

# COMPLEX TRIPLE CTO RADIAL APPROACH

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INTERVENTIONAL CARDIOLOGY

CC:

SOB DOE AND CHEST PAIN

59 YO FEMALE WITH PROGRESSIVE SOB AND EASY FATIGUE.  
CHEST PAIN OPPRESSIVE AND NON RADIATING. BORG SCALE  
8/10

HX:

HBP- ARB AND ACE INHIB

DM- ORAL TX

HYPERCHOLESTROLEMIA- STATINS

FA HX OF CAD

SMOKER- 60 PACK YEAR

OLD MI- ASA, NTG, CLOPIDOGREL

PE:

BP: 130/90 HR: 90 RESP:26

HEART: RR , S. MURMUR 2/6 , S3 gallop

LUNG: CTA

EXT: PEDAL EDEMA

EKG: SR NSST CHANGES

CHEST X-RAY: CARDIOMEGALY

TROP I: .12 .34 .08

ECHO: 25% EF GLOBAL HYPOKINESIA

MILD MR

ANTERIOR WALL ANEURYSM

PA PRESSURE 45MM HG

CARDIAC CATH.

3 VESSEL CTO

LARGE FIRST DIAGONAL 90-95% ST

LV DYSFUNCTION 20-25% EF





CARDIAC BOARD

SURGICAL EVALUATION- TO HIGH RISK

NO PULMONARY CLEARANCE

PLAN:

HIGH RISK COMPLEX PCI- STEP WISE

RCA FIRST

CFX SECOND

LAD AND DIAGONAL LAST

NO SURGICAL BACK UP

PATIENT DECISION TO GO AHEAD

INTRA AORTIC BALLOON PUMP

INOTROPICS

INTRAVASCULAR ULTRASOUND

CHRONIC TOTAL OCCLUSION (CTO)

