

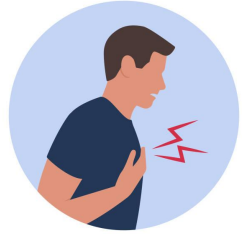
Scoring goals in CTO- PCI

*Jose Antonio Sorolla Romero
Unidad de Hemodinámica y Cardiología Intervencionista
Hospital Universitari i Politècnic La Fe
Valencia*

Conflicto de intereses

- *Honorarios recibidos: OrbusNeich*

Varón de 44 años



Historia clínica:

- Diabetes mellitus II
- Obesidad
- ERGE
- A.F de C. Isq precoz.

Tratamiento médico:

- FENOFIBRATO 145 MG. 1c/24h
- REPAGLINIDA 2 MG. 1c/24h
- FAMOTIDINA 20 MG. 1c/12h
- ALPRAZOLAM 0.5 MG. 1c/12h
- METFORMINA + SITAGLIPTINA (1000 MG/500 MG). 1c/12h

Ingresa por SCASEST.

ETT:

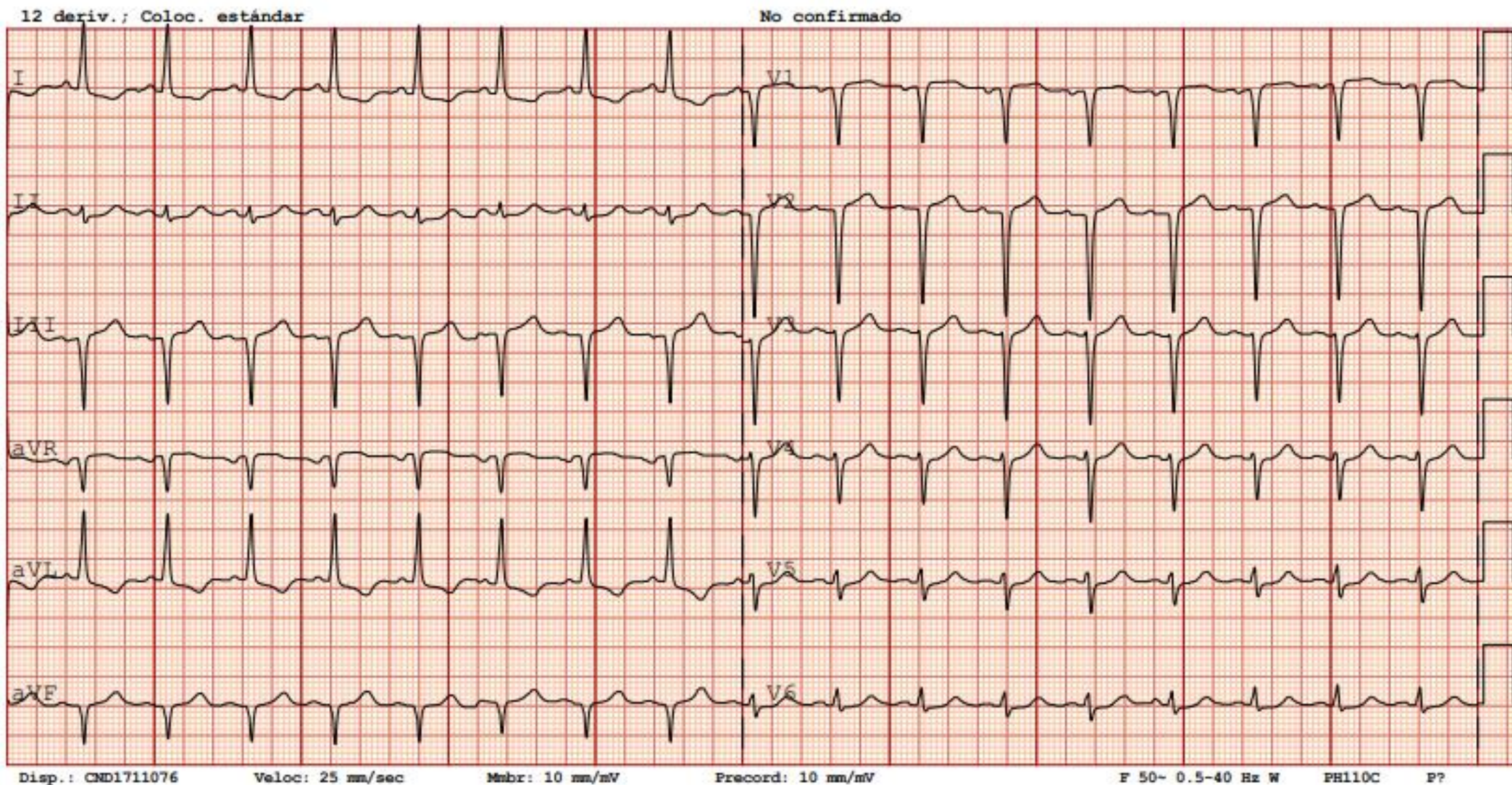
- Disfunción sistólica moderada (FEVI Simpson BP 40%).
- Hipoquinesia septal, anterior e inferolateral media.
- Sin valvulopatías significativas.

