

Complex Bifurcation PCI Techniques Step-by-Step Lessons from Expert PCI

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Disclosure Statement of Financial Interest

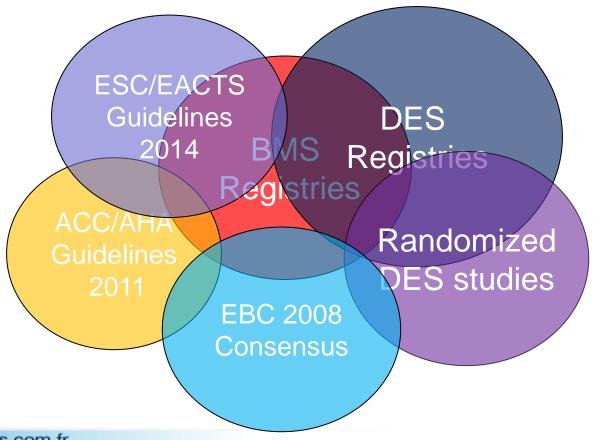
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Affiliation/Financial Relationship Company

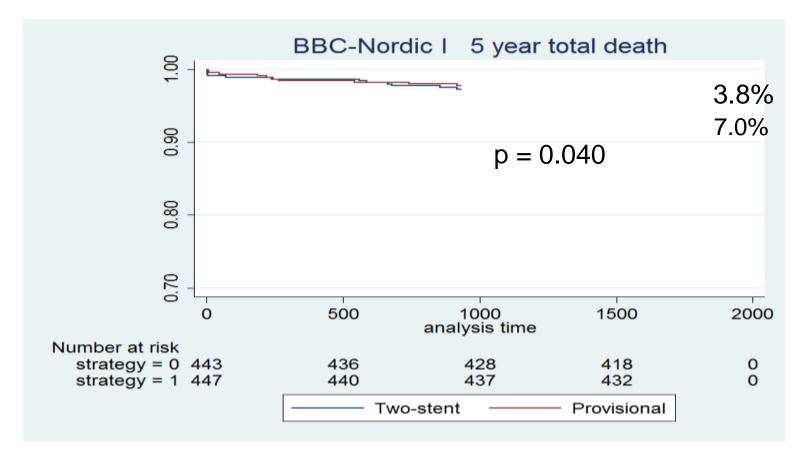
- Grant/Research Support
- Consulting Fees/Honoraria
- Major Stock Shareholder/Equity
- Royalty Income
- Ownership/Founder
- Intellectual Property Rights
- Other Financial Benefit

Abbott, Astra Zeneca, Lily, Edwards

Provisional Side Branch Stenting Should Be the Default Approach



BBC-Nordic: 5-year Death



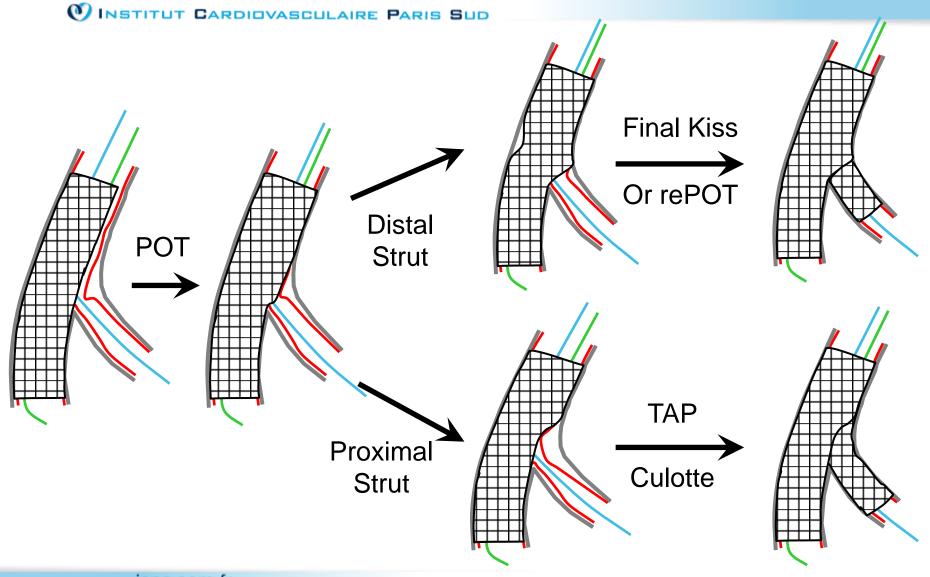
Cox proportional hazards model stratified by study

