# EXTENSIVE, CATHETER-INDUCED DISSECTION OF THE RIGHT CORONARY ARTERY TREATED SUCCESSFULLY WITH FULL METAL JACKET.

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Complication case ICE 2010



#### CASE REPORT

- 57 y.o. male with effort angina
- Positive Exercise Tolerance Test
- Past Medical History: Hypertension, Dyslipidaemia
- Resting 12-lead ECG, ECHO: Normal



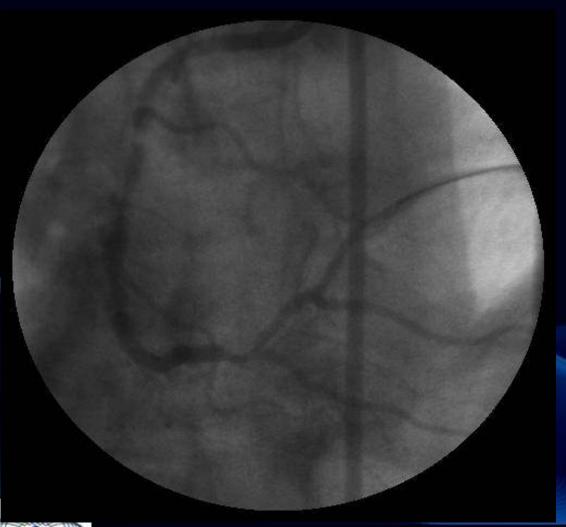
## Coronary Angiography



**Moderate disease of the LAD** 



## Coronary Angiography



Severe stenosis of the RCA (proximal, mid-vessel and at the bifurcation with severe calcification)



## PCI RCA



- Guiding Catheter: 7F ART4 SH
- Predilation with Maverick
- 2.0x15mm at 16 Atm and Maverick
- 2.5x15mm at 18 Atm



