PCI in a patient with left main disease
A case that went badly

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Man, 63j.o.

3-vessel CAD
Hx Stent RCA/RIVA/RCX 2010-2015
Tl-Scintigraphy 12/2016: Ischemia of the anterior and inferior wall
No angina
LVEF 55%

CVRF: aHT, HLP, pos. FA

High-grade stenosis ACI right (NASCET 80-90%)

Chronic kidney failure, GFR 57ml/min

Depression
...

...
FFR RIVA

5 Rewiring Lcx + RIM
6 Kissing/“Trissing”
LM – PTCA NC Trek 3.0x20mm, 16ATM

13:19
5000IE Hep

Stent Xience 3.0x23mm, 16ATM

13:29
Followed by
POT with 3.5mm NC
Kissing with 3.0mm Maverick Ballons

13:49
ACT 149sec.
5000IE Heparin

Is one of the wires wrong?
- LAD Wire is pulled out
- Rewiring does not work
LAD

Rewiring of LAD
PTCA with Maverick 3.0mm

LCX

PTCA with Maverick 3.0mm
What did I learn from this case

Don’t read too many books

Be generous with Heparin

Look at time

Use a simple strategy (Culotte is not the best anyways)

Reverse TAP à la Mainz