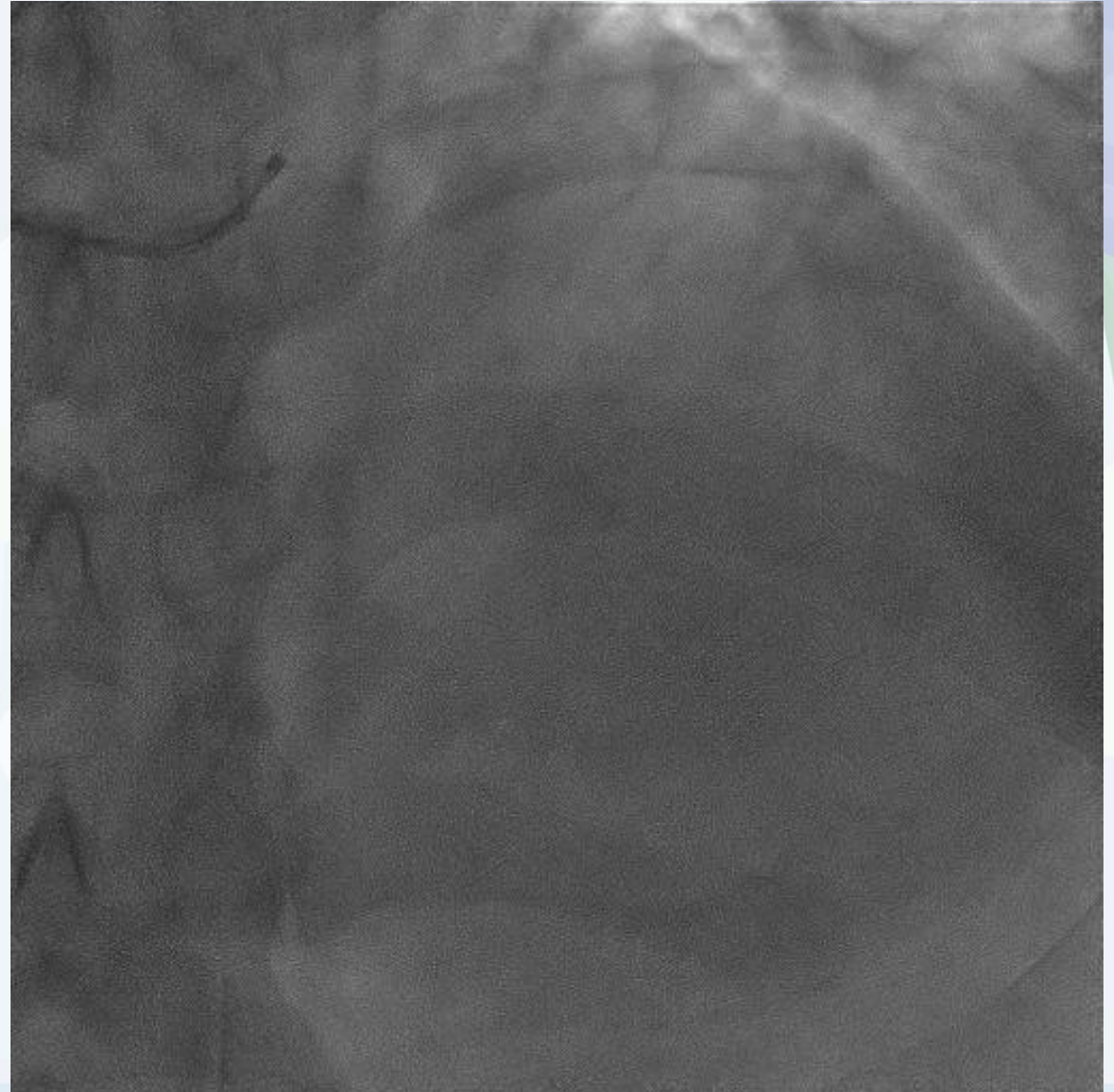
