LAD ISR-CTO
that doesn't Cross any Device

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Case Presentation

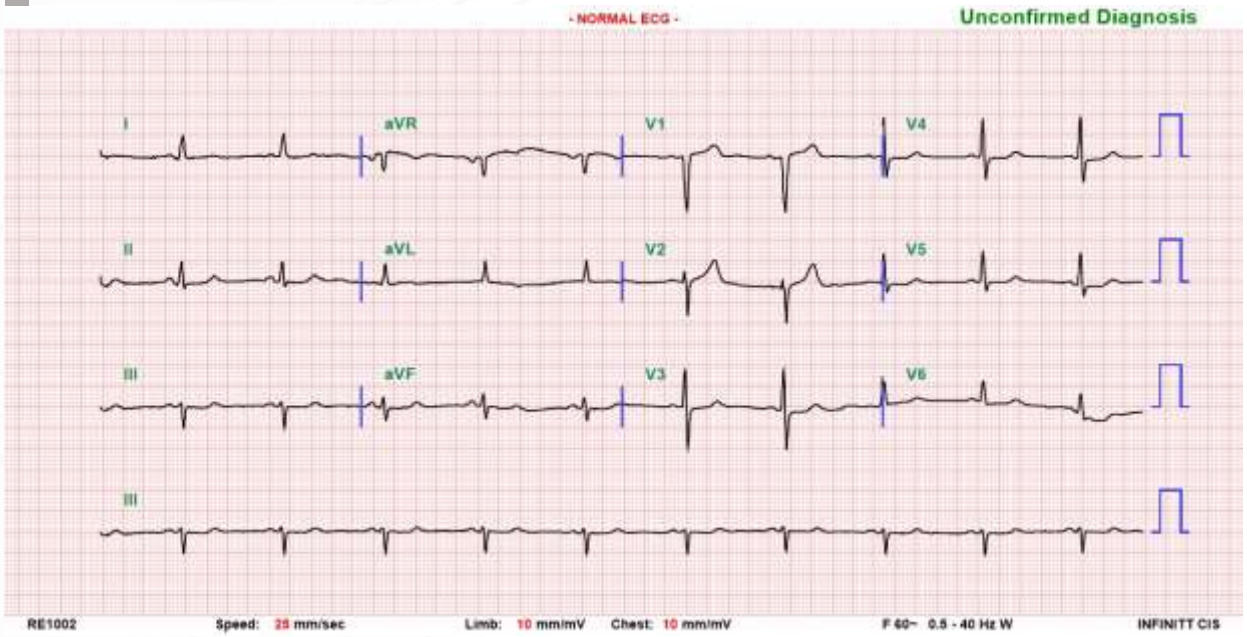
Summary

- M / 77
- Chest Pain – ER Visit (NTG response +)
- S/P PCI (’96) pRCA, p-dLAD **BMS**
- s/p failed PCI ['20.10.20] – other Hospital

Past Medical History

- Diabetes : Y
- Hypertension : Y
- Hyperlipidemia : Y

ECG


- NORMAL ECG -
Unconfirmed Diagnosis
I
aVR
V1
V4
II
aVL
V2
V5
III
aVF
V3
V6
III
RE1002
Speed: 25 mm/sec
Limb: 10 mm/mV
Chest: 10 mm/mV
F 60~ 0.5 - 40 Hz W
INFINITT CIS

Chest PA


R
MOB

Echocardiography

○Absent ●Present WMSI : 1.44

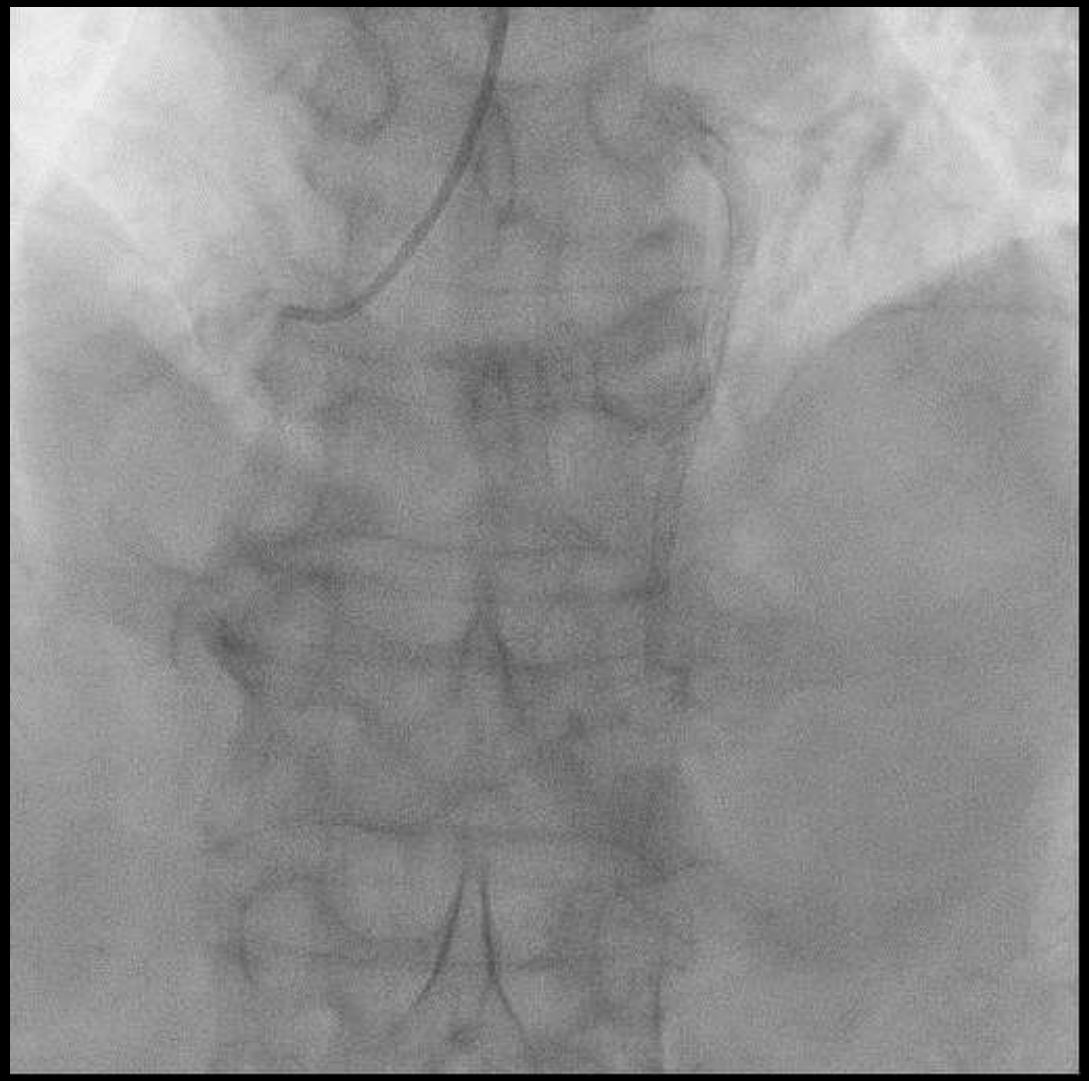
Mild Hypokinesia of basal inferolateral Wall.
Mild Hypokinesia of mid inferolateral Wall.
Mild Hypokinesia of apical lateral Wall.
Mild Hypokinesia of basal anterolateral Wall.
Mild Hypokinesia of mid anterolateral Wall.
Hypokinesia of basal anterior Wall.
Akinesia of mid anterior Wall.
Akinesia of apical anterior Wall.

EF 45~50 %

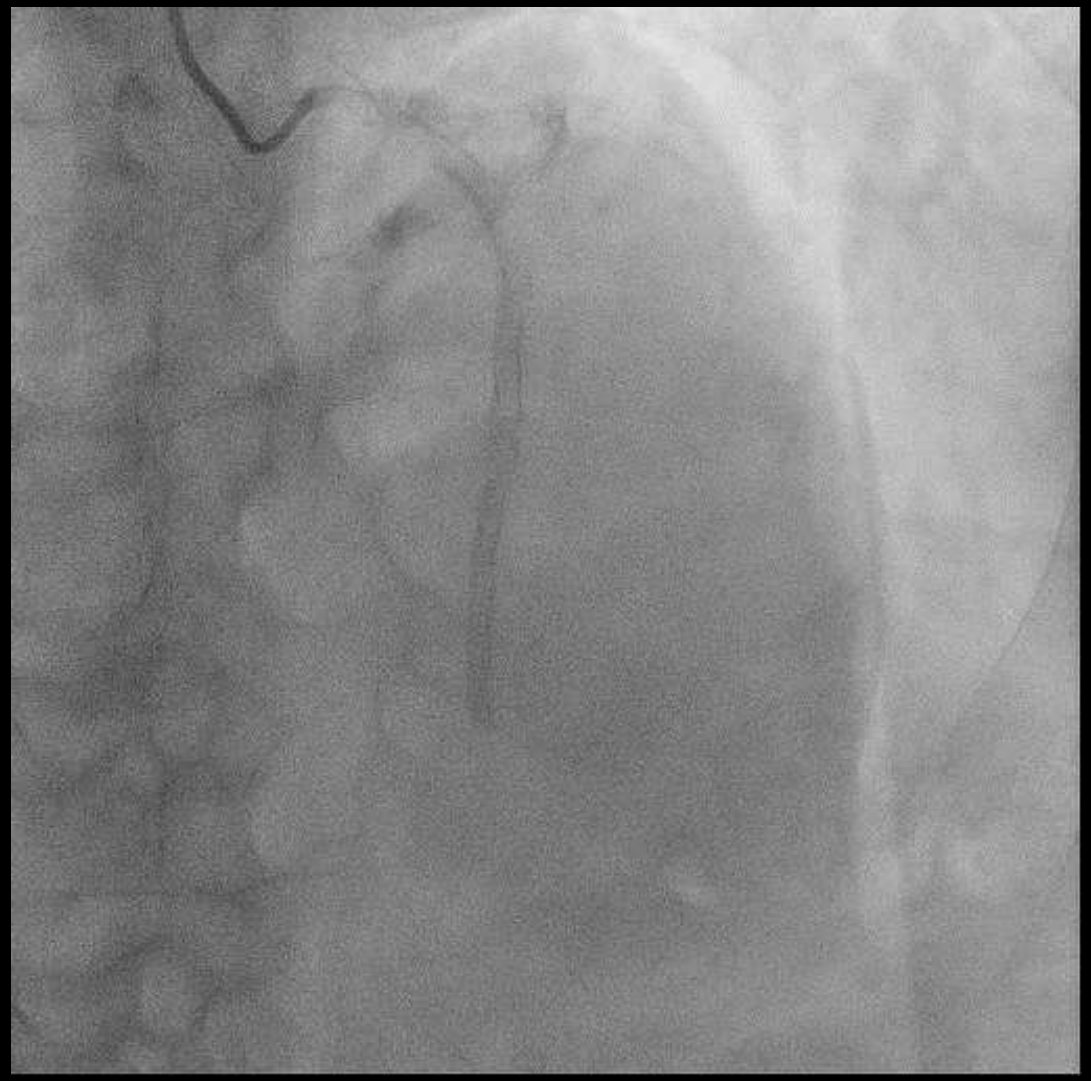
Diagnostic Angiography

Coronary Angiography

S/P PCI (‘96), p-dLAD BMS



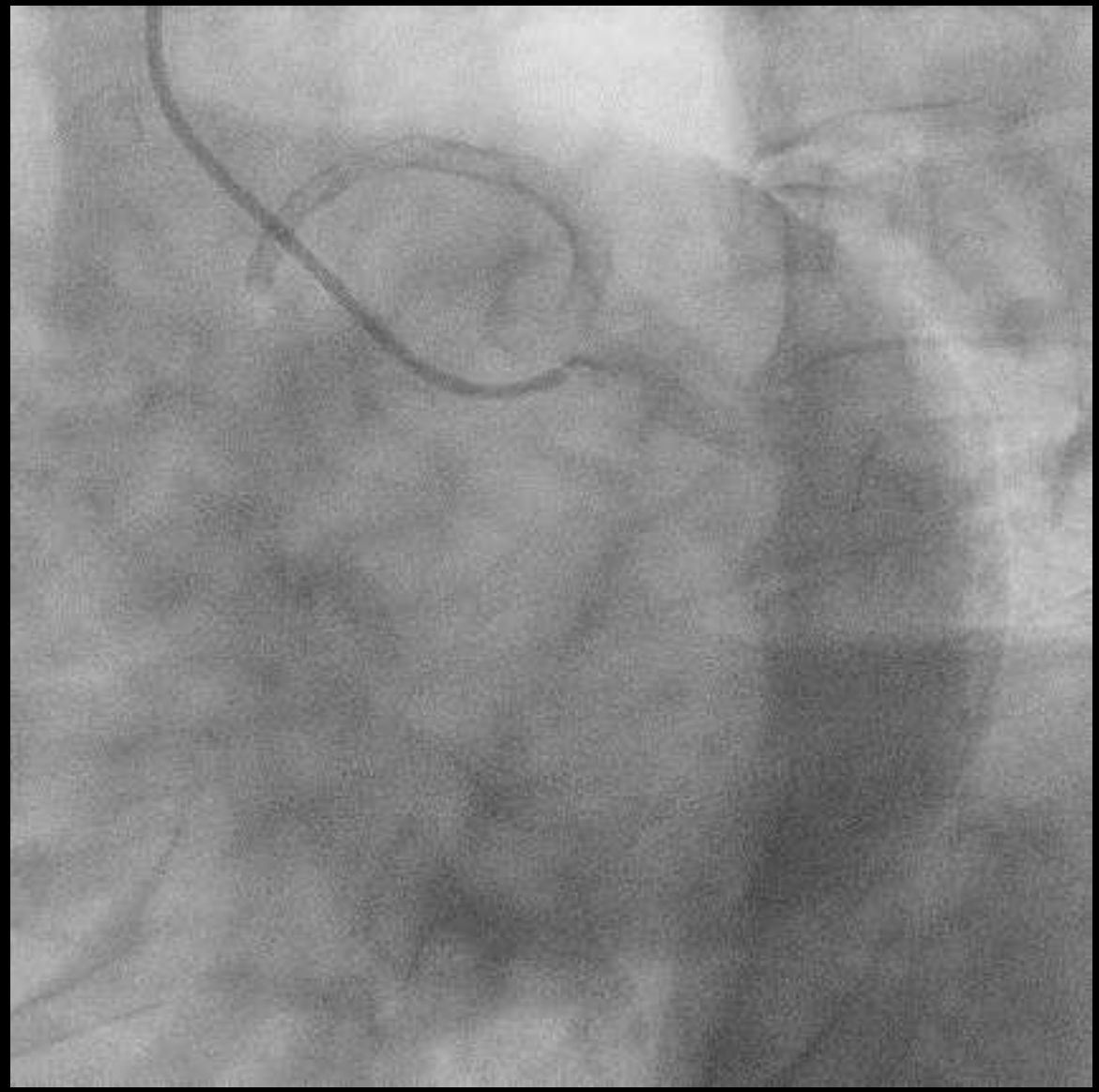
LAD Collateral (Grade3)