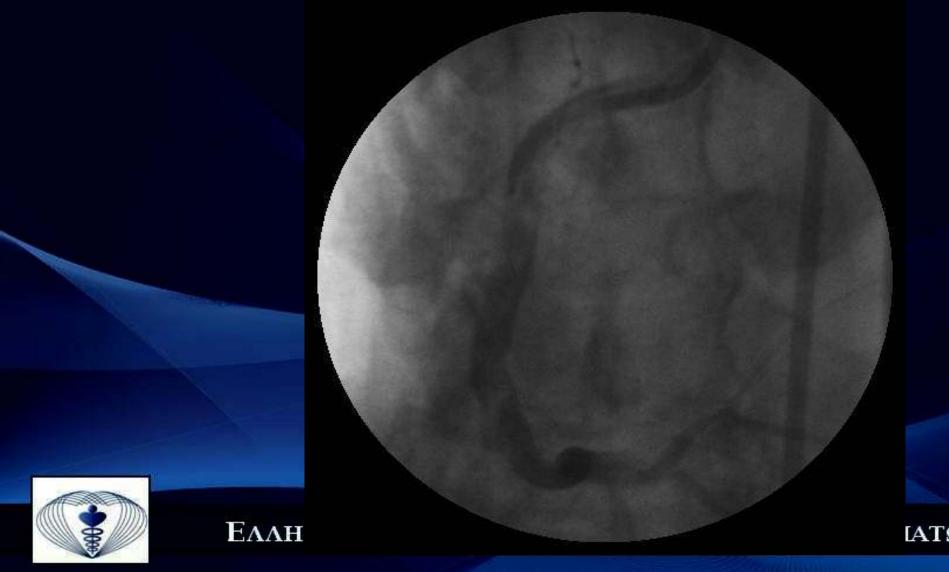
## PCI RCA



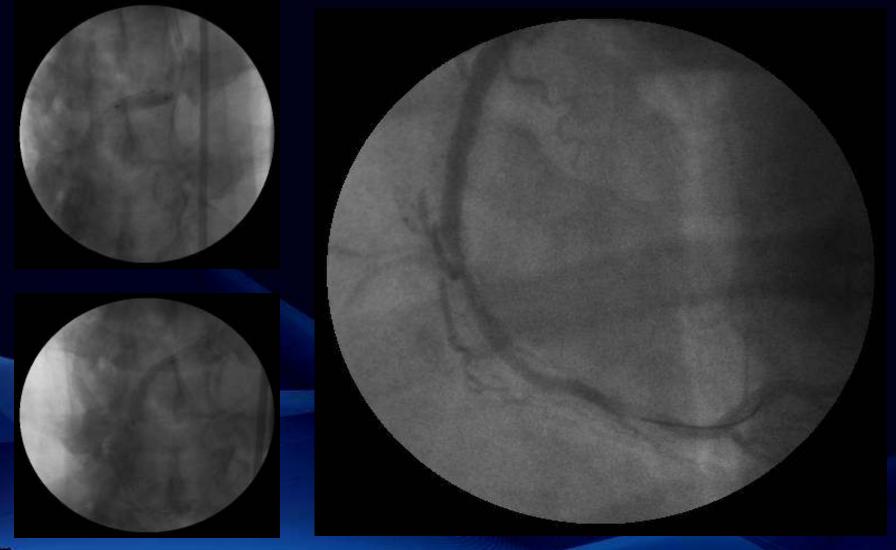
Implantation with difficulty of an Endeavor 2.25x14mm at the distal lesion



During withdrawal of the balloon, inadvertent deep intubation of the guiding catheter led to an extensive, spiral dissection of the Right Coronary Artery from the ostium up to the implanted stent at the bifurcation level.



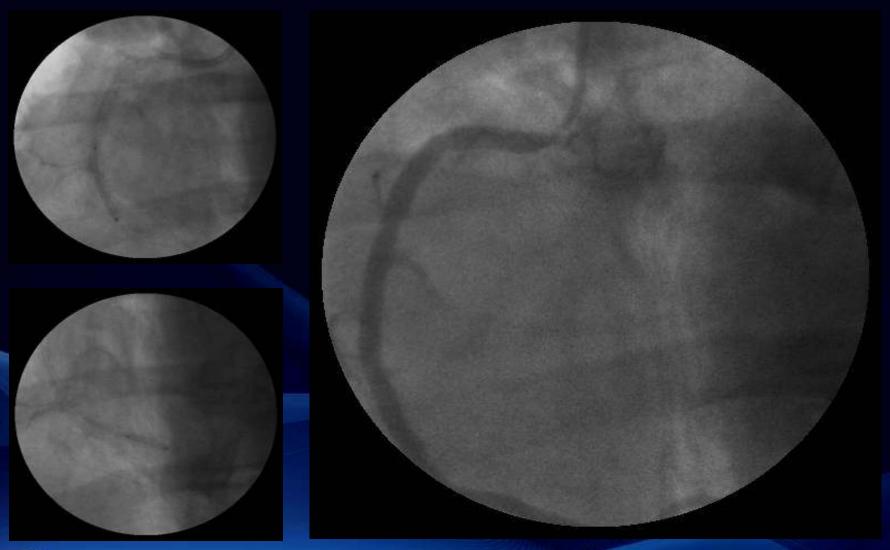
#### Implantation of Endeavor 3.5x18mm and 3.0x24mm





