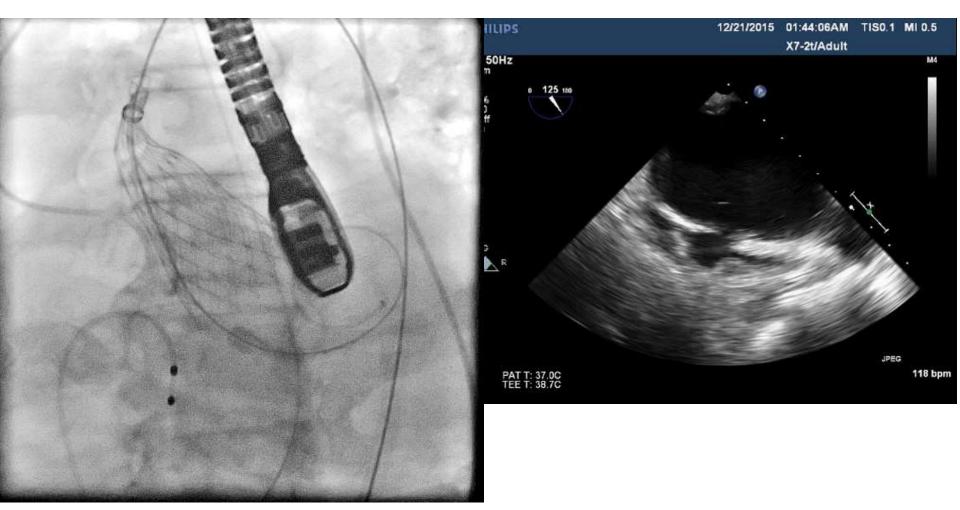


PHILIPS 12/21/2015 01:31:31AM TIS0.1 MI 0.5 X7-2t/Adult FR 50Hz 12cm M4 2D 68% C 50 P Off Gen 150 180 A F JPEG PAT T: 37.0C TEE T: 38.5C 123 bpm

01:31

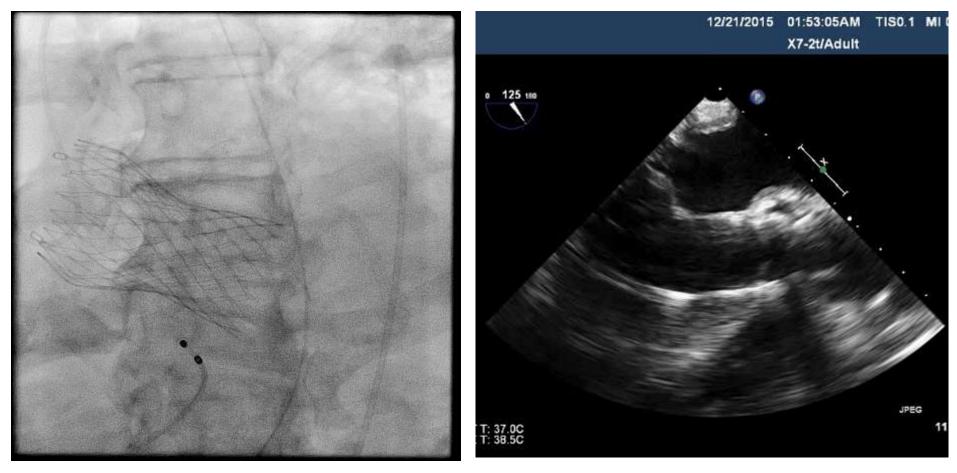


01:44





01:53



 The patient developed ischemic stroke after the procedure
The procedure



 Echocardiography at 30 days: PG 8 mmHg, AVA 1.9 cm2, minimal AR, moderate MR and LVEF was > 55%

Discussion

- A patient with severe LM bifurcation disease and severe aortic stenosis with scabies infection
- Some coincidence made this story
 - The family's uncertainty to our planned treatment
 - Scabies infection: PCI during active scabies infection should be considered if clinically necessary
 - Late presentation to ER
 - Pre-TAVI CT might be skipped if patient's condition is unstable

Discussion

- In patient with severe LM CAD and AS, which to be treated first?
 - PCI then staged TAVI or BAV + PCI then staged TAVI
 - PCI + TAVI in one procedure
 - TAVI then staged PCI
- Why the LA thrombus developed?
 - Inadequate Heparinization ?
 - CPR related?
 - ECMO related?
 - Will different valves make the story different?

For this patient, scabies is not only itching, it is catastrophic.