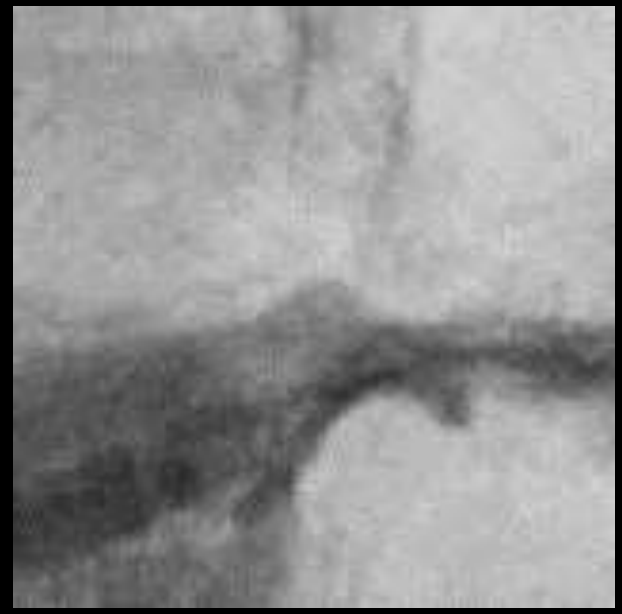
No Main to LAD Flow

Coronary Angiography

S/P PCI (‘96), p-dLAD BMS

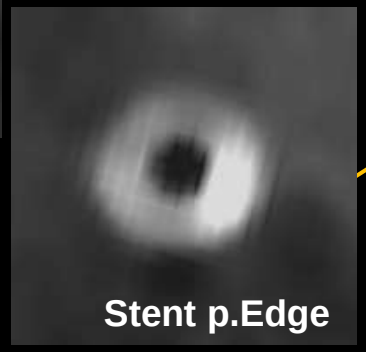


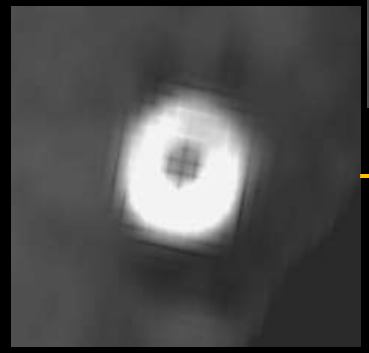
LAO / Caudal (Spider View)

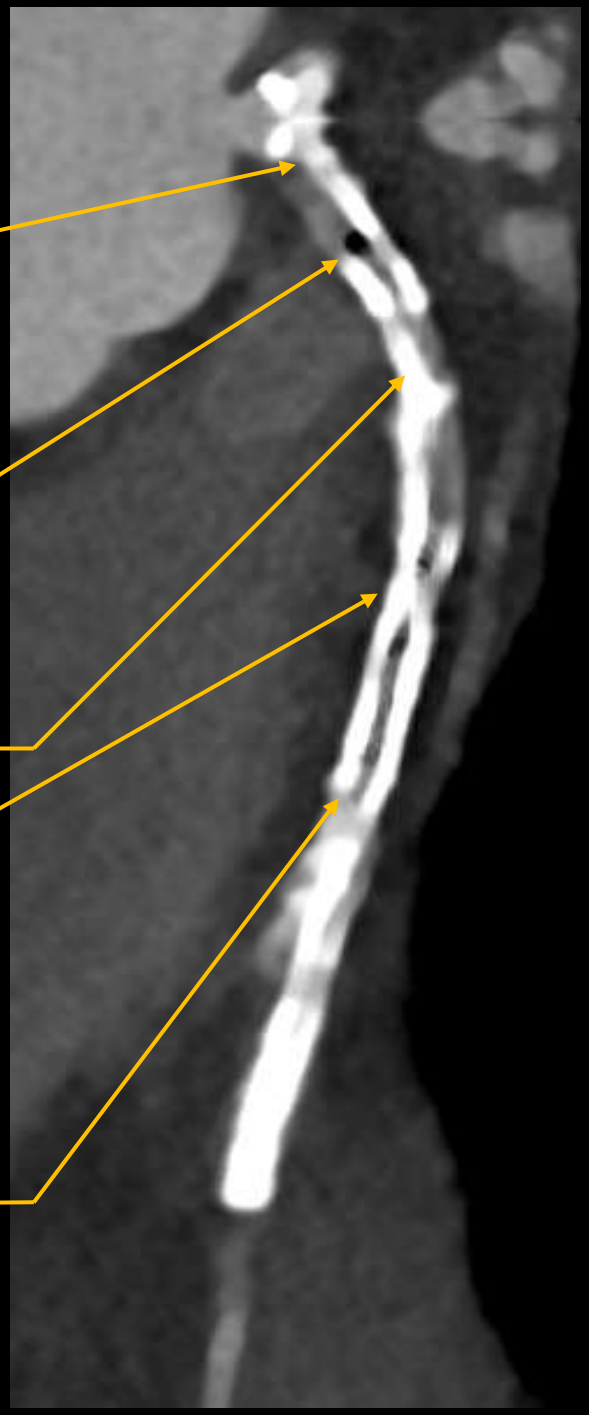


Coronary CT

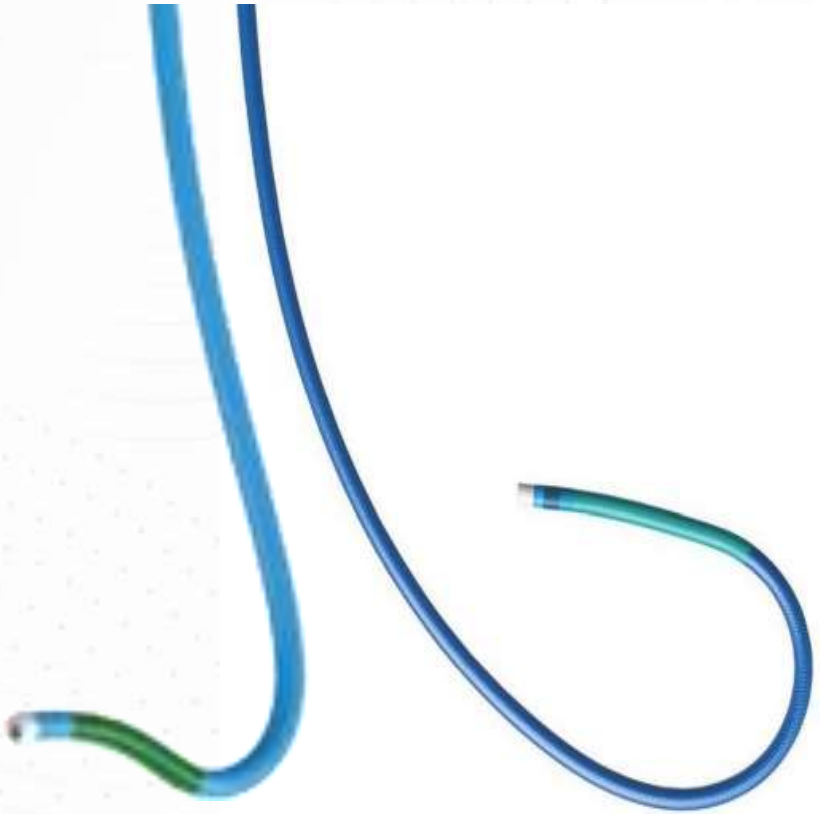
Coronary CT (LAD)







PCI



AL

EBU

Guidezilla
or
GuideLiner

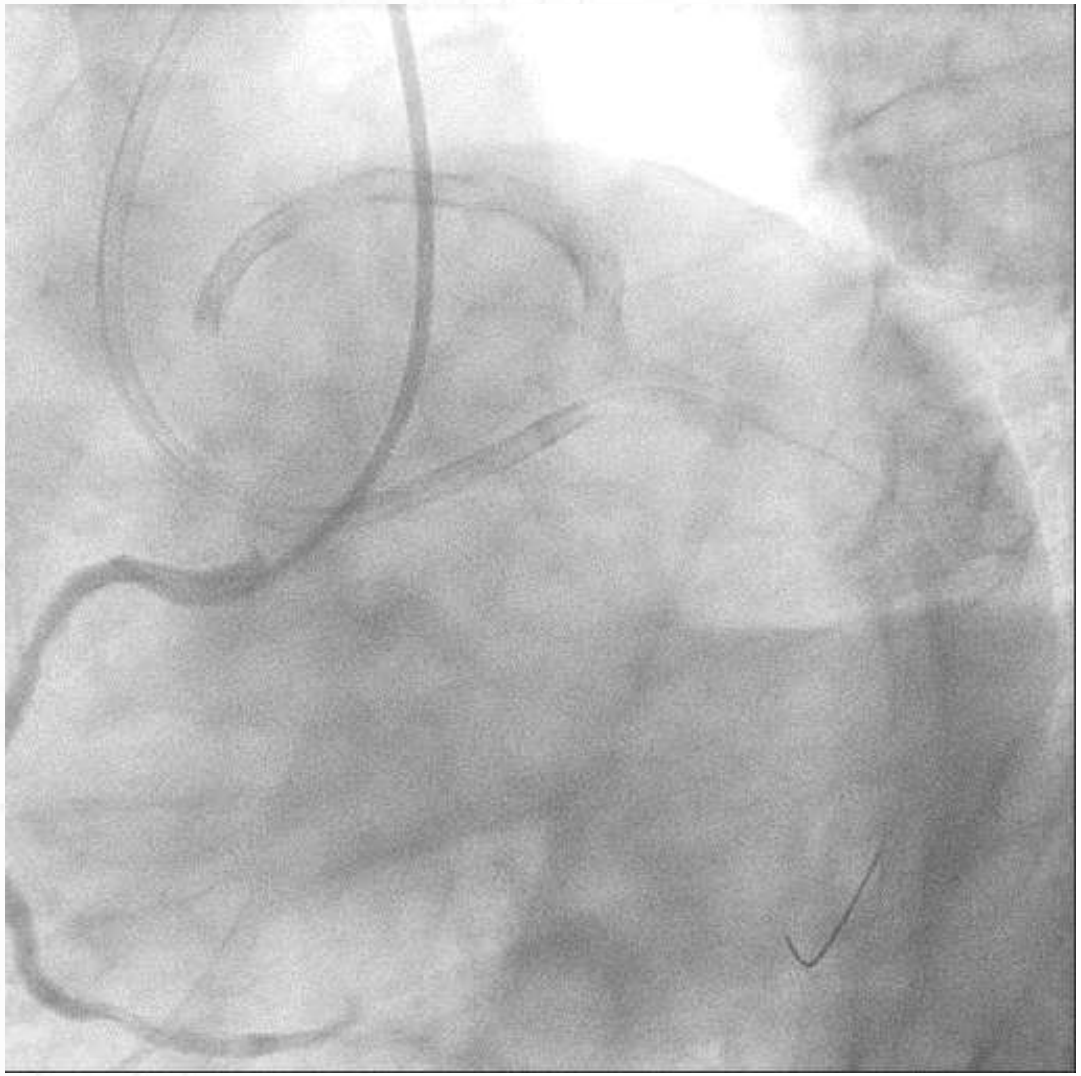
Long Sheath
- Arrow LL
- Raabe

Guiding Catheter Selection (Shape, Bigger French)

Guiding Extension

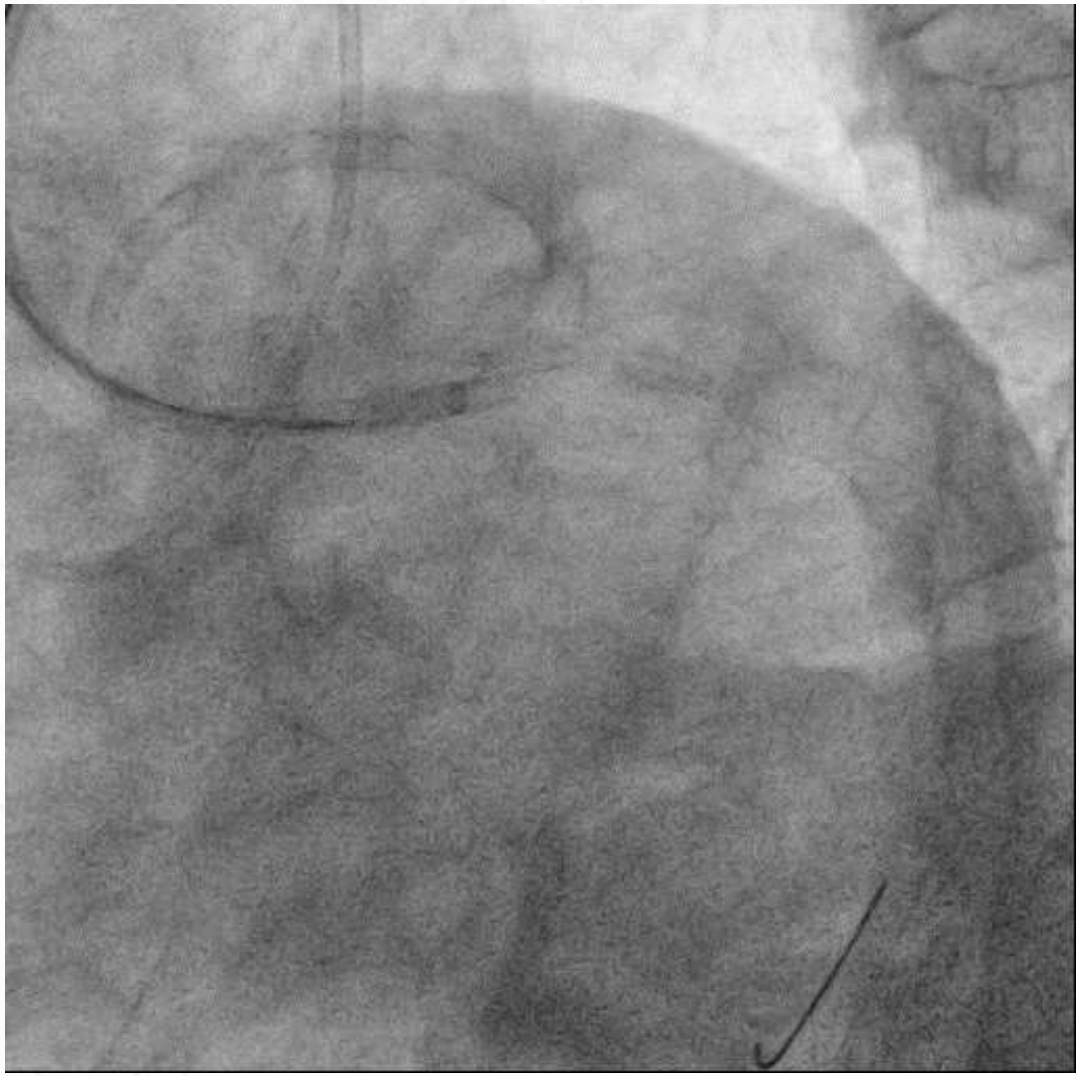
Long Sheath (Backup Support)