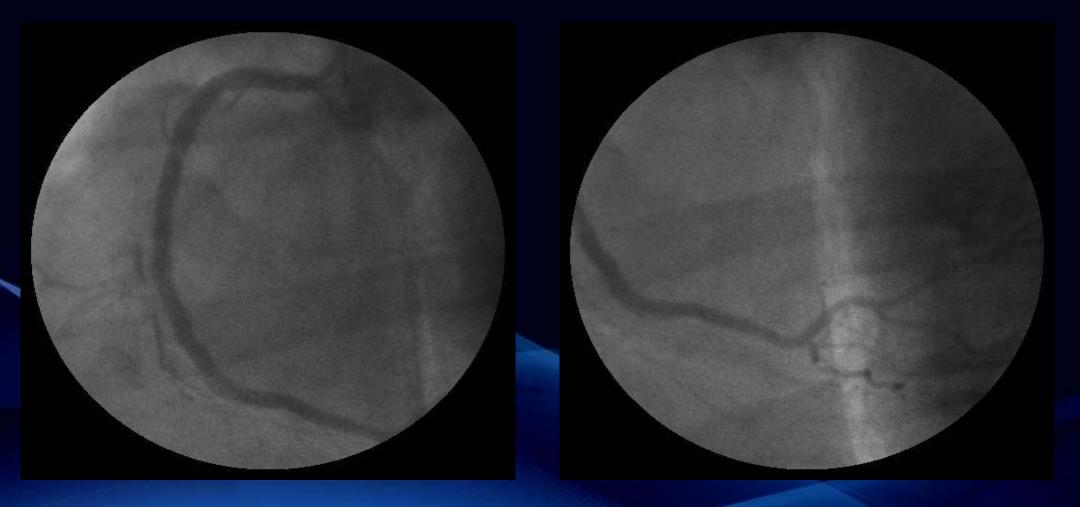
ΕΛΛΗΝΙΚΟ ΙΝΣΤΙΤΟΥΤΟ ΚΑΡΔΙΑΓΓΕΙΑΚΩΝ ΝΟΣΗΜΑΤΩΝ

#### Implantation of Endeavor 3.0x18, 2.75x24, 2.5x18 and 2.5x18 mm





## Final Result after post dilatation with Quantum 3.0x15 and Quantum 3.5x15.





**Stented length 134mm** 

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#### 10 months after the index PCI, patient developed exertional angina

Diagnostic coronary angiography

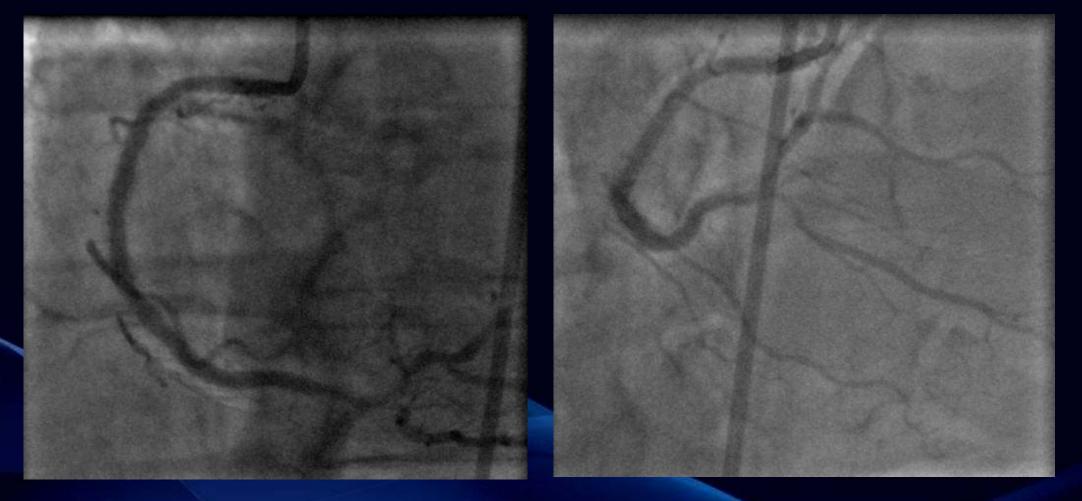


## Implantation of Cypher 2.5x18, 2.75x23 and 3.0x23mm Postdilatation with Quantum 3.0x15 and 3.5x15mm





## Final Result



4 years after the second procedure the patient remains asymptomatic with no evidence of ischaemia on the ETT.

