

An acute need for a CTO skill

„...super power knuckle...“

Konstantin Schwarz MD PhD FRCP
Sankt Pölten University Hospital, Austria



68y female

NSTEMI (recurrent resting CP and hsTnT 600)

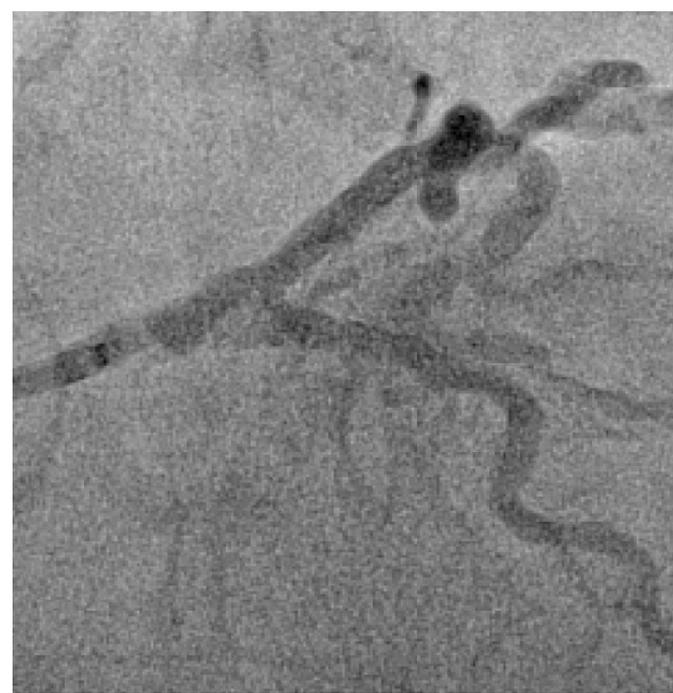
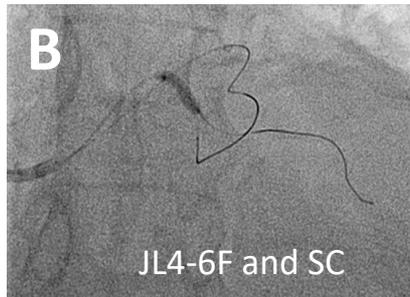
PMH:

Active NHL incl pleura and spleen, several recent pleural drains, first round chemo

LV minor LVSD

Hb 12, GFR 55, CRP 19

A colleagues starts the case Friday pm...



Culprit: ostial CX – TIMI 2

Plan: Predil/Scoring/DEB,
bail out provisional CX-LM



Change of guide/GEC...difficulty
to deliver the NC -->

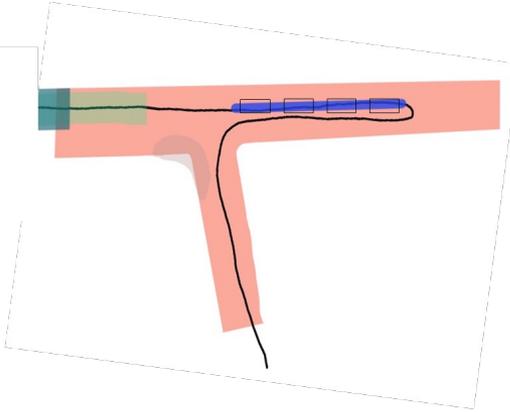
Calls me to join the case and
deliver NC and hand back



Dissected CX > plan
provisional stent

Colleague goes with stent too quickly in ...