PCI



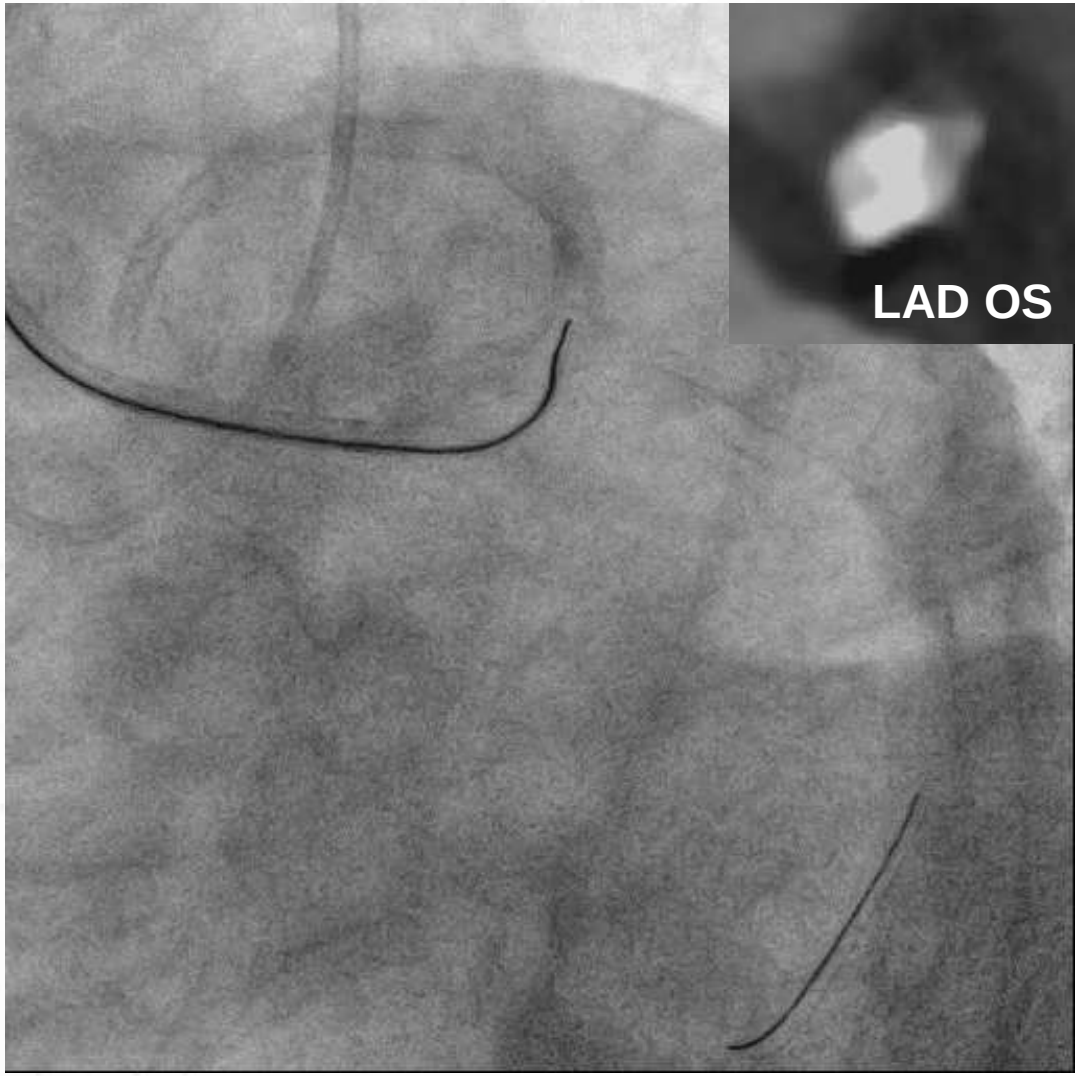
7Fr EBU3.75 / 5Fr JR4

PCI



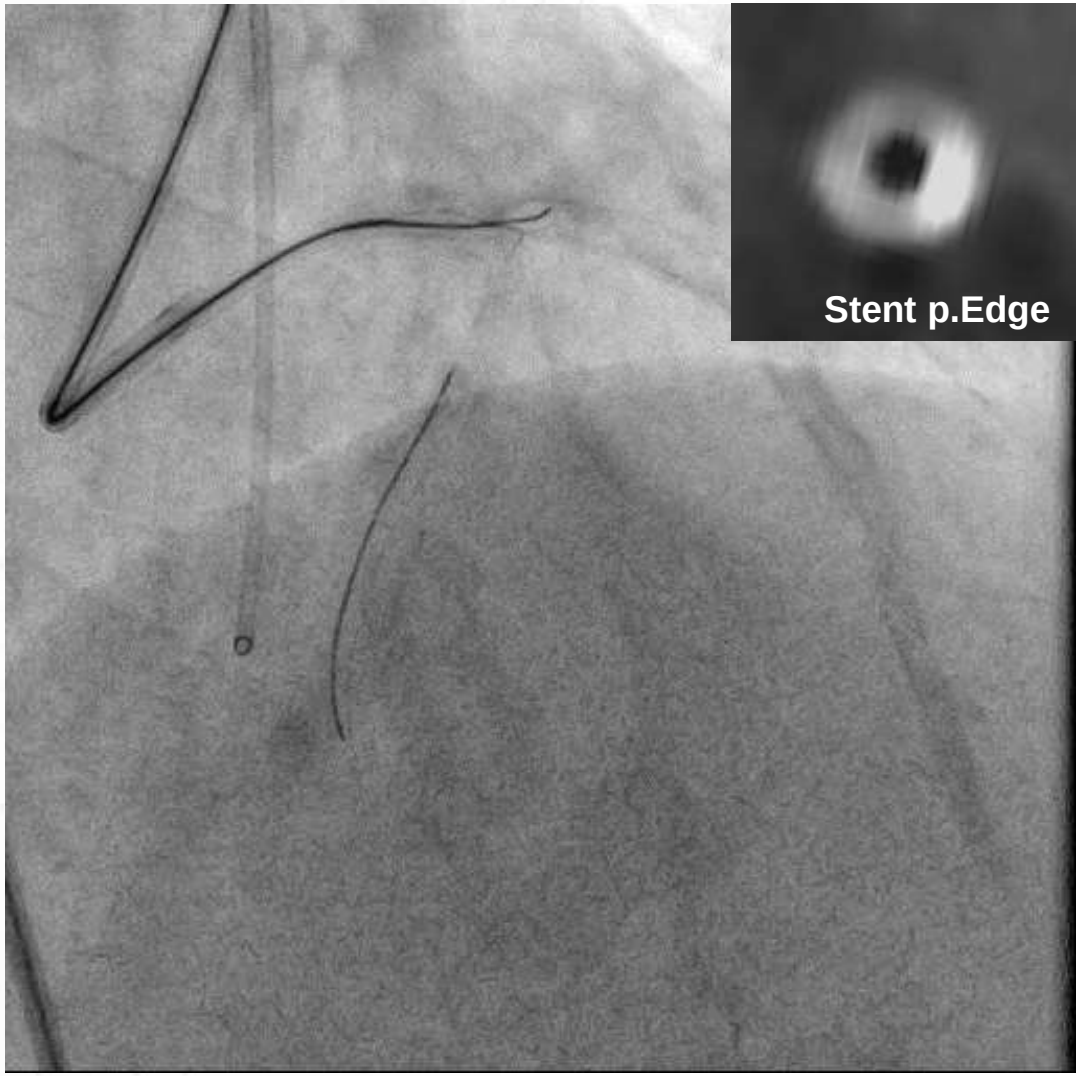
Corsair Pro XS + Sion Blue

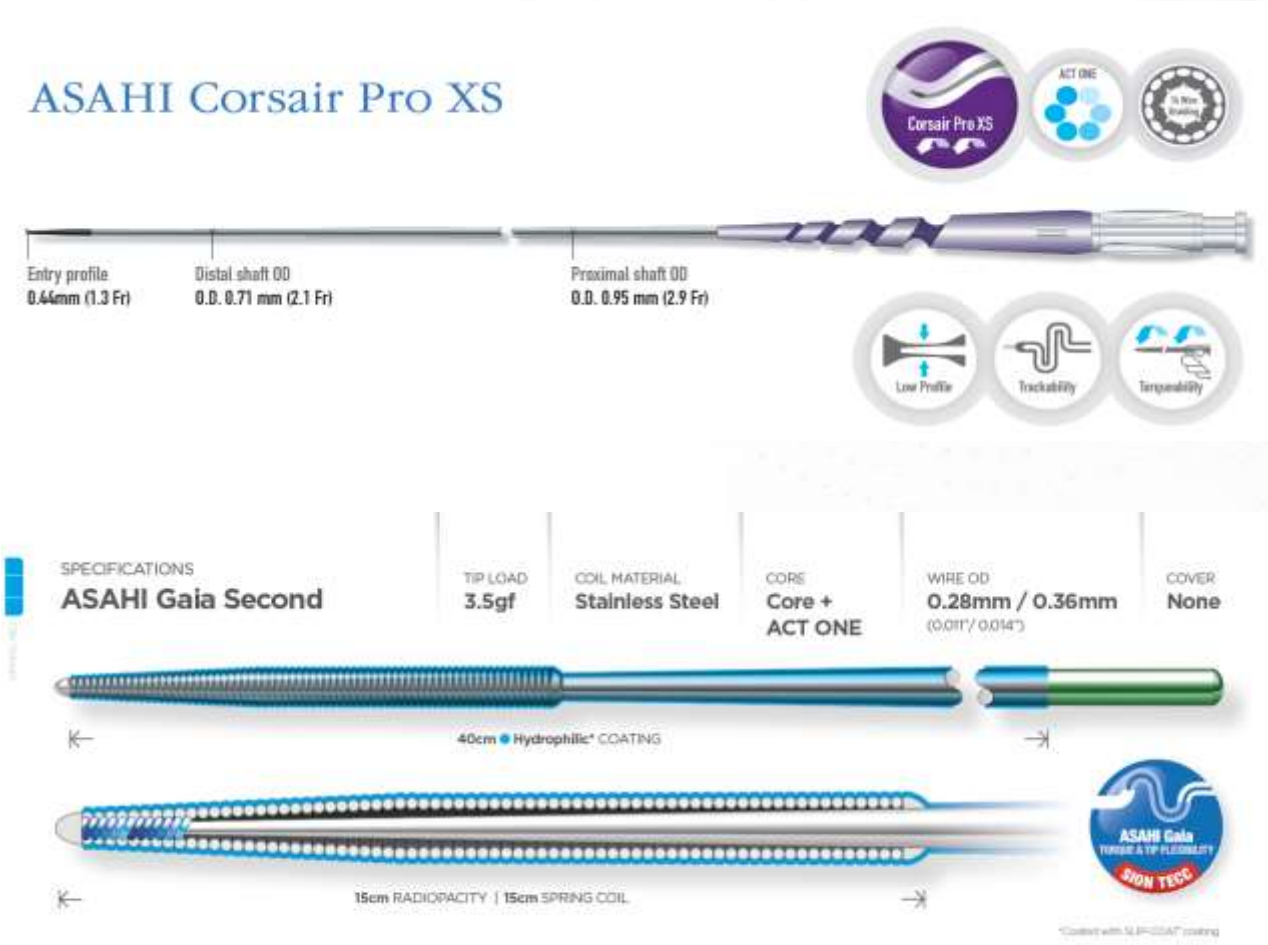
Penetration Wiring



Corsair Pro XS + Miracle 6

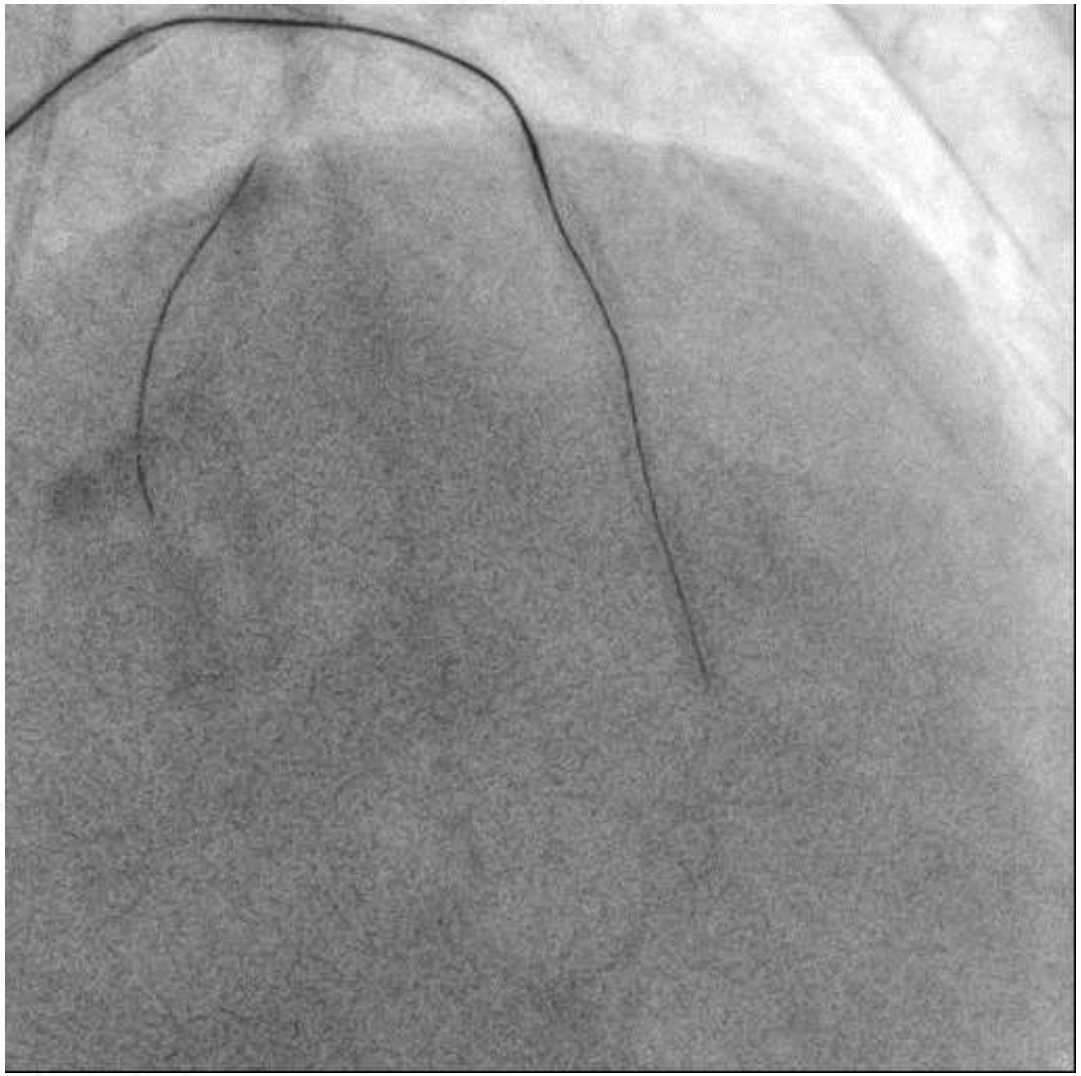
Directional Wiring

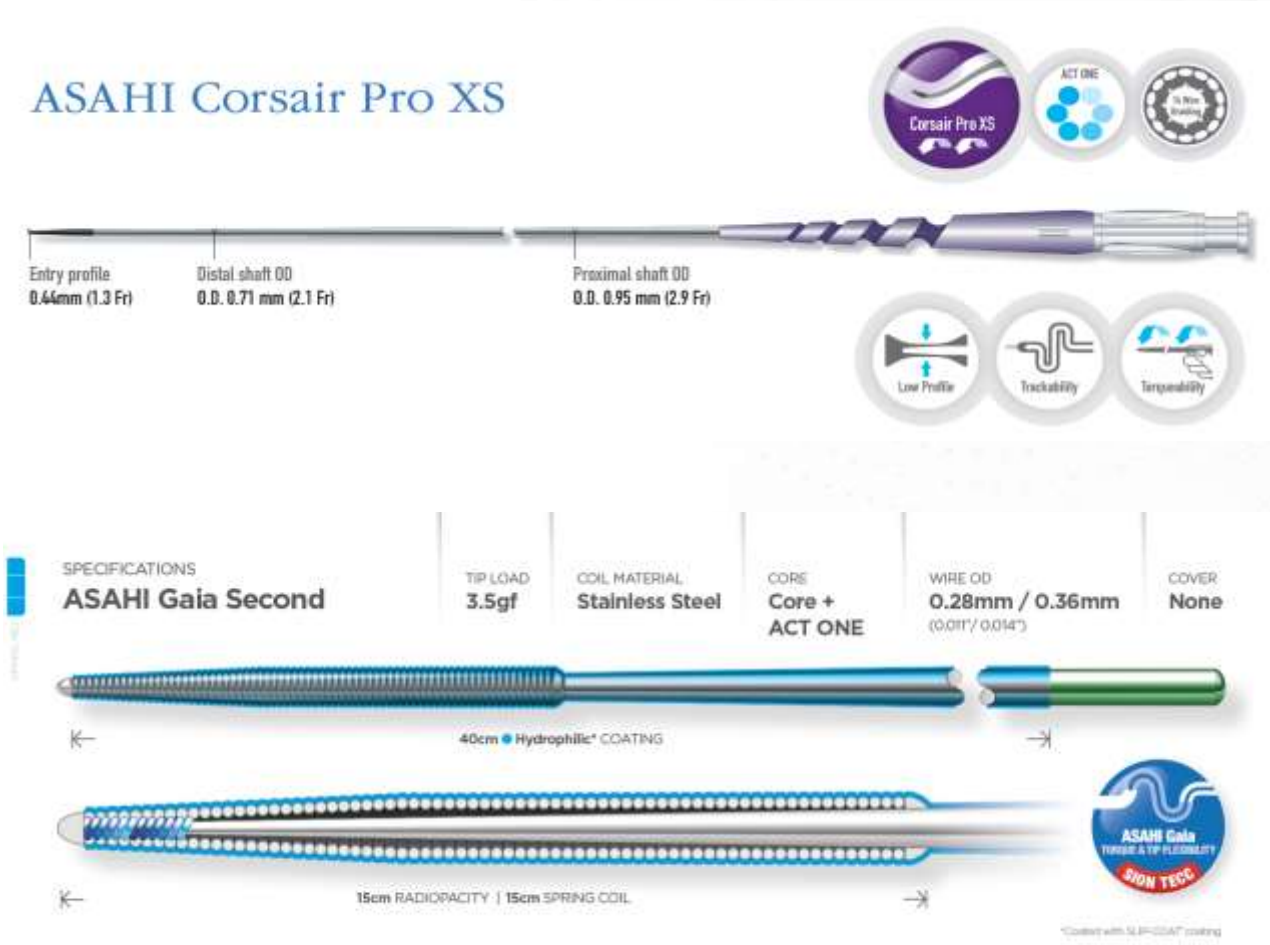




Corsair Pro XS + Gaia2

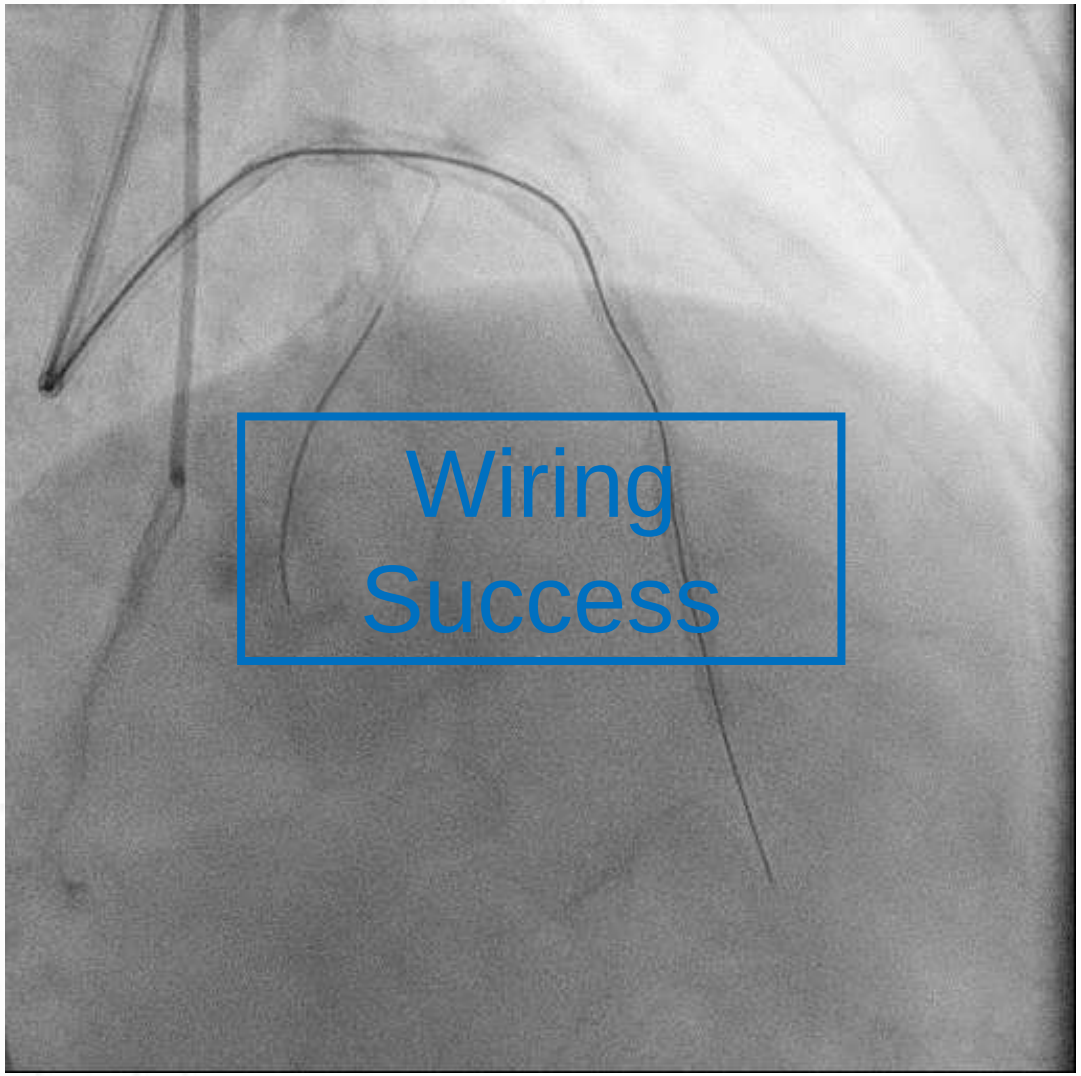
Directional Wiring