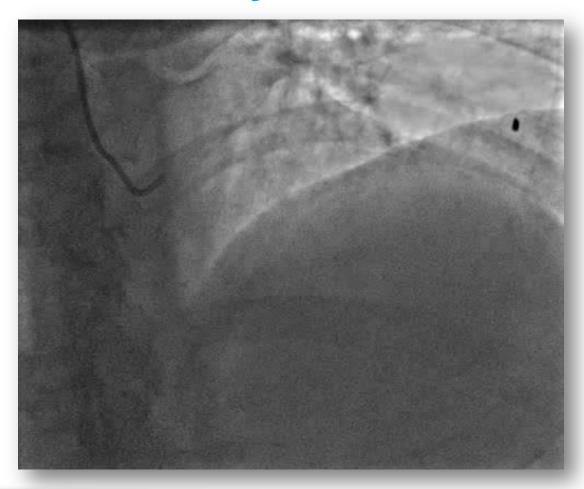
One stent when we can

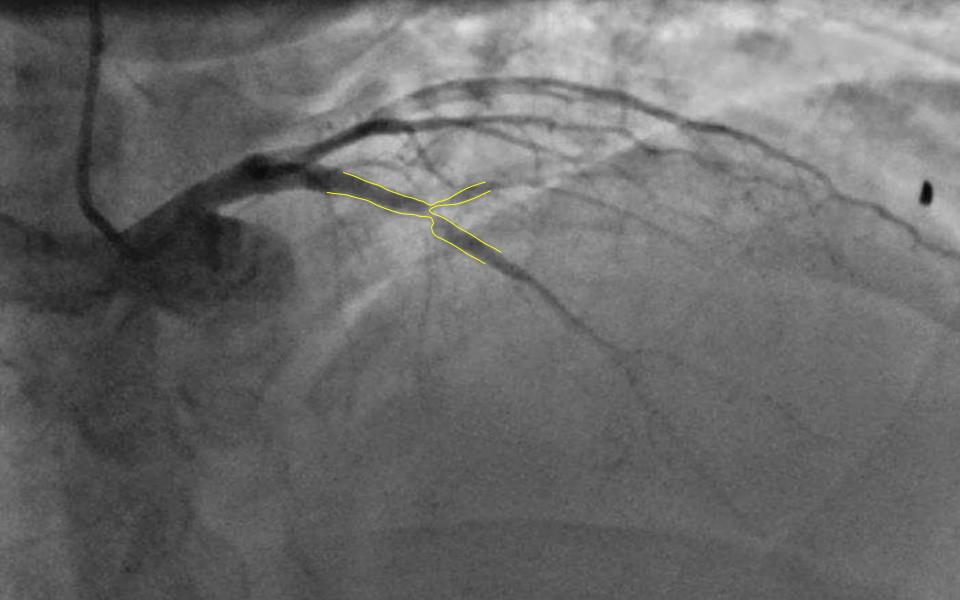
Optimal strategy for high success rate and low need for SB stenting