HEAVY ATHEROSCLEROTIC PLAQUE BURDEN

RESULTING IN COMPLETE OR NEAR COMPLETE

OCCLUSION OF A VESSEL WITH COLLATERAL

FLOW

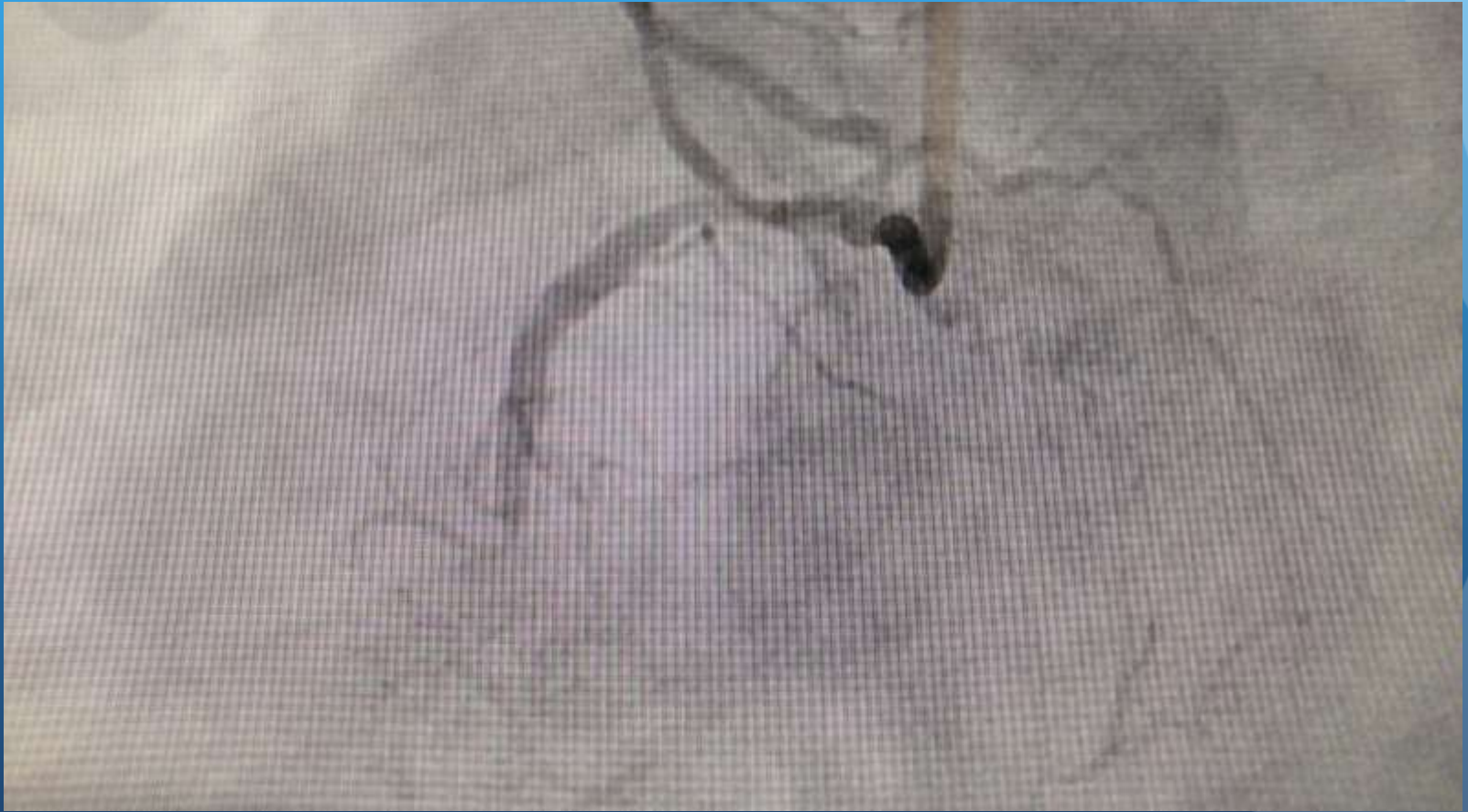
## BENEFITS OF CTO OPENING:

- IMPROVE LONG TERM SURVIVAL
- IMPROVE LV FUNCTION
- IMPROVE SYMPTOMS

# PCI CTO

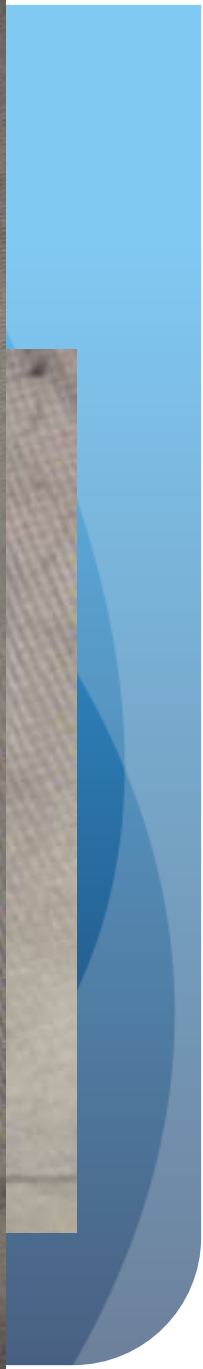
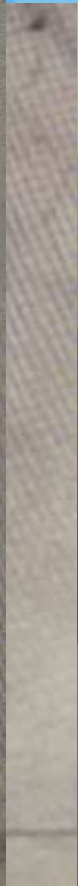
CONSIDERED THE MOST CHALLENGING CORONARY INTERVENTION BY THE NATIONAL HEART ,LUNG AND BLOOD REGISTRY WITH ONLY 70% SUCCESS RATE IN MOST CENTERS.