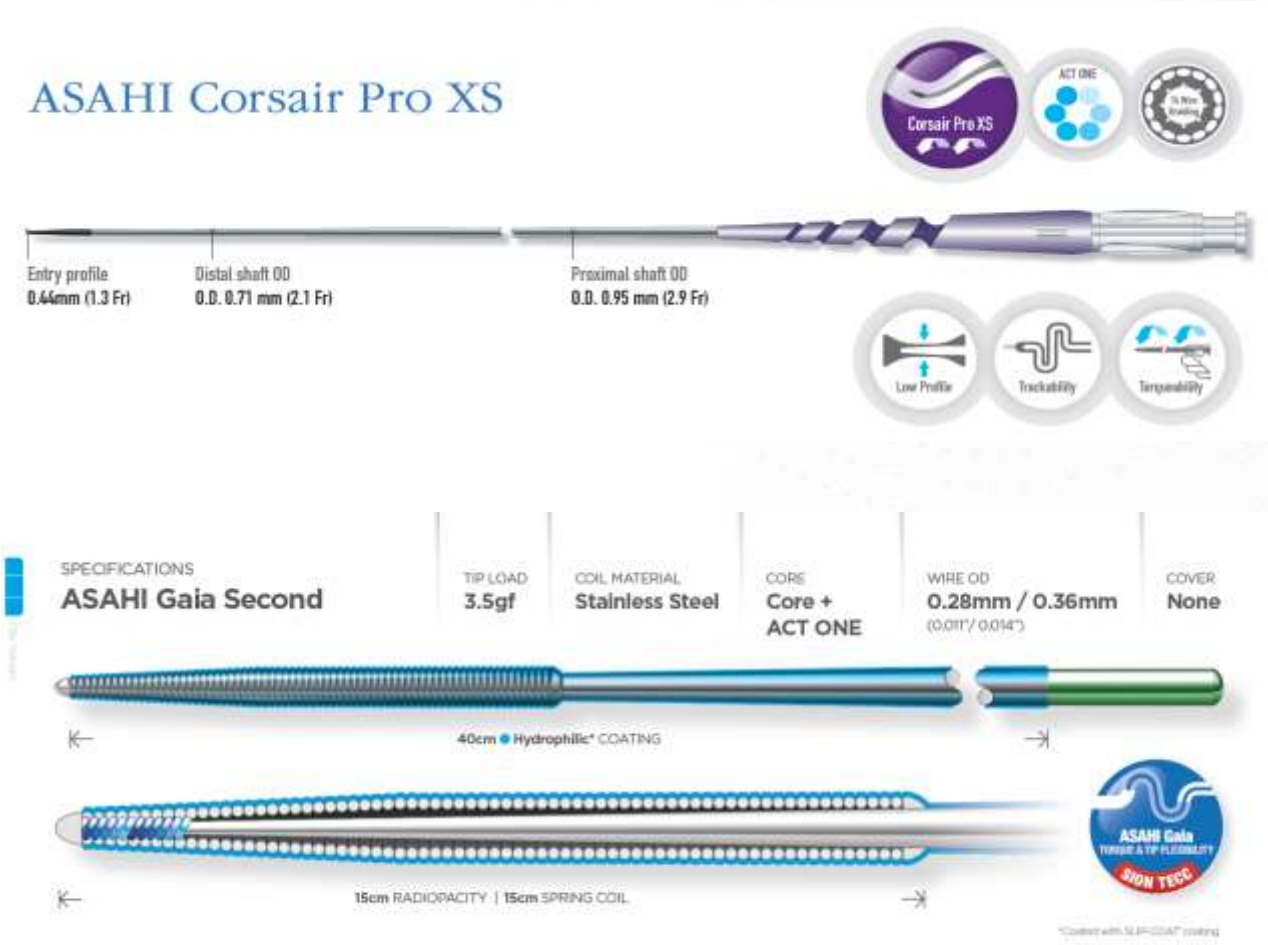




Corsair Pro XS + Gaia2

Directional Wiring

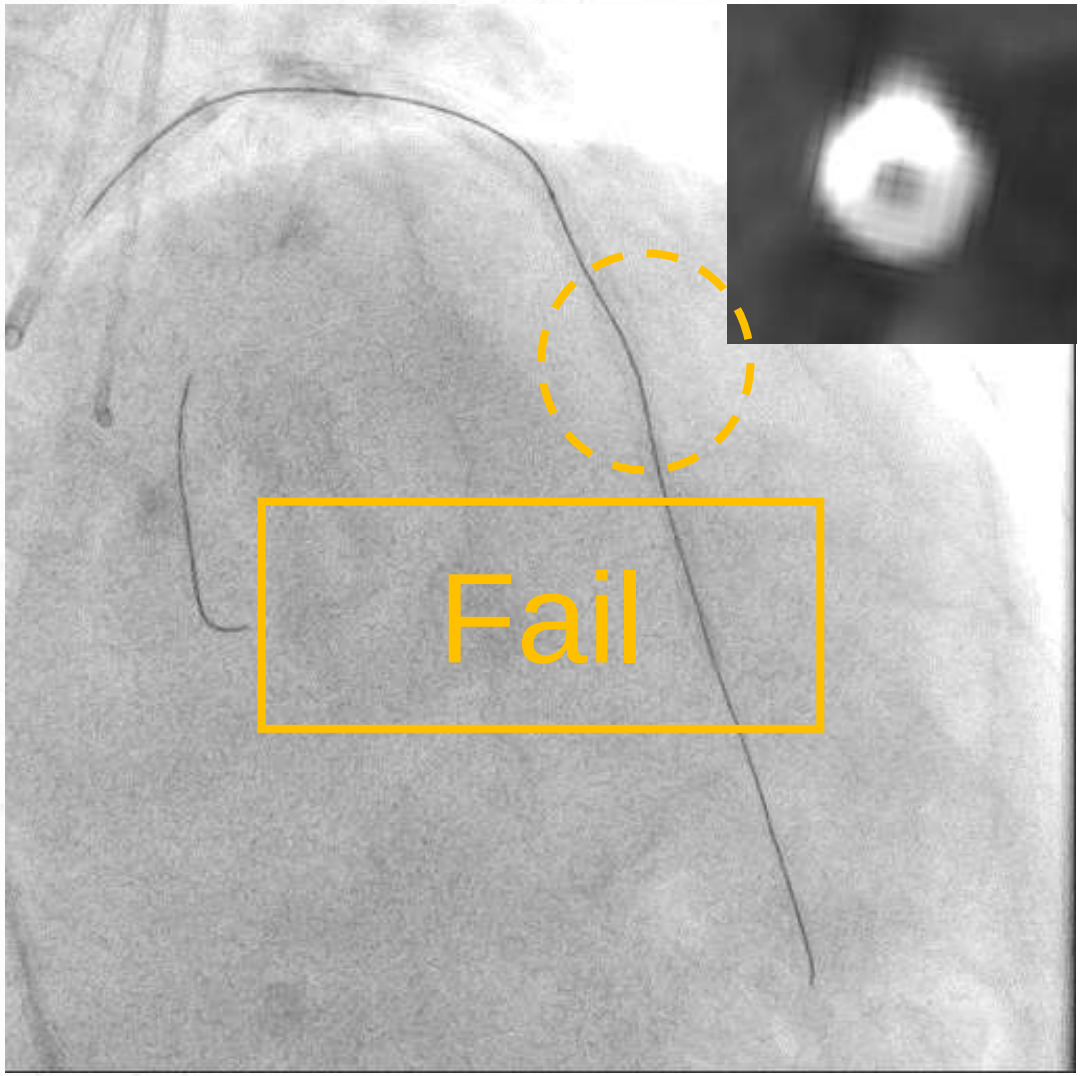




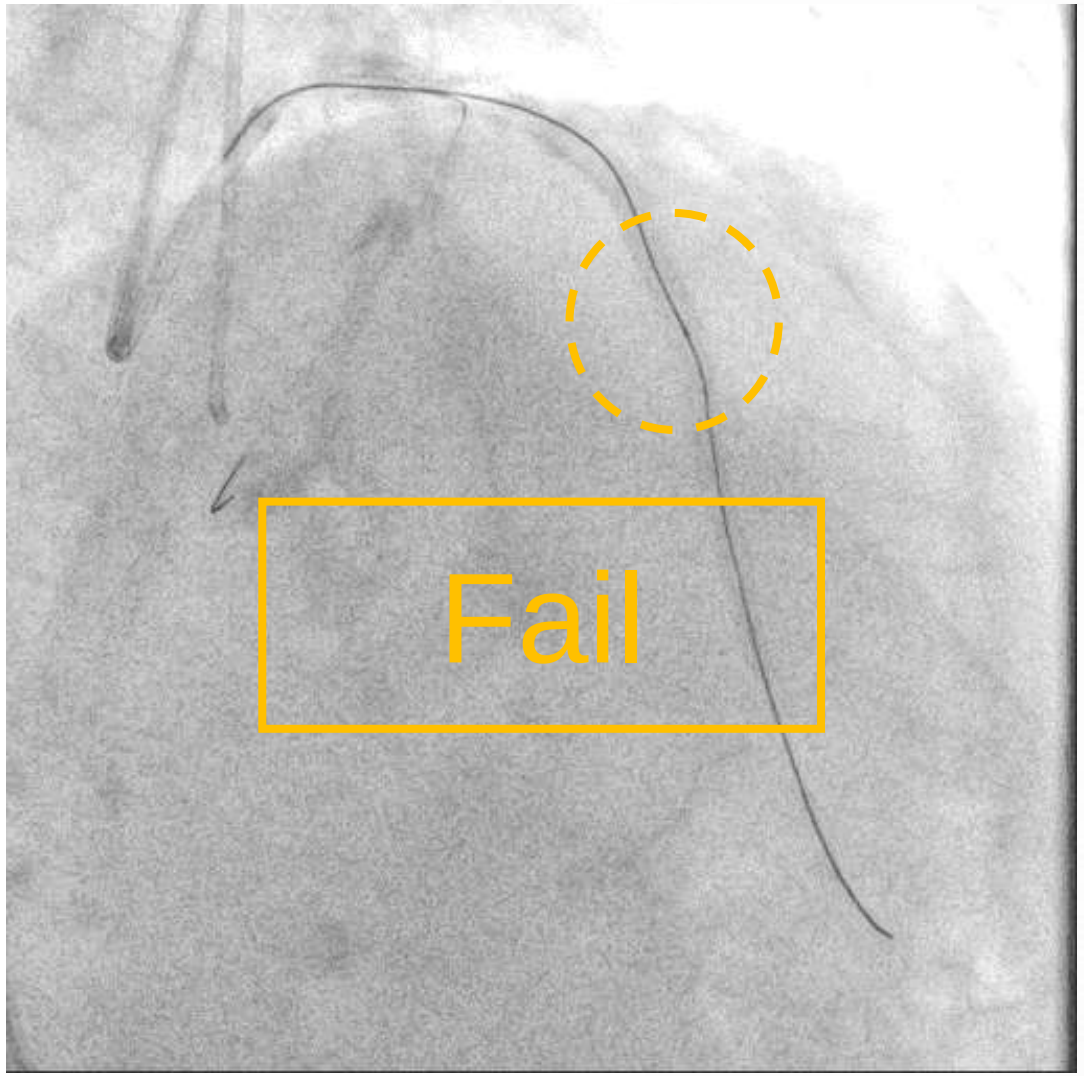
Corsair Pro XS + Gaia2

Step 1. Small Balloon

Doesn't Cross

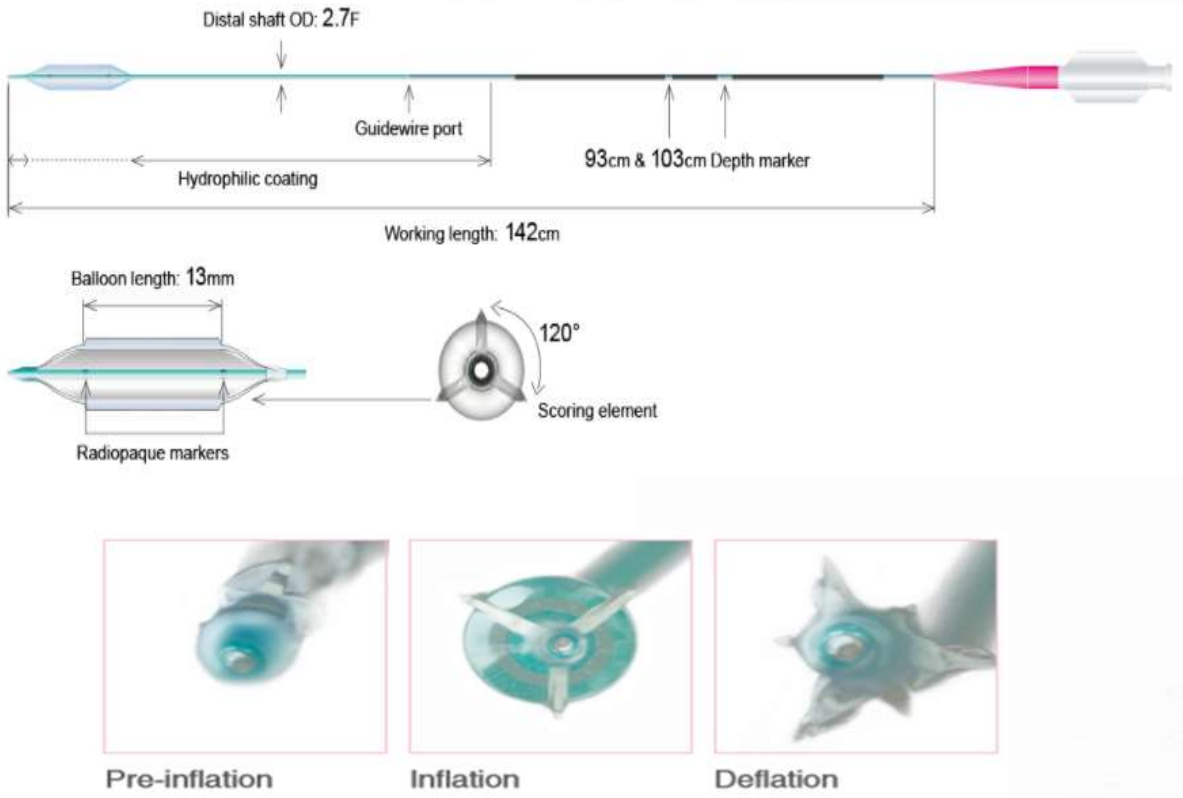


LAXA Balloon 1.3㎜ x 10㎜



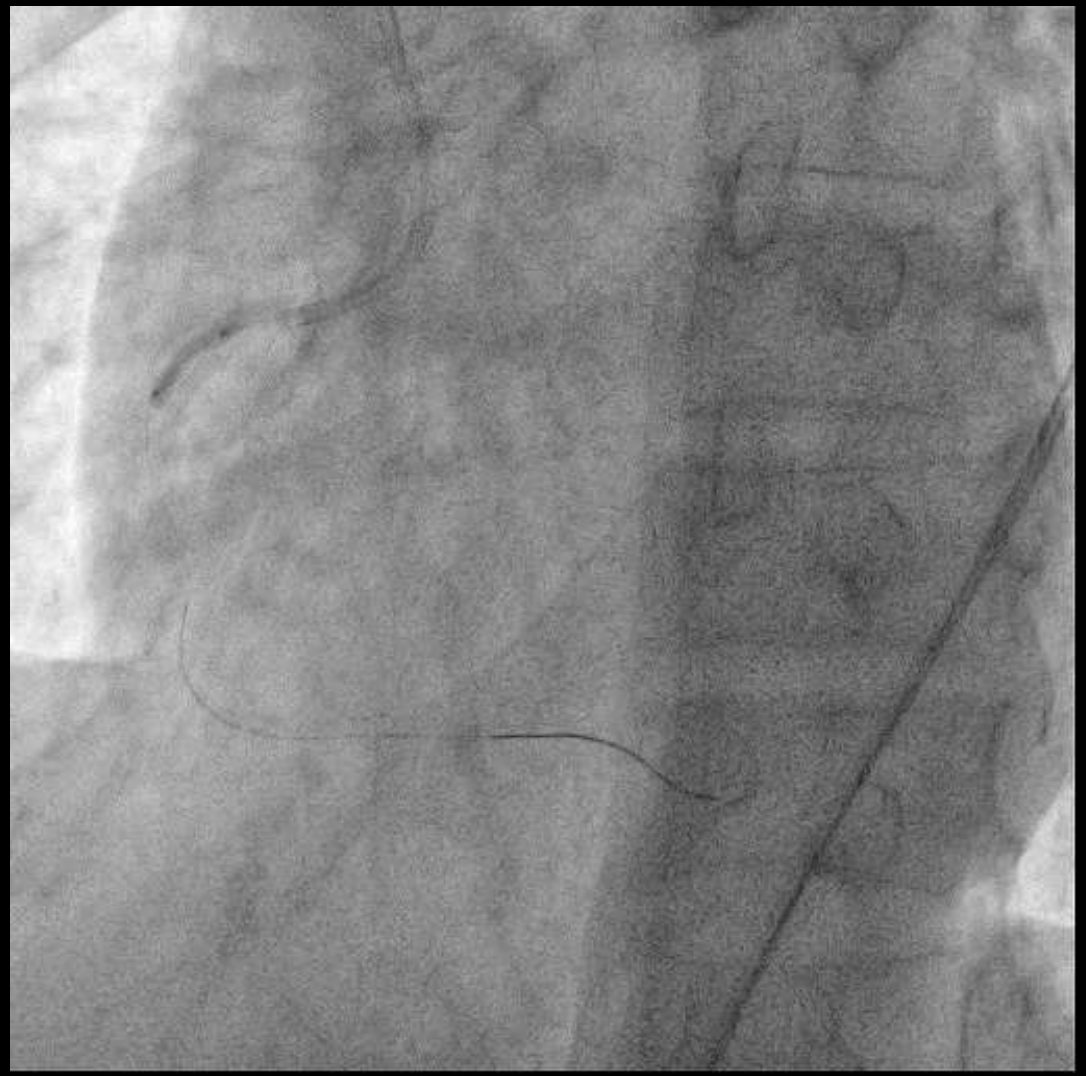
Ikazuchi Balloon 1.0㎜ x 5㎜

Doesn't Cross