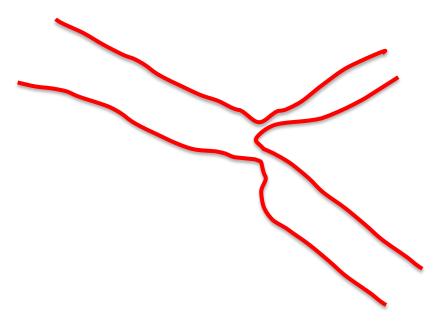
Two stents when needed

Optimal mastering of two stent techniques









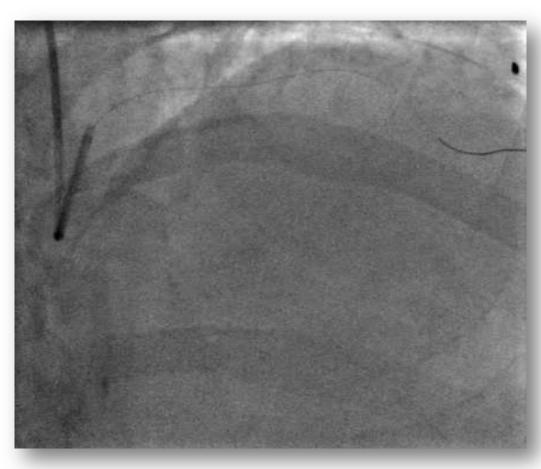
Medina 1,1,1

SB ref. 1.9 mm

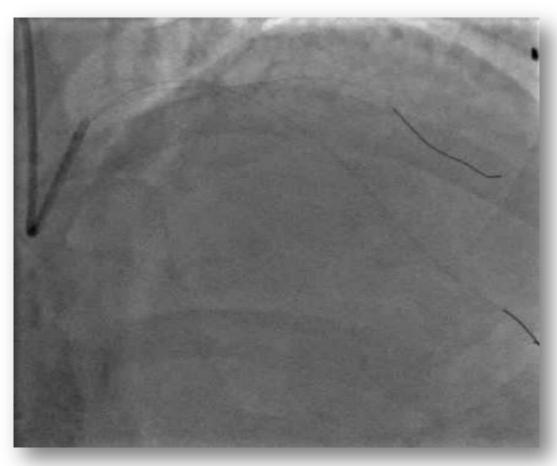
SB Lesion lenght < 3 mm

MB prox. Ref. 2.8 mm

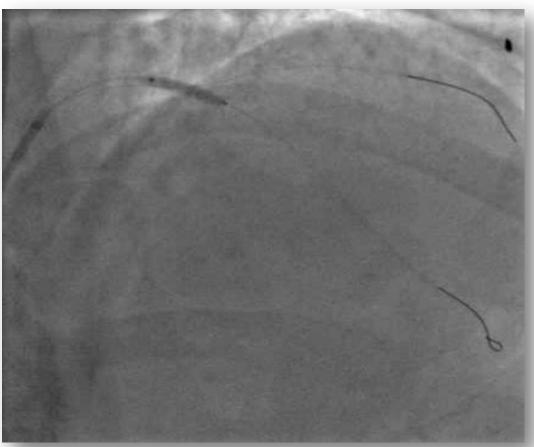
MB distal ref. 2.5 mm



Right TRA
EBU 3.5 6F
Runthrough SB



Right TRA
EBU 3.5 6F
Runthrough SB
Runthrough MB



Right TRA

EBU 3.5 6F

Runthrough SB

Runthrough MB

Xience 2.75 x18



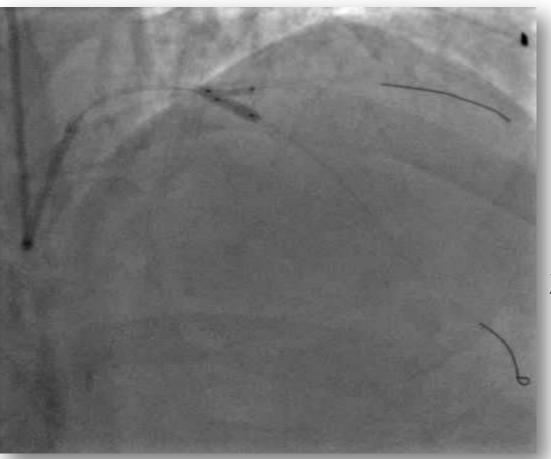
Right TRA

EBU 3.5 6F

Runthrough SB

Runthrough MB