1. Slow down!!!
2. "Must be problem with wire..."

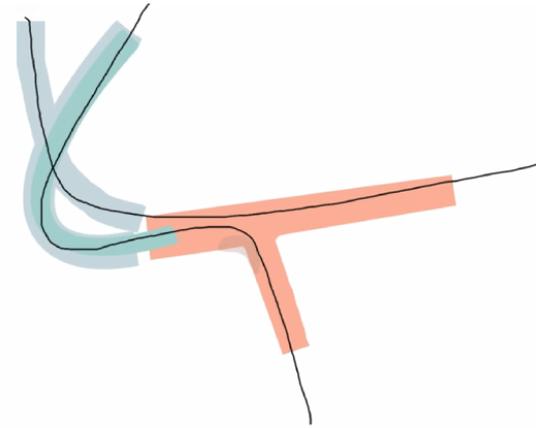
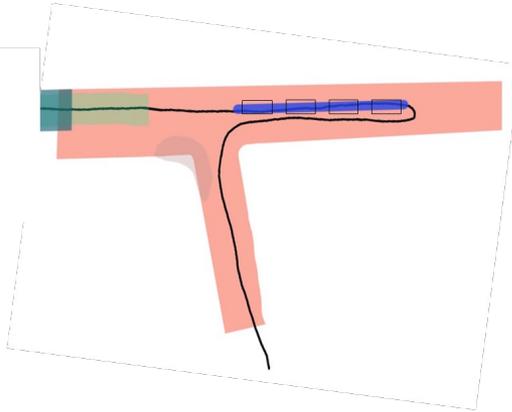


Colleague goes with stent to quickly in ...

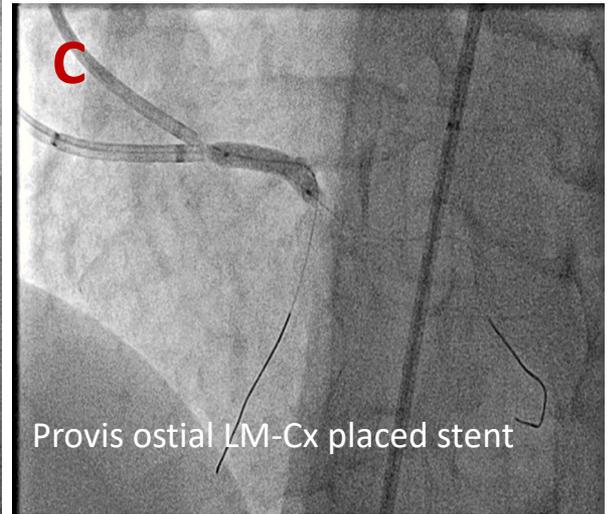
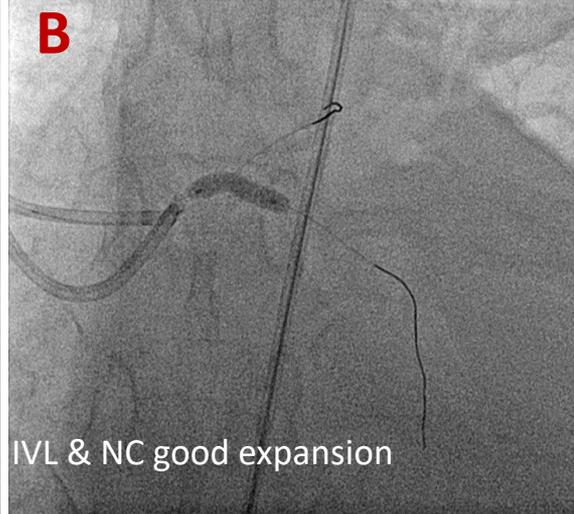
1. Slow down!!!
2. "Must be problem with wire..."