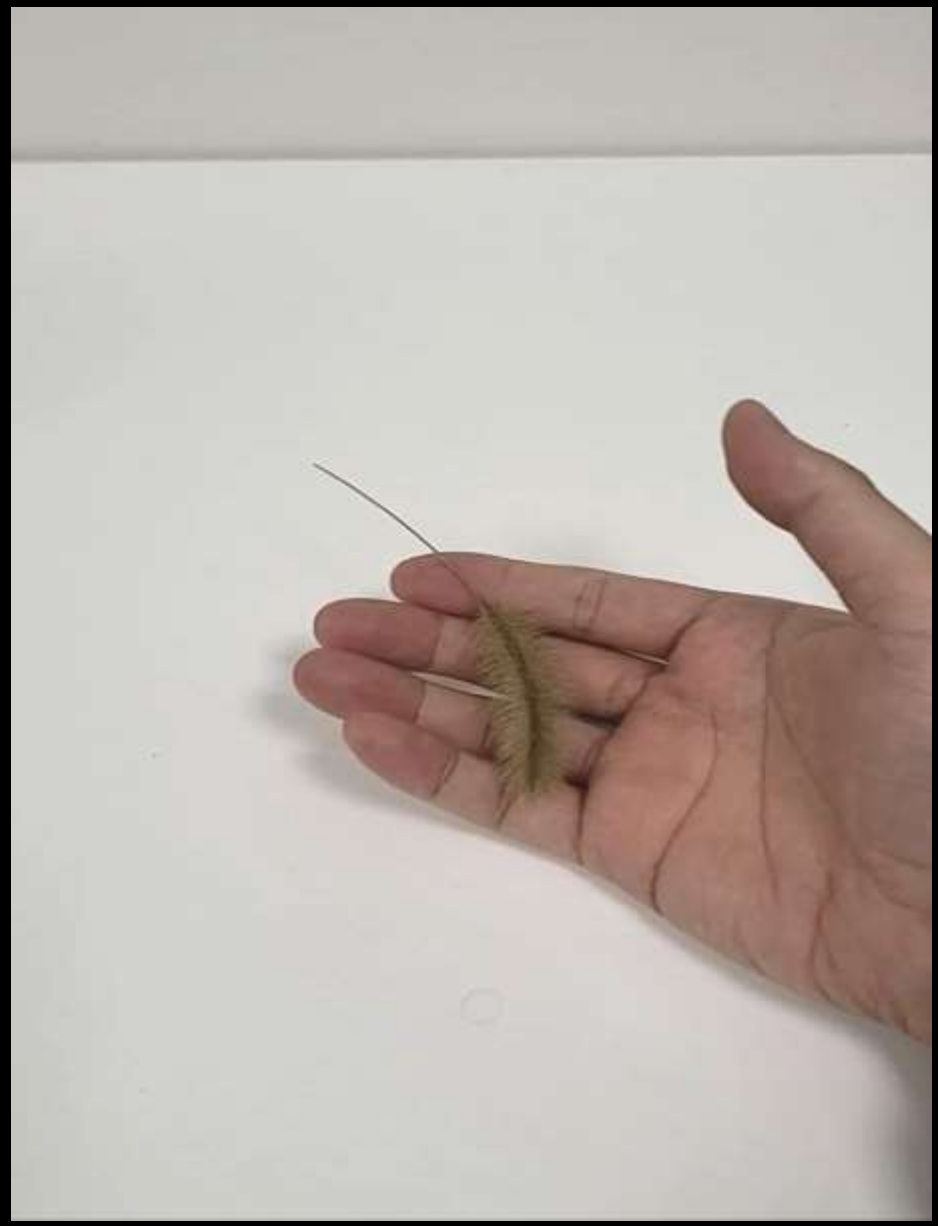


NSE Alpha 2.0㎜ x 13㎜

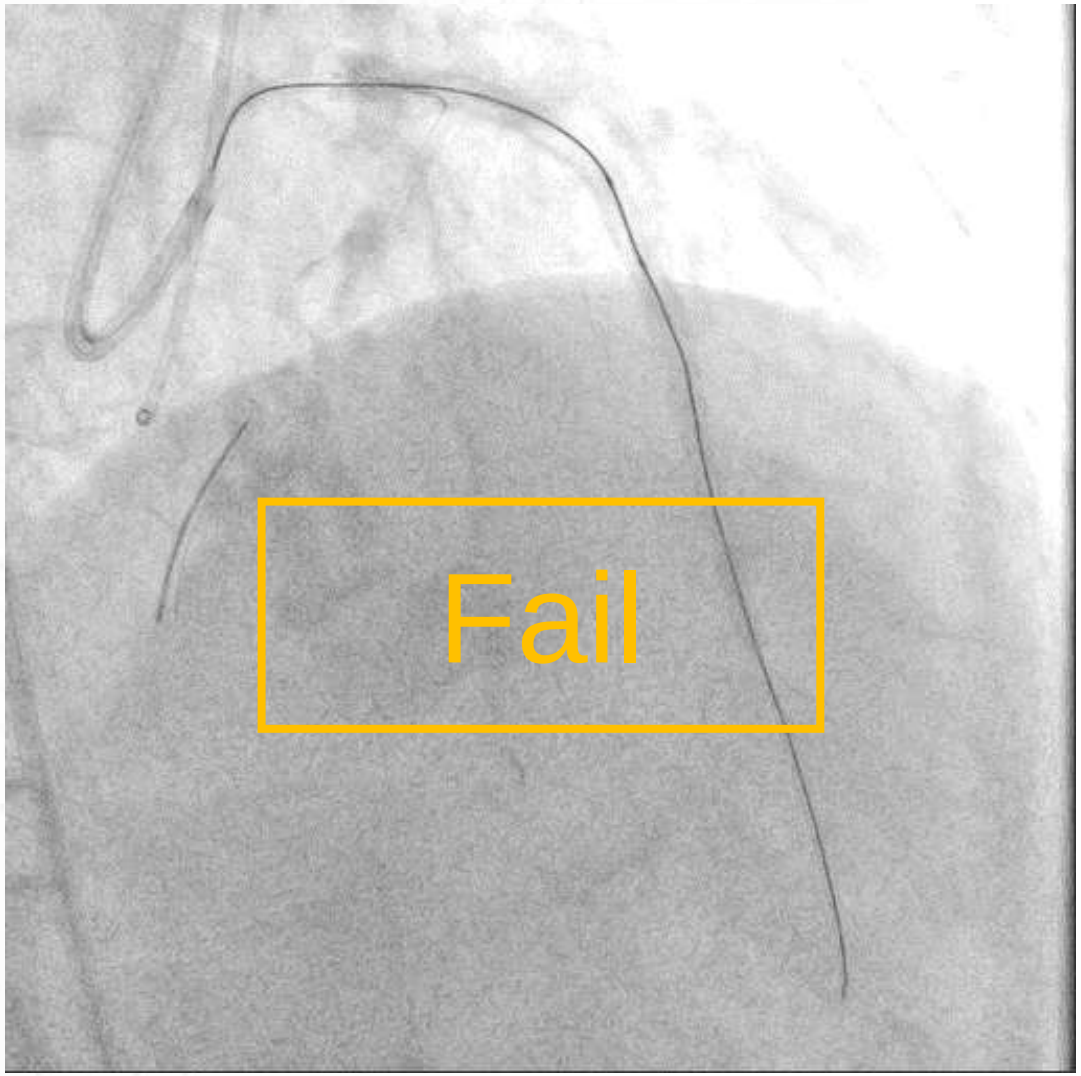
Leopard crawl technique

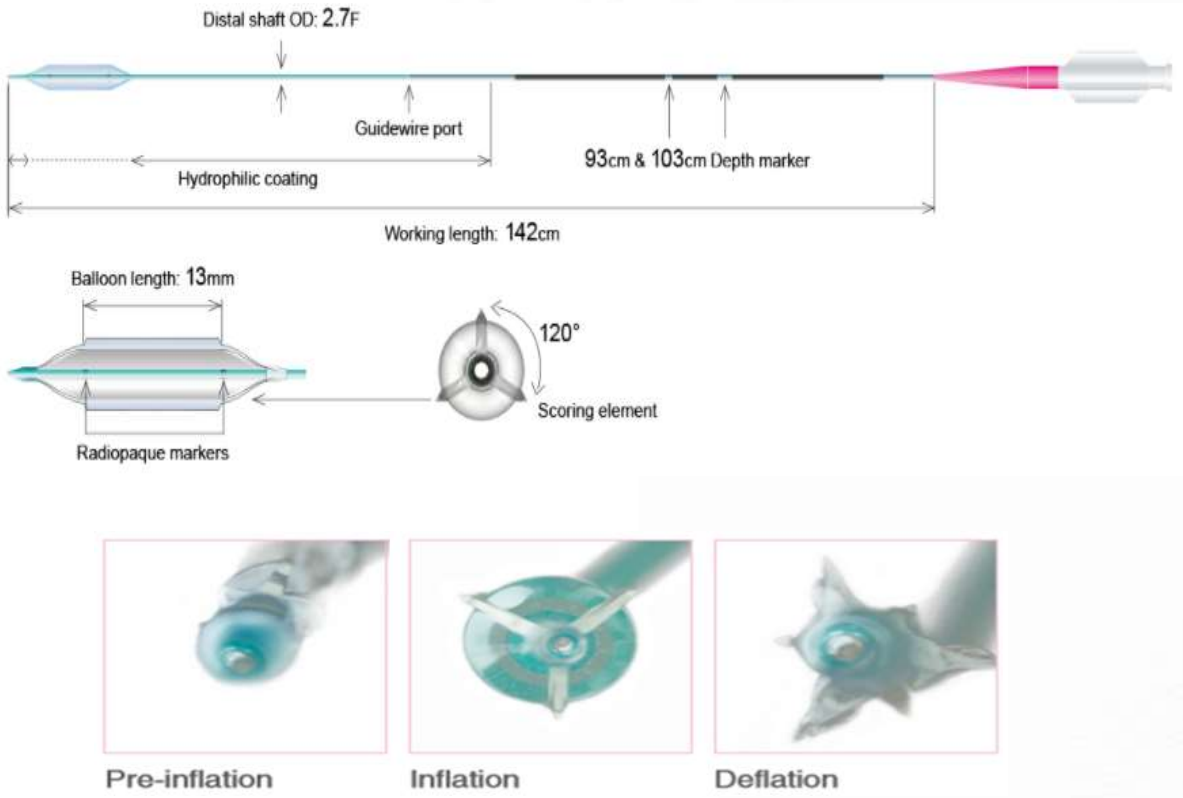


NSE Alpha 2.25 x 13mm



Doesn't Cross

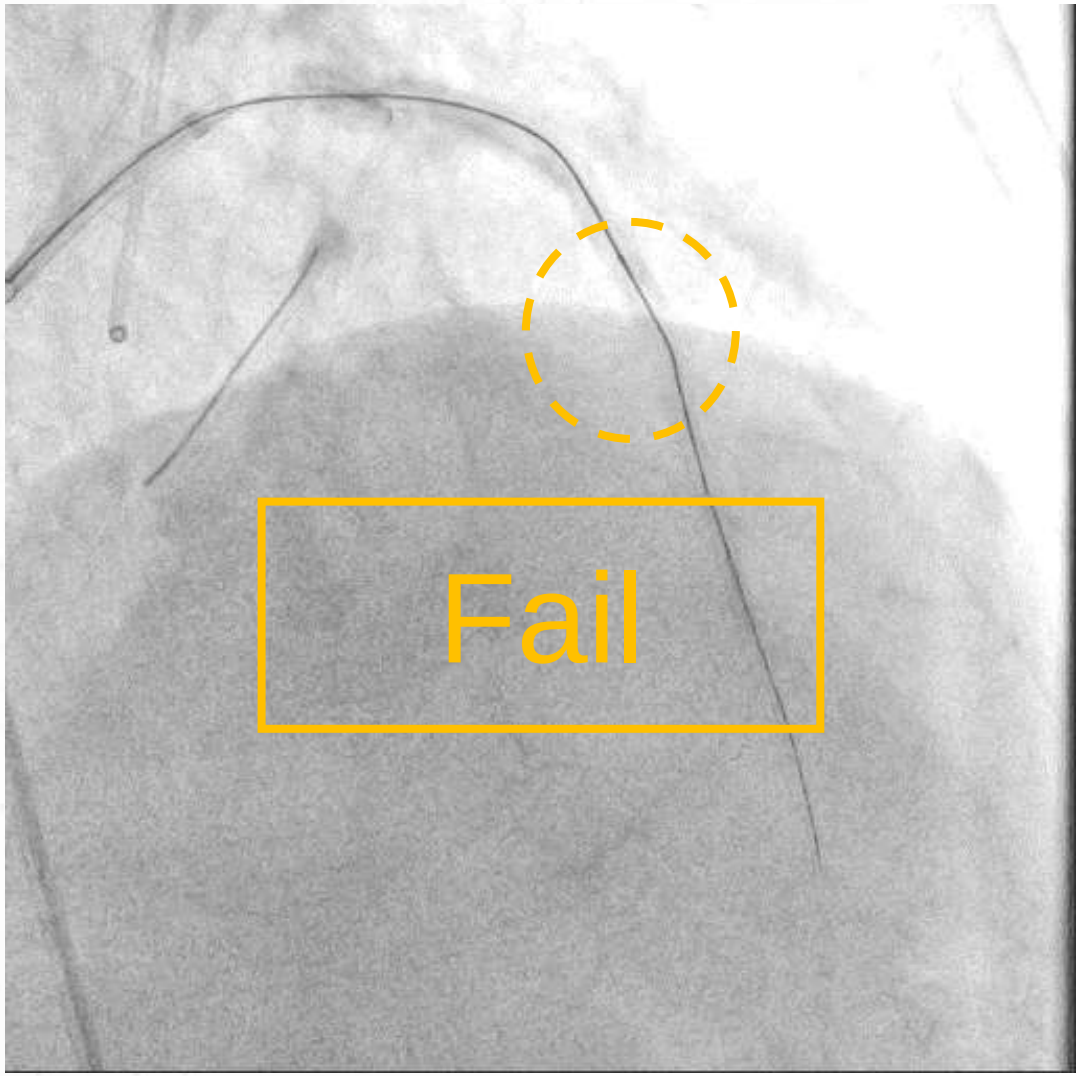




NSE Alpha 2.0㎜ x 13㎜

Step 2. Microcatheter

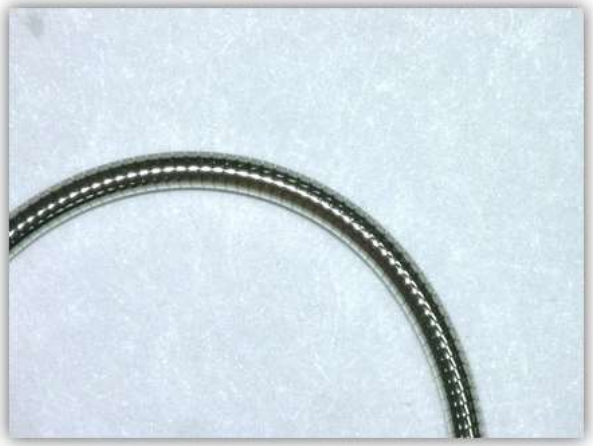
Doesn't Cross



Threader Micro-Dilatation Catheter 1.2mm x 12mm

1.3Fr **1.8Fr**