Xience 2.75 x18



Right TRA

EBU 3.5 6F

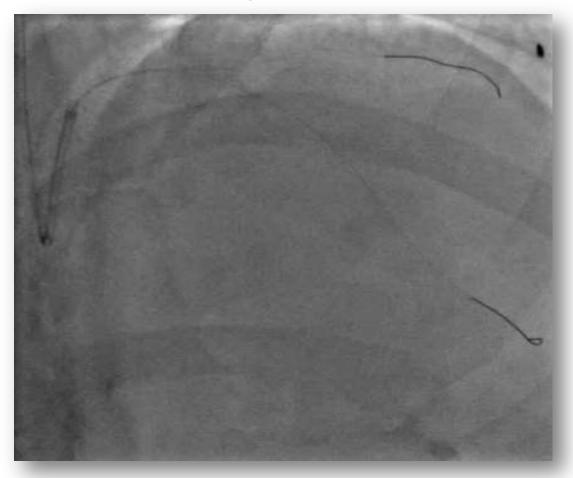
Runthrough SB

Runthrough MB

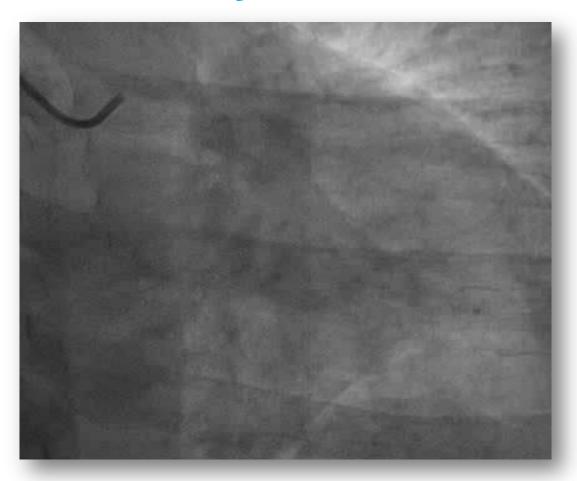
Xience 2.75 x18

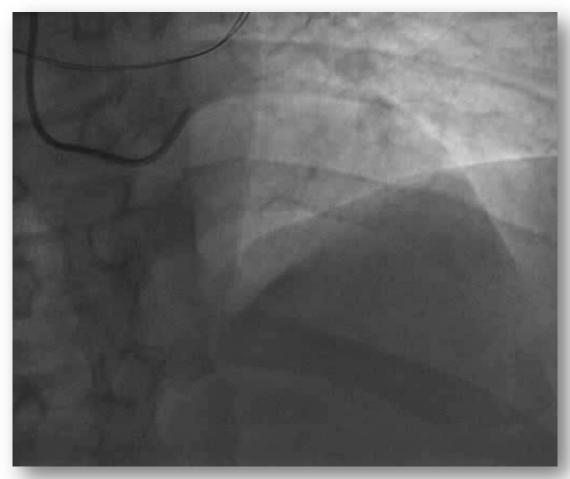
Hiryu 2.25x10

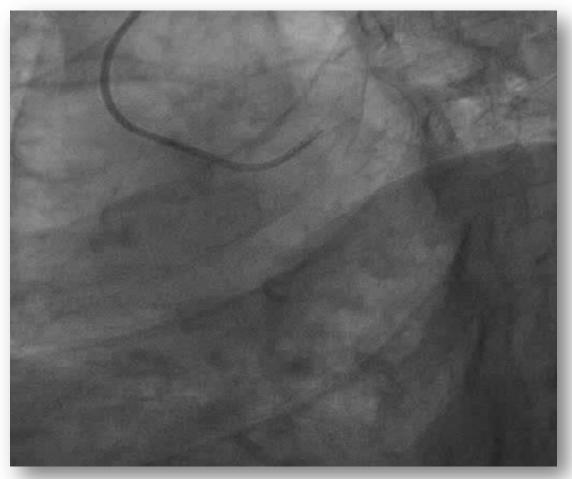
Hiryu 2.75x10



CM 72 cc Fluoro 8.1 min. AK 0.61 Gray







LAD/Dg Medina 1,0,0

LM Medina 0,1,0,0

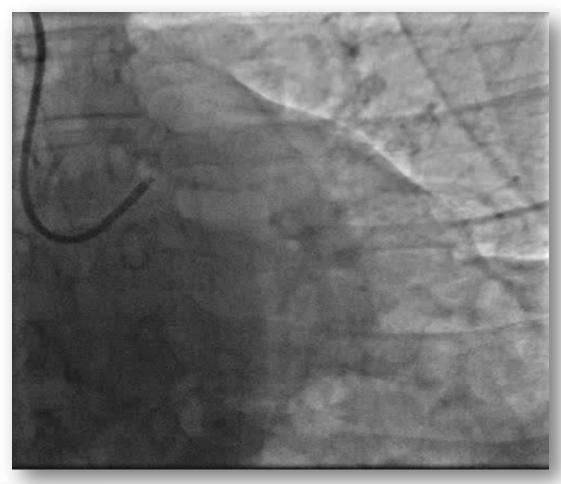
LM ref. 4.4 mm

LCx ref. 3.4 mm

LAD prox ref. 3.5 mm LAD

dist. ref. 2.8 mm

Diag dist. ref. 2.2 mm



Right TRA EBU 3.5 6F



Right TRA

EBU 3.5 6F

Runthrough LCx

Runthrough Dg