I take over and put a ping pong guide 7F ("LM Bifurcation & may need IVL and difficult delivery...") and new wire alongside damaged one into Cx (not to lose position in dissection)

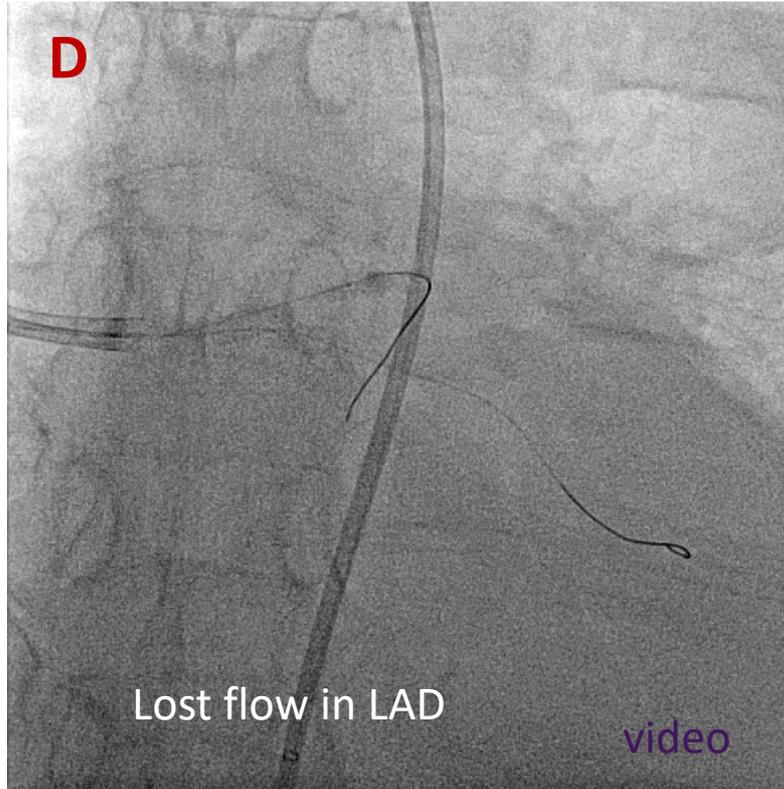
3. Old CX wire removed - has a kink on shaft
4. Then use previous 6F guide and new safety work horse wire into LAD



...next

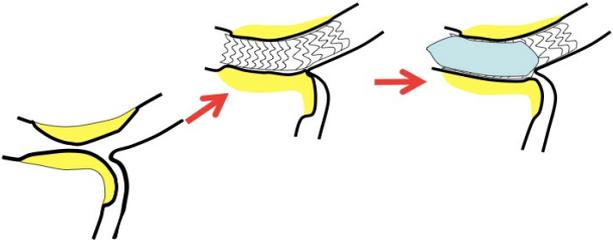


....patient gets chest pain, anteroseptal STE, sweaty...