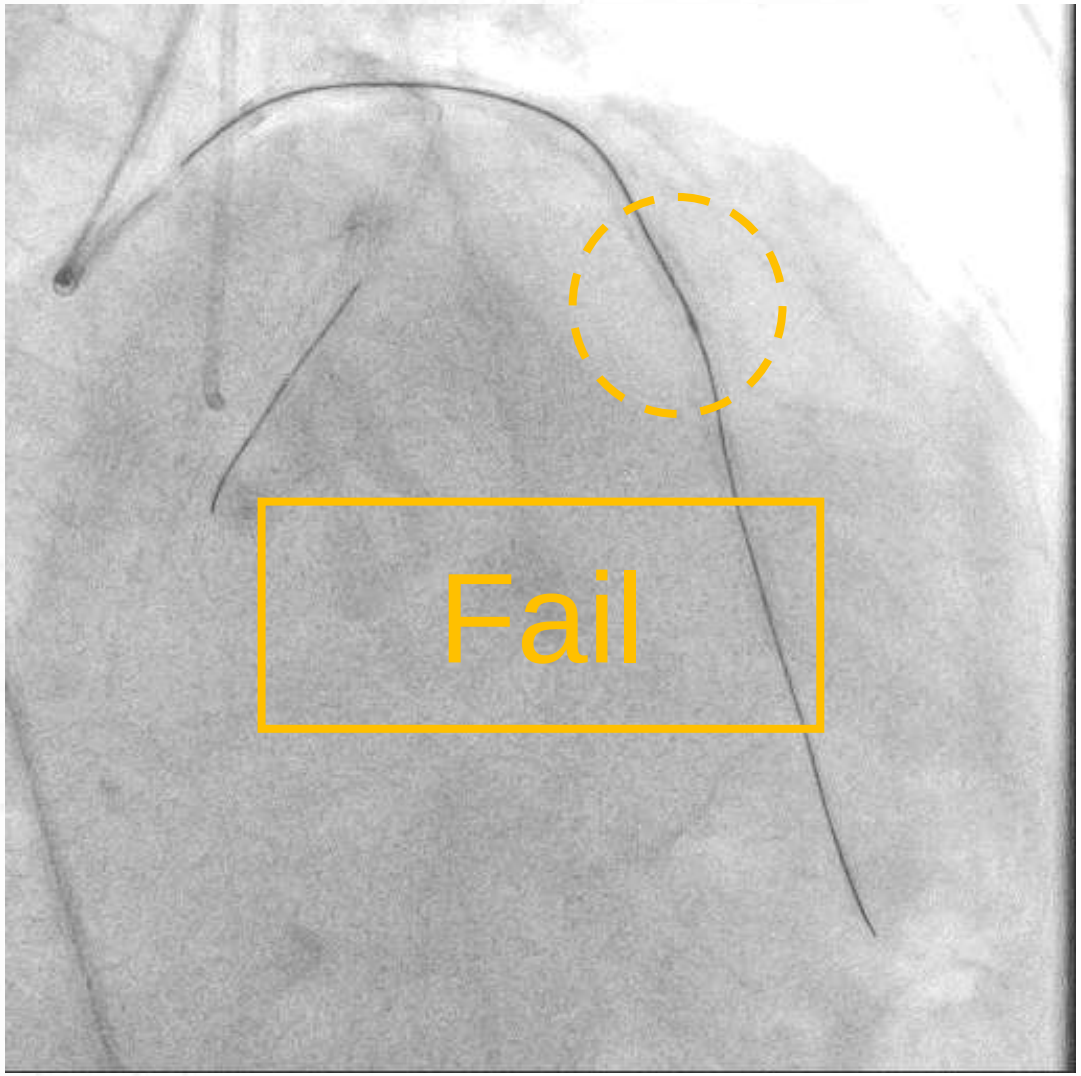
0.017" (0.43 mm) lesion entry profile	Semi-compliant 1.2 mm x 12 balloon	0.024" (0.60 mm) Crossing profile*	Small, thin distal inner and outer shaft • Contributes to smaller profiles • Facilitates lesion crossability	PowerCoil™ technology • For improved deliverability without sacrificing pushability† • Strong guidewire support • Kink resistant	150 cm Length	ZGlide™ Hydrophilic coating