BEFORE 1990 ONLY 51% SUCCESS RATE

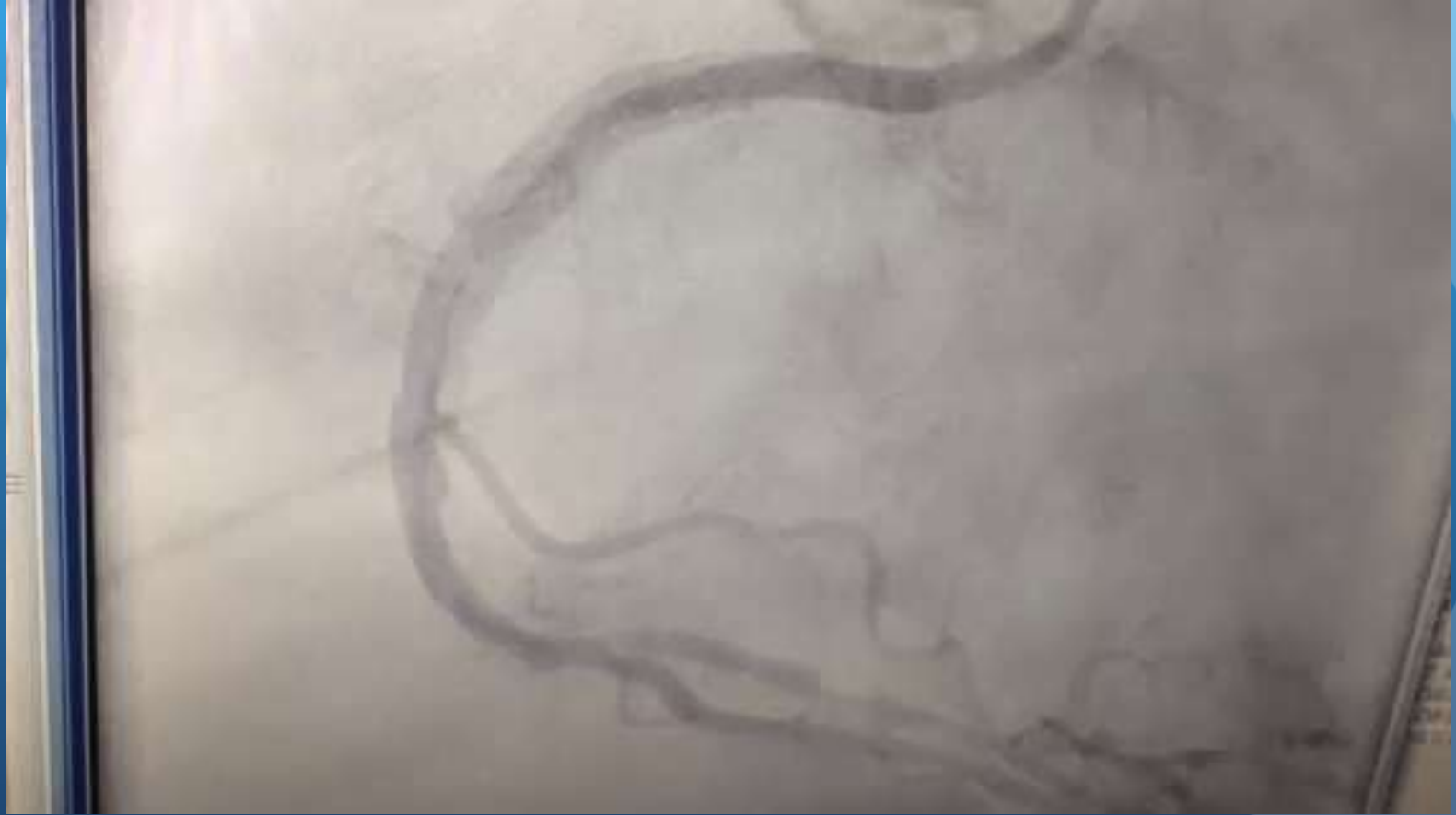




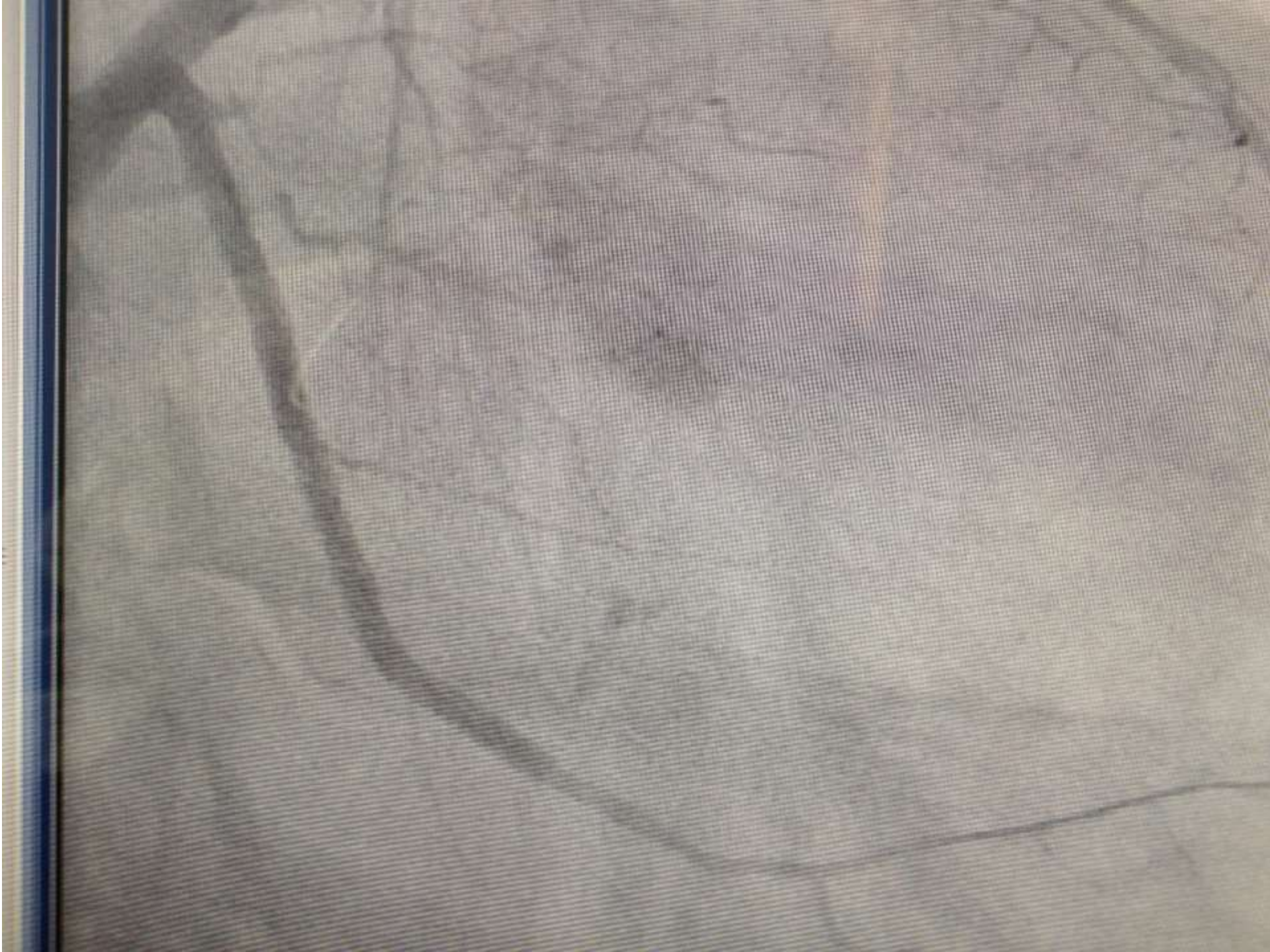
























FINAL:

3VESSEL RADIAL CTO PCI WITH VERY GOOD  
RESULTS

OPD F/U 1 WEEK LATER

ASYMPTOMATIC AND WORKING AS A NURSE

NEXT- EP EVALUATION

GRACIAS

“La satisfacción más grande del conocimiento es poder utilizar lo aprendido” AJL