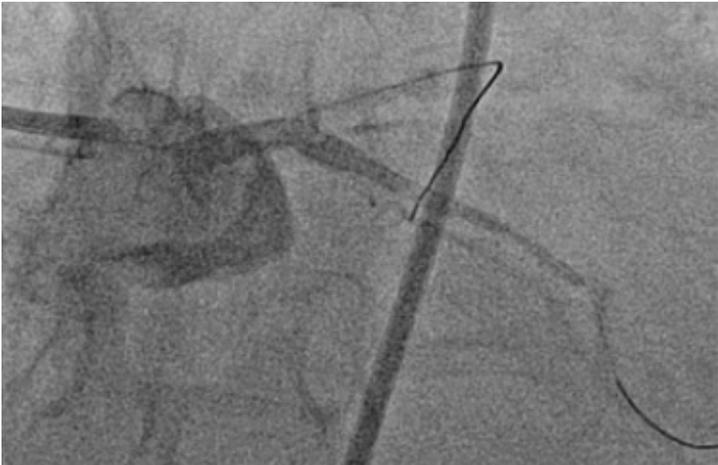


Lost flow in LAD

POT
*hoping would restore flow in SB and
make rewiring easier
("shift carina")*

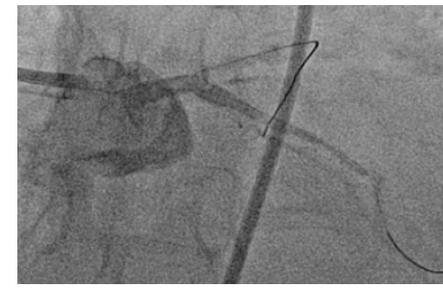
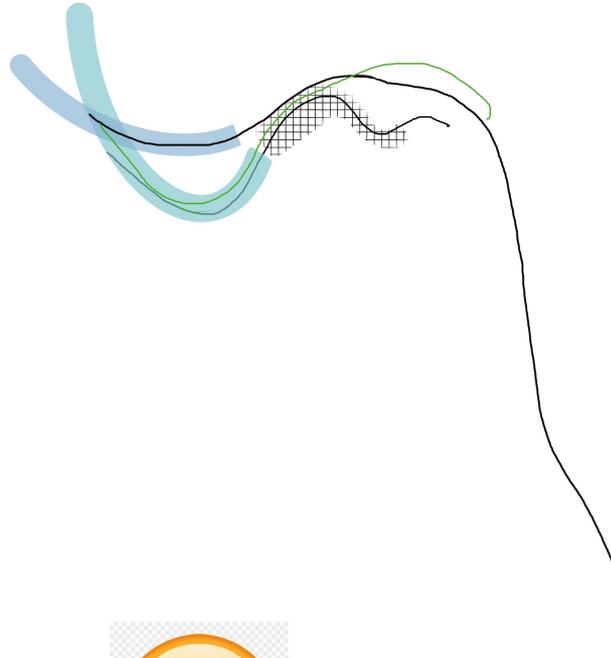


PCR Education
Lefevre



Lost flow in LAD

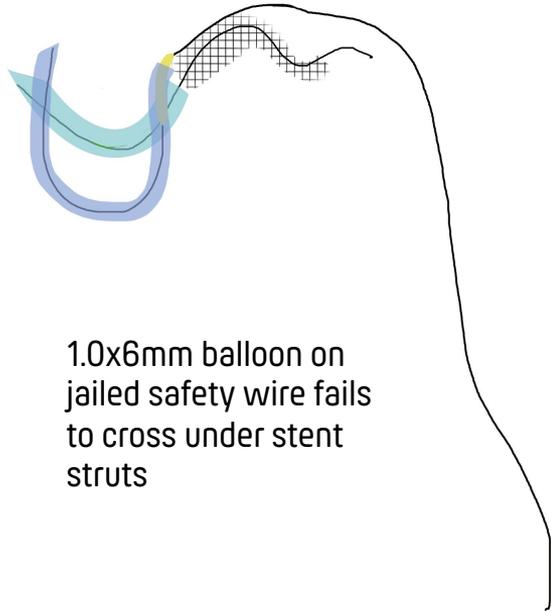
Sion blue and sion black wires fly easily into prox LAD through LM stent struts but get stuck 2-3cm beyond- forming "knuckle" 5mm apart from jailed wire



Subintimal space hematoma likely!

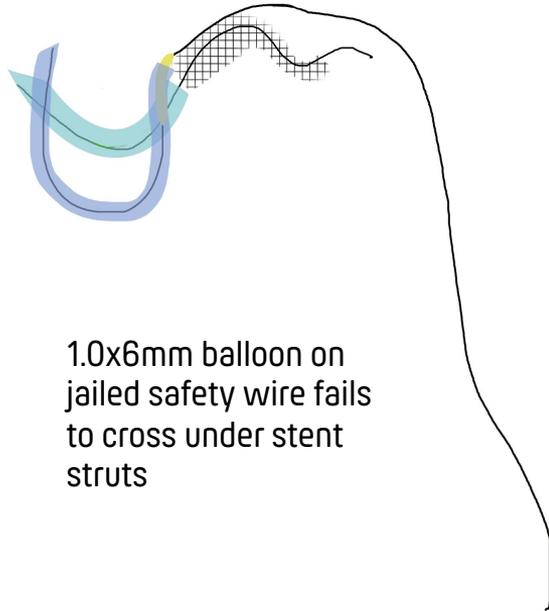
Proximal true lumen entrance blocked away by stent?