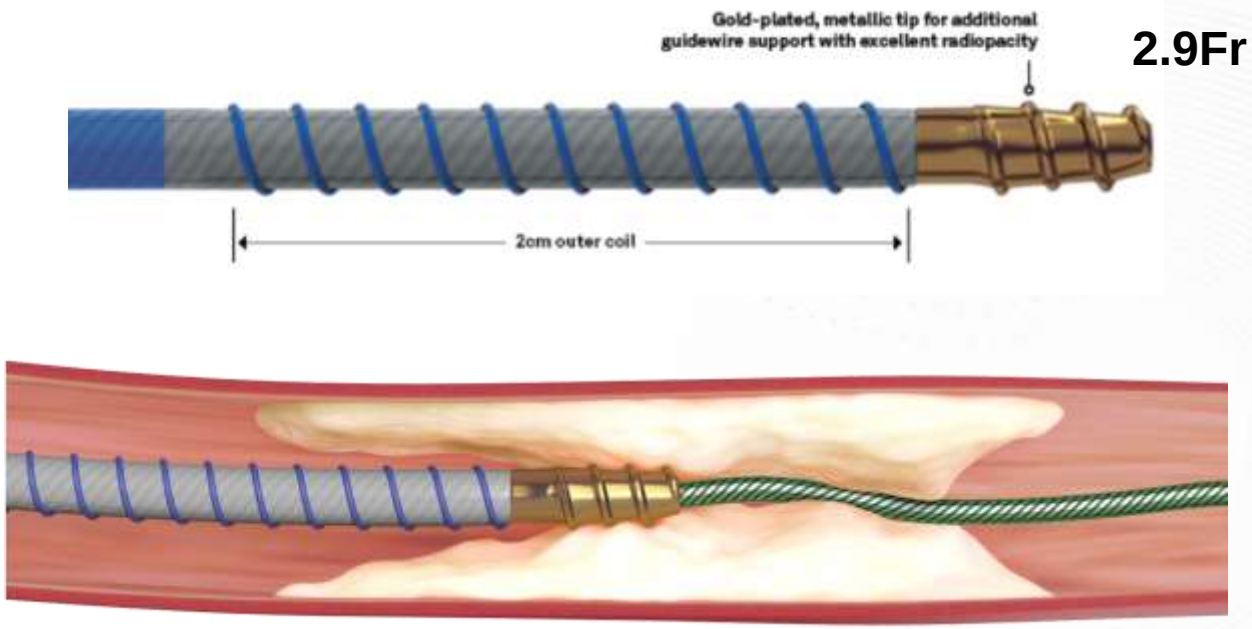


PowerCoil Technology

- Unique shaft composition designed for improved deliverability without sacrificing pushability
- Strong guidewire support
- Kink resistant