Runthrough LAD



Right TRA

EBU 3.5 6F

Runthrough LCx

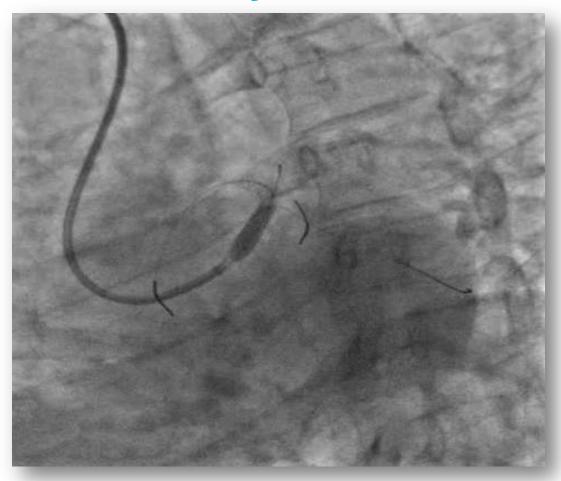
Runthrough Dg

Runthrough LAD

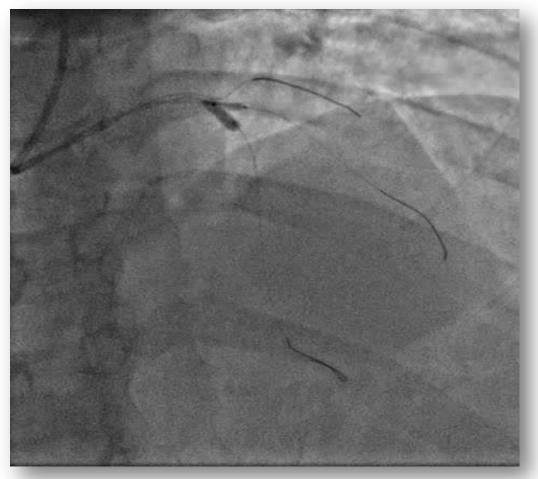
Nobori 3.0x28



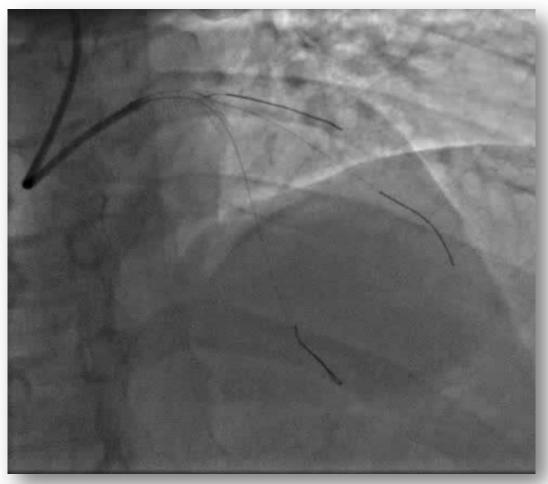
POT LAD 3.0 @ 20 atm.

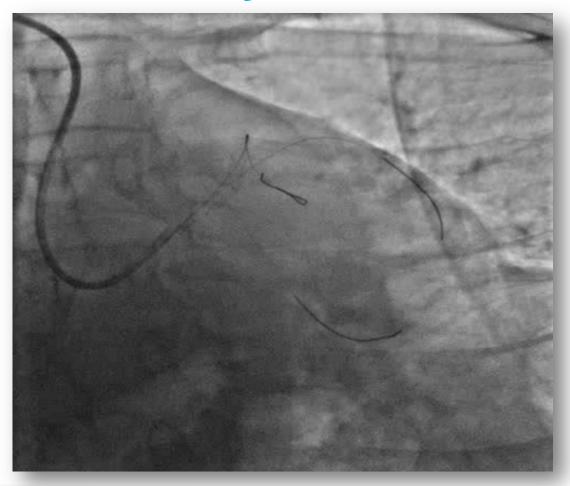


POT LM
Hiryu 4.5 mm
@ 20 atm.



LAD wire in Dg Dg wire in Circ Circ wire in LAD Kiss LAD/Dg Hiryu 3.0 mm Hiryu 2.25 mm @ 14 atm.







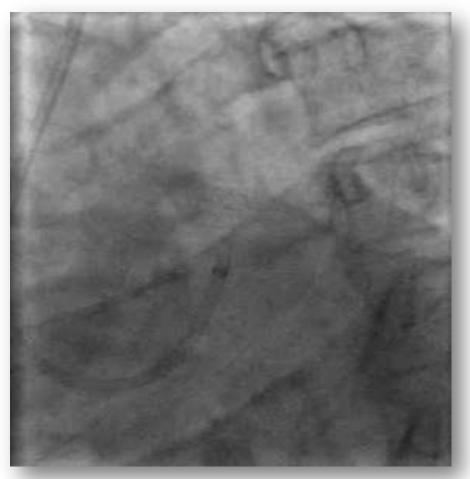
Kiss LAD/LCx Hiryu 3.5 mm Hiryu 3.25 mm

@ 14 atm.



P0T Hiryu 4.5 mm

@ 20 atm.



CM 120 cc Fluoro 12.8 min. AK 0.79 Gray



Take home message

Provisional side branch stenting approach can be used in the majority of cases with excellent long term outcomes.

The rate of success depends mainly on very simple rules:

- Optimal view and well defined strategy
- One wire in each branch
- MB stent size according to distal reference
- Liberal use of the POT technique
- Access toward the distal strut
- Non compliant balloons for kissing





For more technical informations: EBC consensus, Eurointervention (2004 to 2016) Bifurcation supplement, Eurointervention 2011 and 2015 Updated bifurcation chapter, PCR-EAPCI textbook 2014