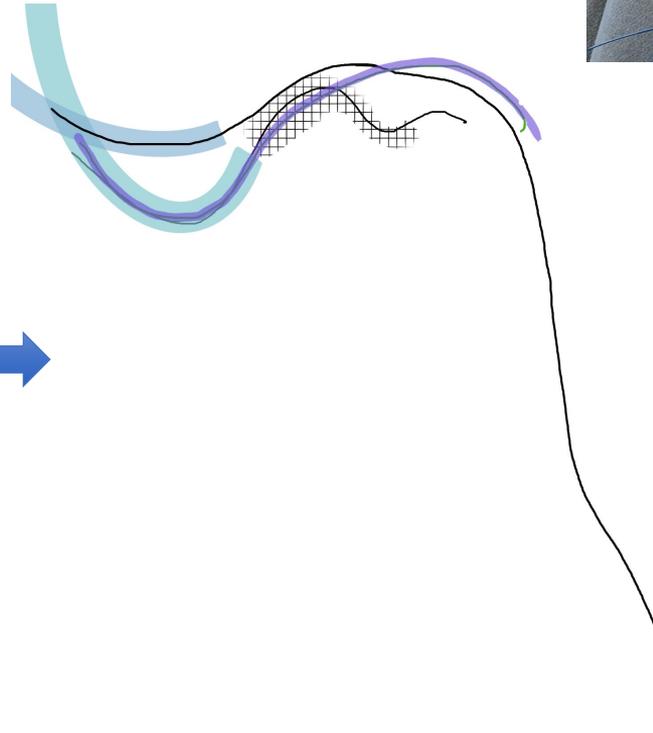


1.0x6mm balloon on
jailed safety wire fails
to cross under stent
struts

Entering true lumen LAD



1.0x6mm balloon on jailed safety wire fails to cross under stent struts



ReCross

Simultaneous

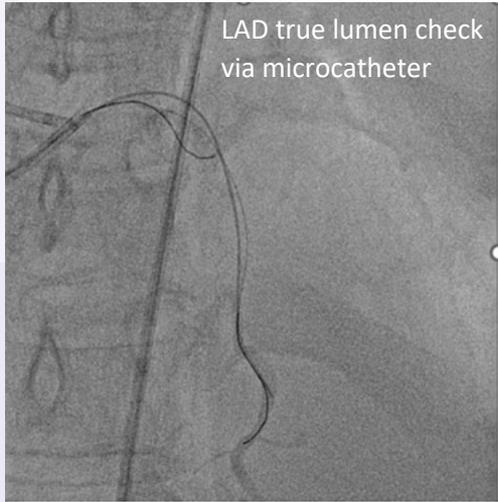
Straw technique
(~10-12mls foamy blood)

+

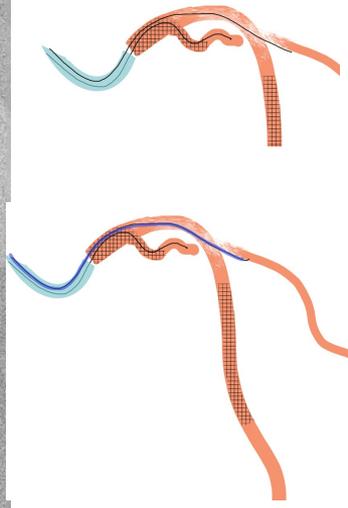
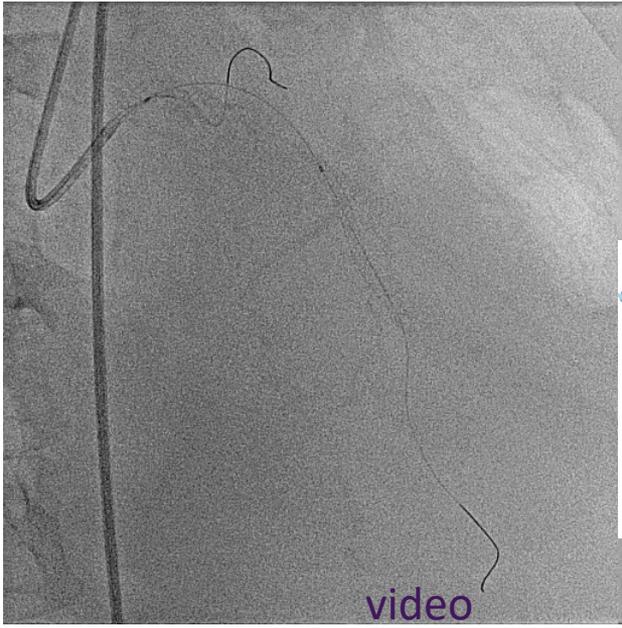
„ADR“