Doesn't Cross

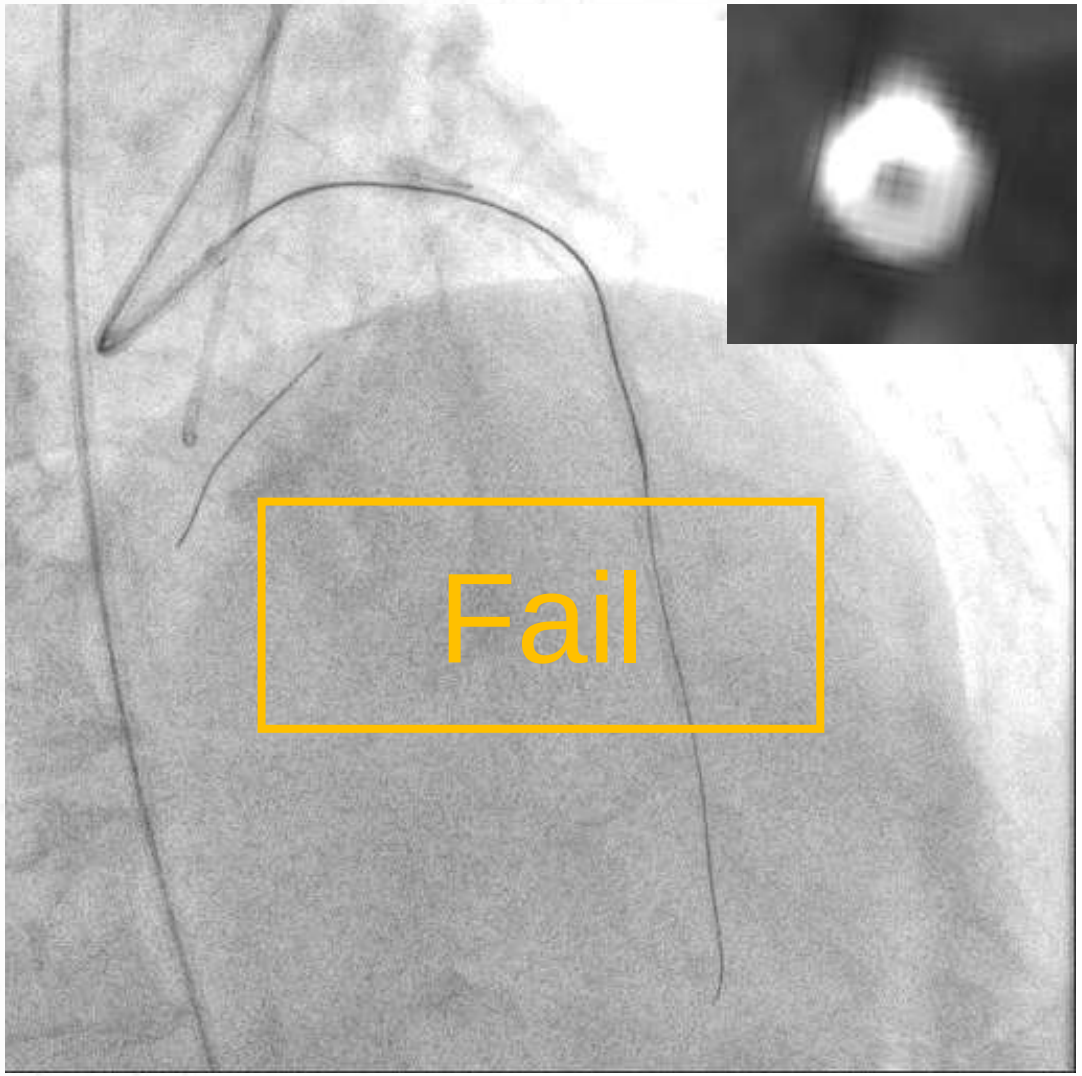




2.9Fr

Turnpike Gold 135cm

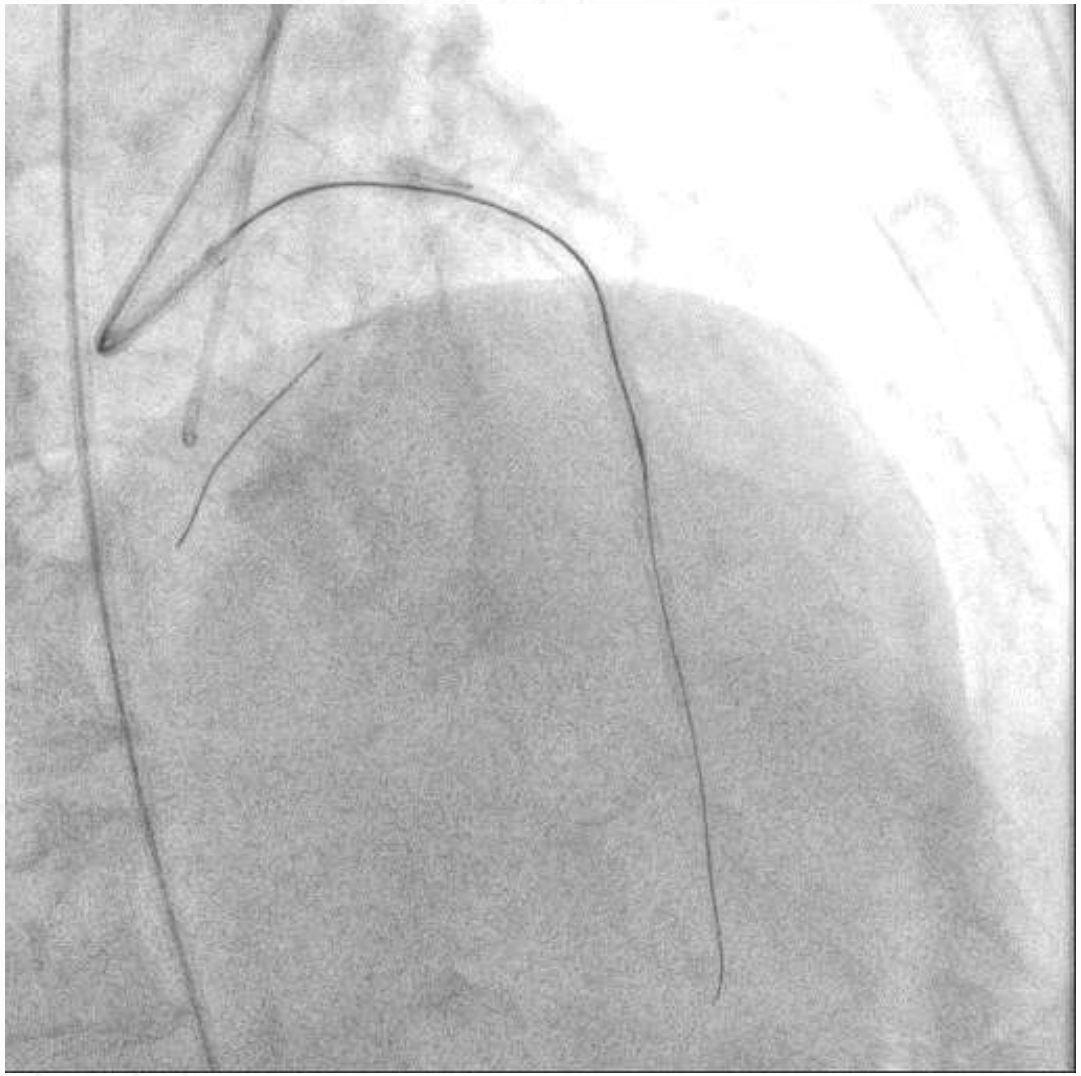
Doesn't Cross



Corsair Pro XS 135cm

Step 3. Anchor Wire , Anchor Balloon

Doesn't Cross



Corsair Pro XS 135cm

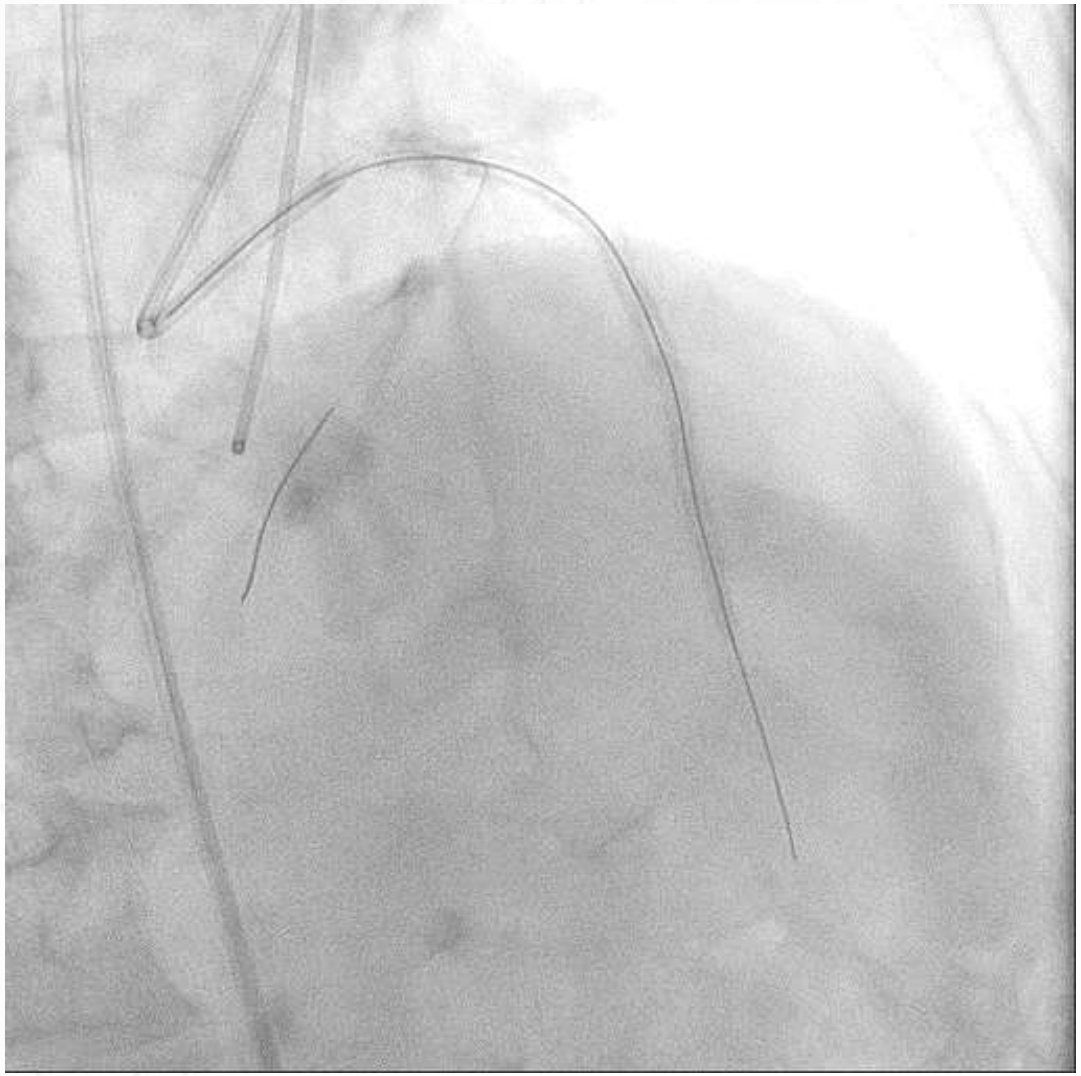
Step 4. Try Rota Wiring

Rota Wiring

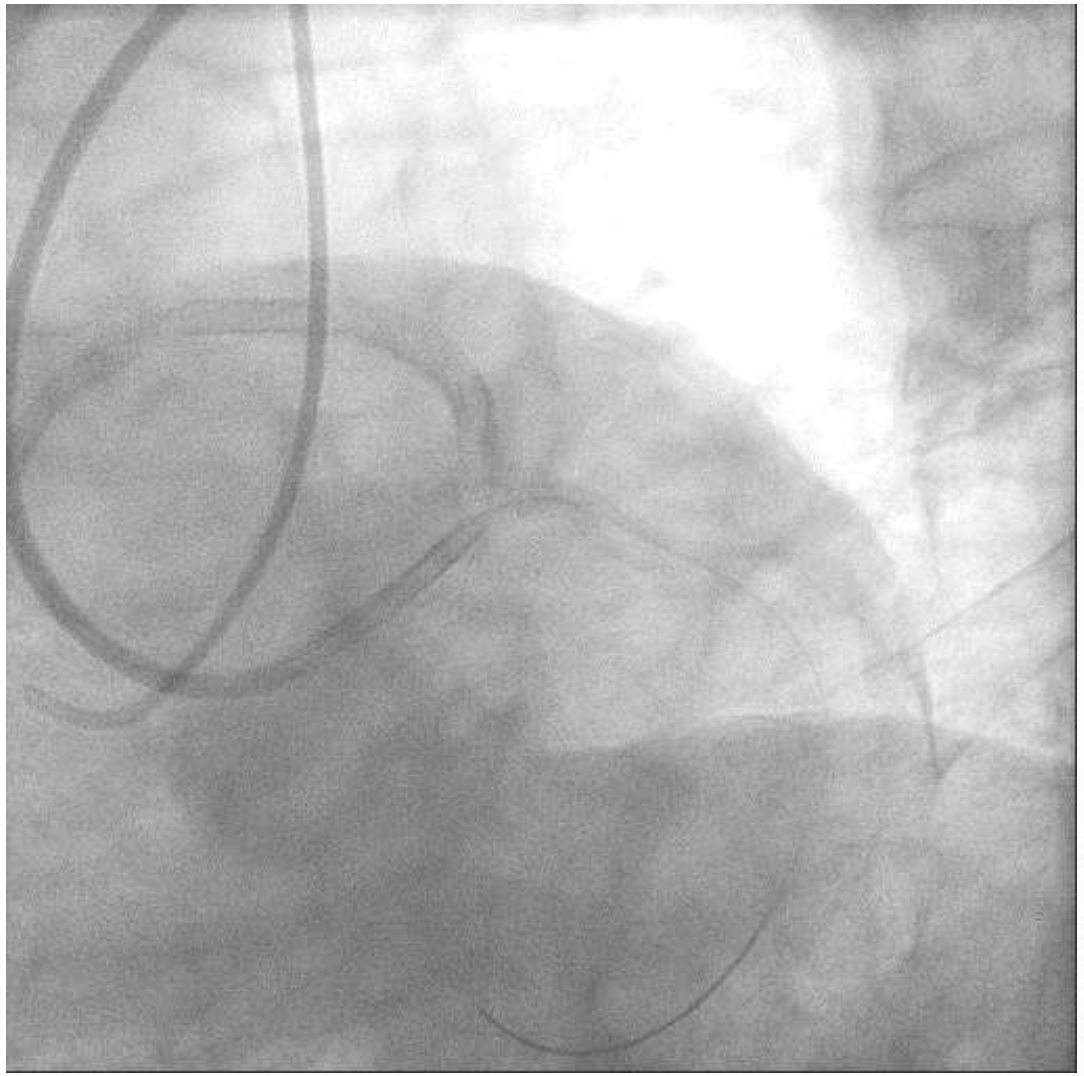
and

Stent Ablation ?

Final Angiography



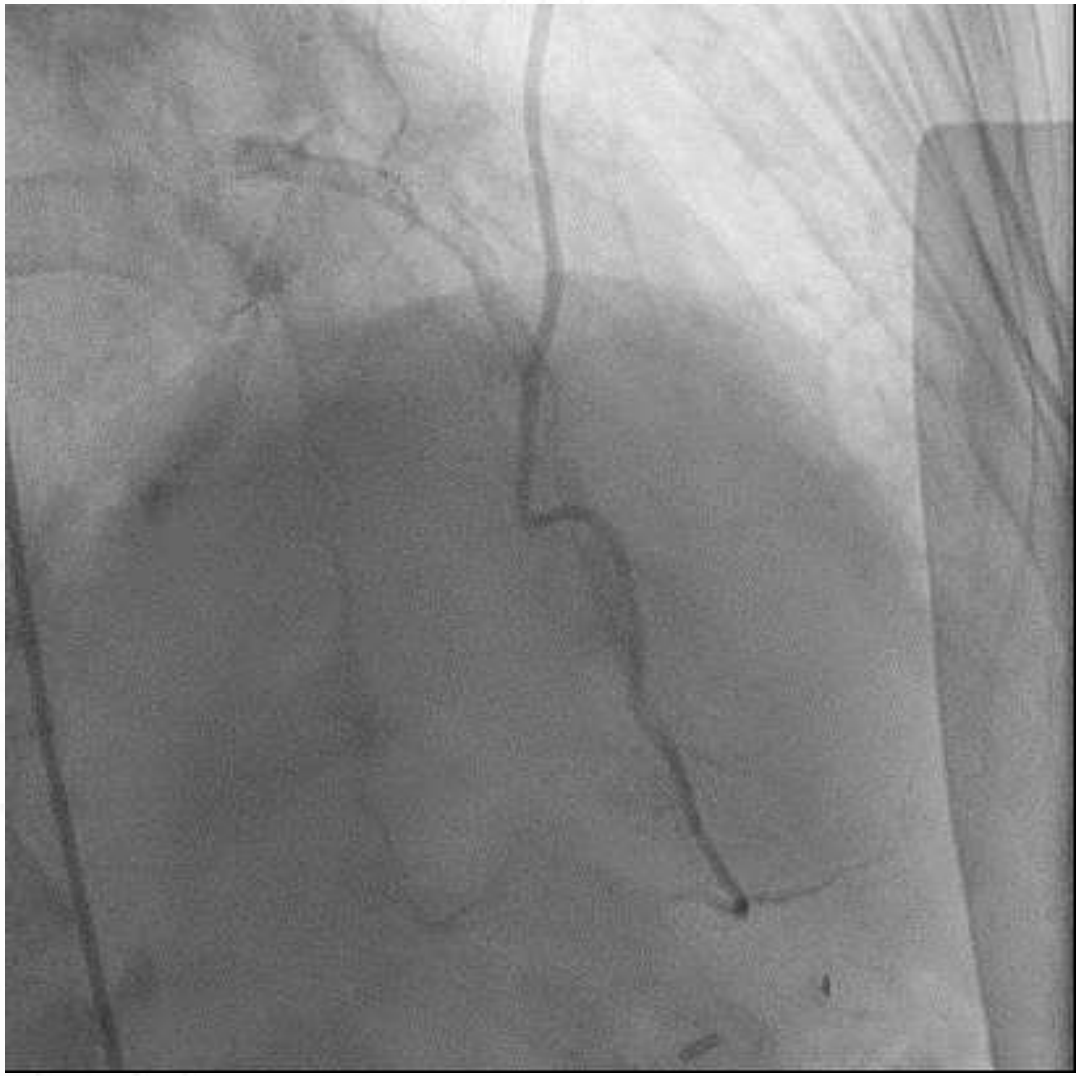
RAO / CRA



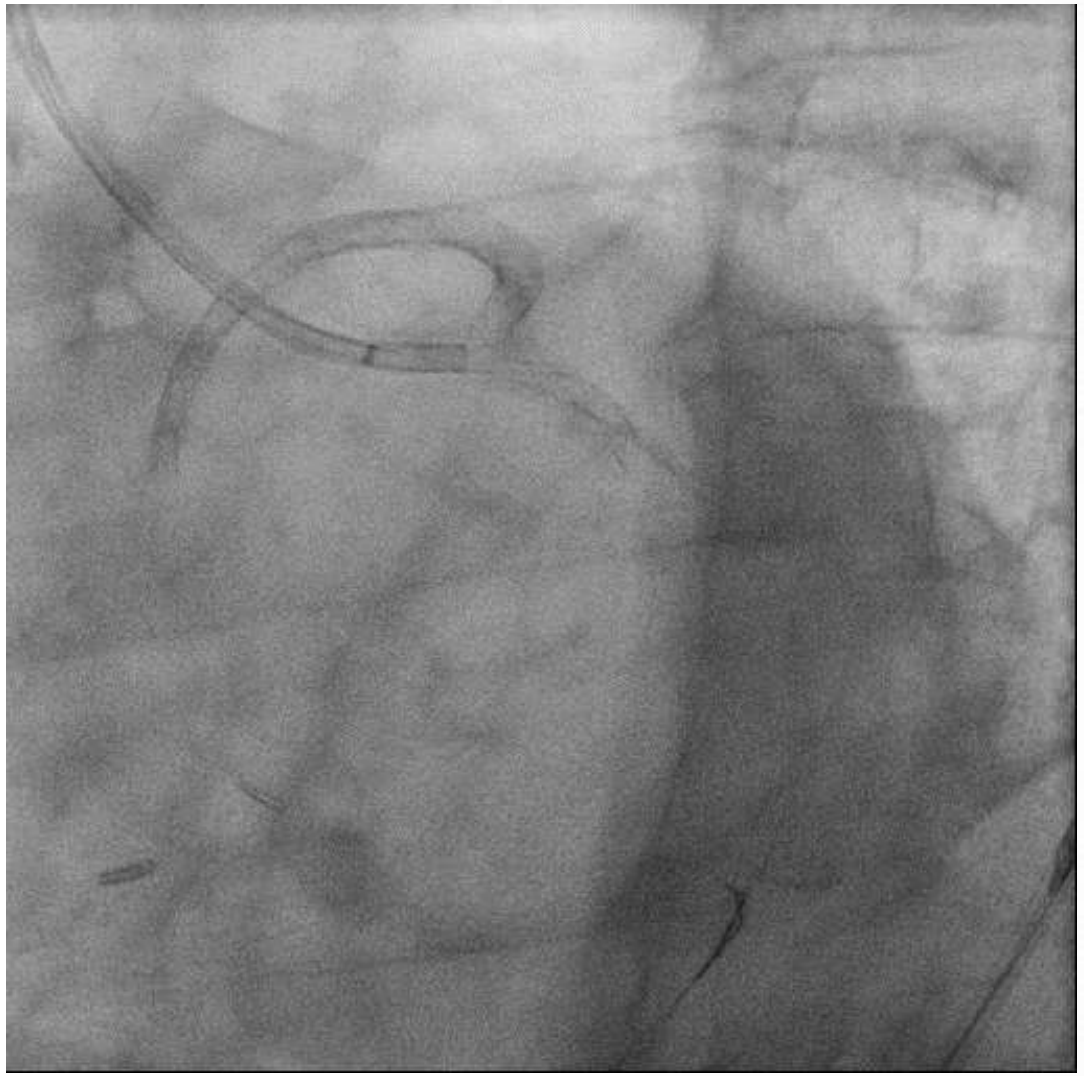
LAO / CAU (Spider View)

After CABG and Lcx PCI

After CABG & Lcx PCI



MID CAB



Lcx PCI

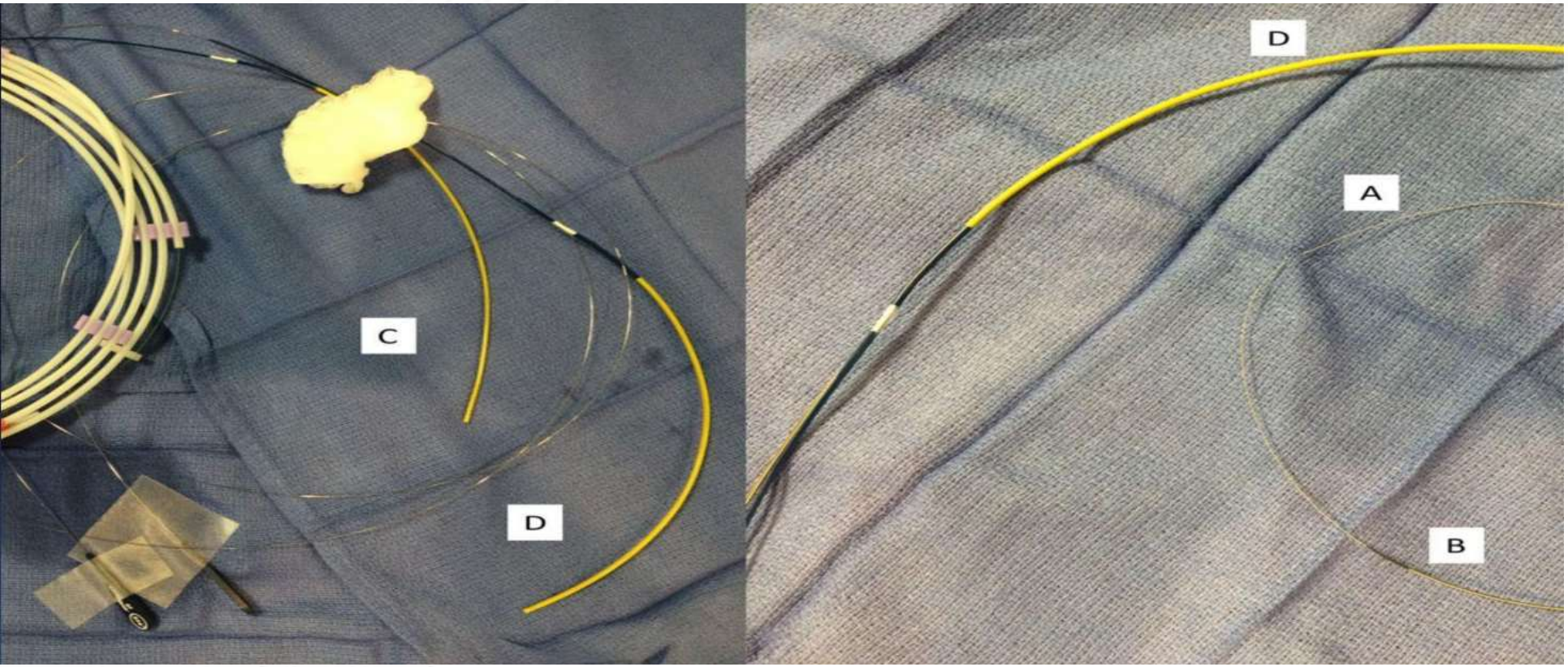
Conclusion

- Femoral Approach
- Guiding Catheter Selection (Shape, Bigger French)
- Long Sheath (Backup Support)
- Guiding Extension (Guidezilla or Guideliner)
- Supportive Wires Exchange (Grand slam)

- Guiding Catheter deep Seating
- Buddy or Anchor Wire & Anchor Balloon

- Add. Grandmother-Mother-Daughter Technique

Grandmother-Mother-Daughter Technique



1. 8Fr Guiding Catheter
2. 8Fr Guideliner
3. 6Fr Guideliner or zilla
4. Microcatheter
5. Wire

Finn, Karmpaliotis et al. Mother–Daughter–Granddaughter Double GuideLiner Technique for Delivering Stents Past Multiple Extreme Angulations. Circ Interv. 2016;9:e003961