Gaia 3 fails ->
Confianza Pro 12
re-enters towards jailed
marker wire

Stenting mid LAD and ...new challenge in large D



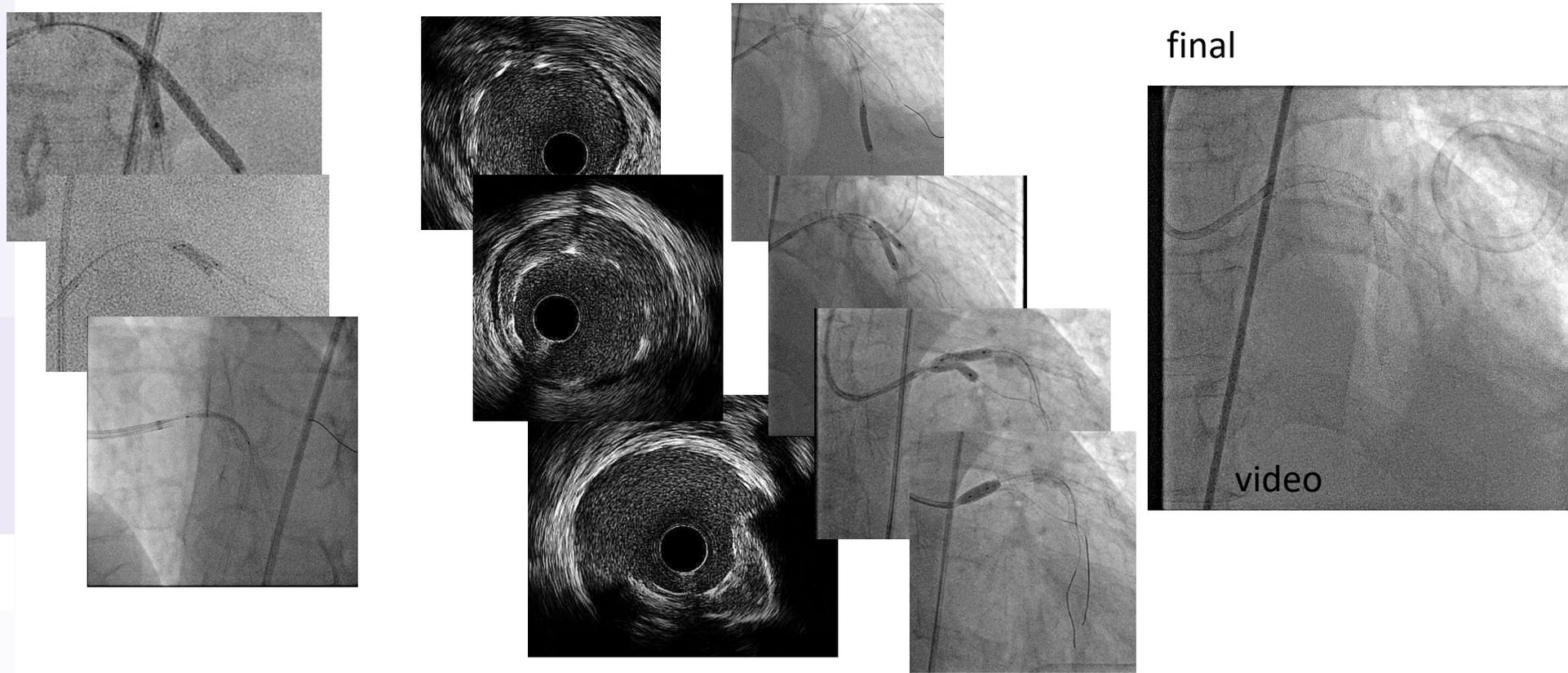
Stent in mid LAD



Work horse and sion black from prox LAD enter only subintimally into diagonal

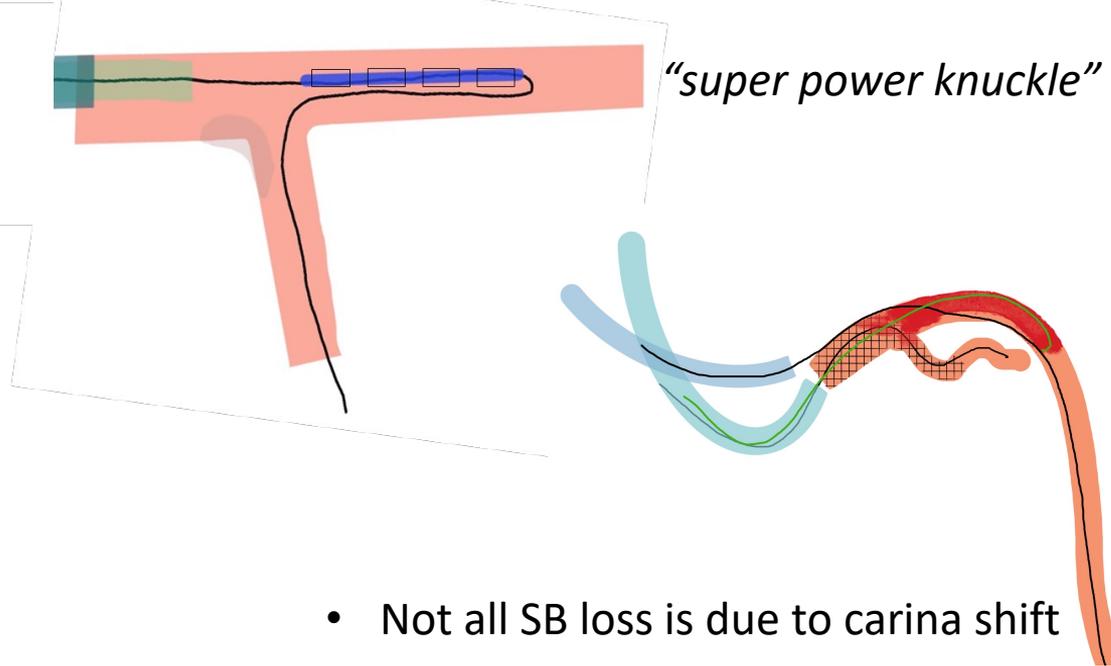
Proximal Diagonal microcatheter and Gladius MG reentered true lumen of D

Nano-crash of LAD/D and finish LM with collotte. Few days: IVUS and postdil

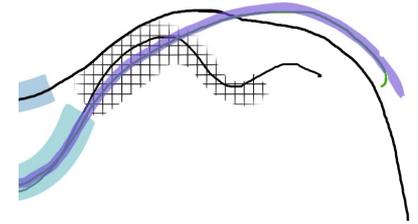


Learning points

- Beware of aggressive stent delivery around corners and wire shaft kink



- Not all SB loss is due to carina shift



- Bail out
ReCross simultaneous
straw and re-entry
stick



Thank you