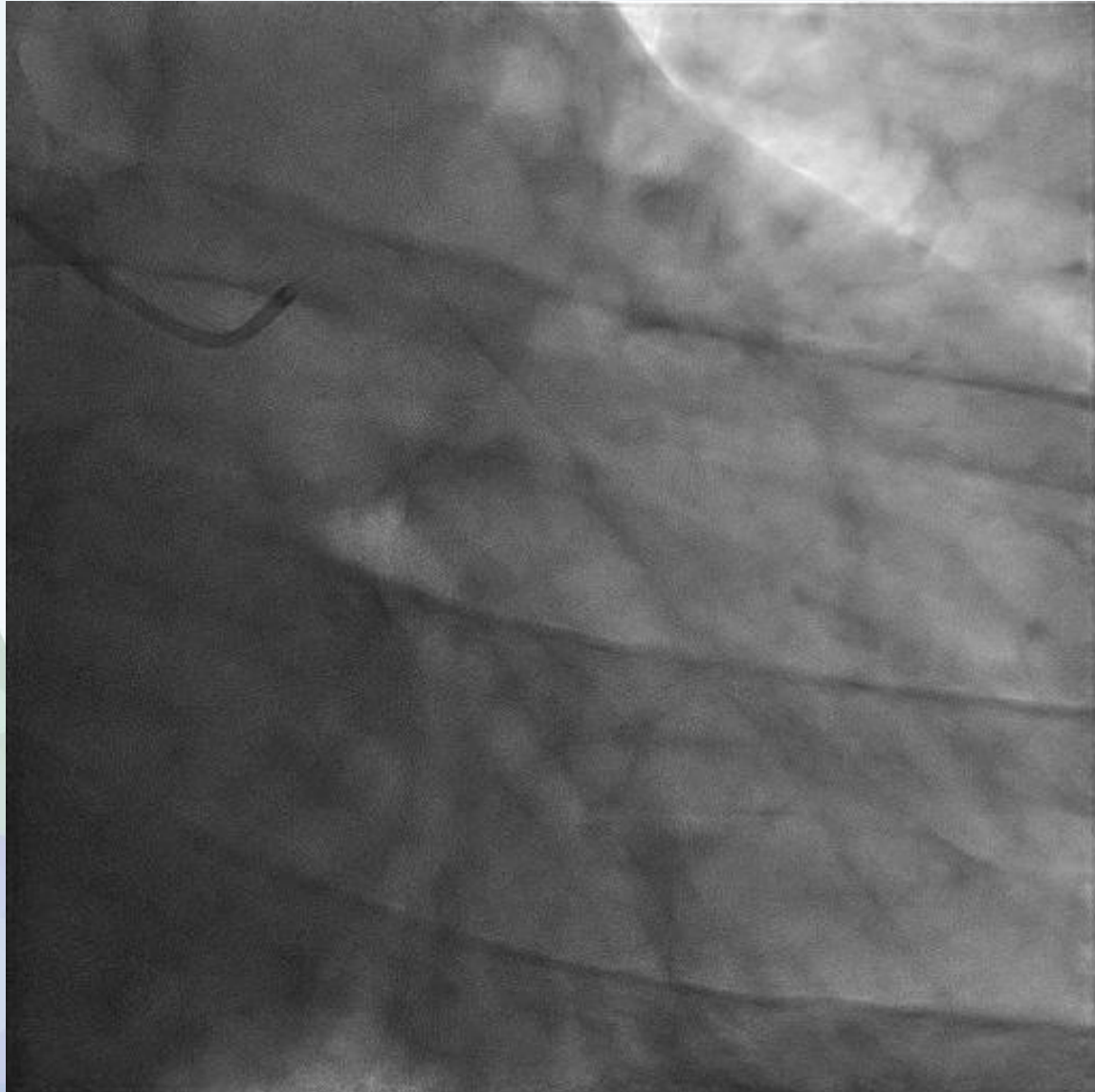
Analítica:

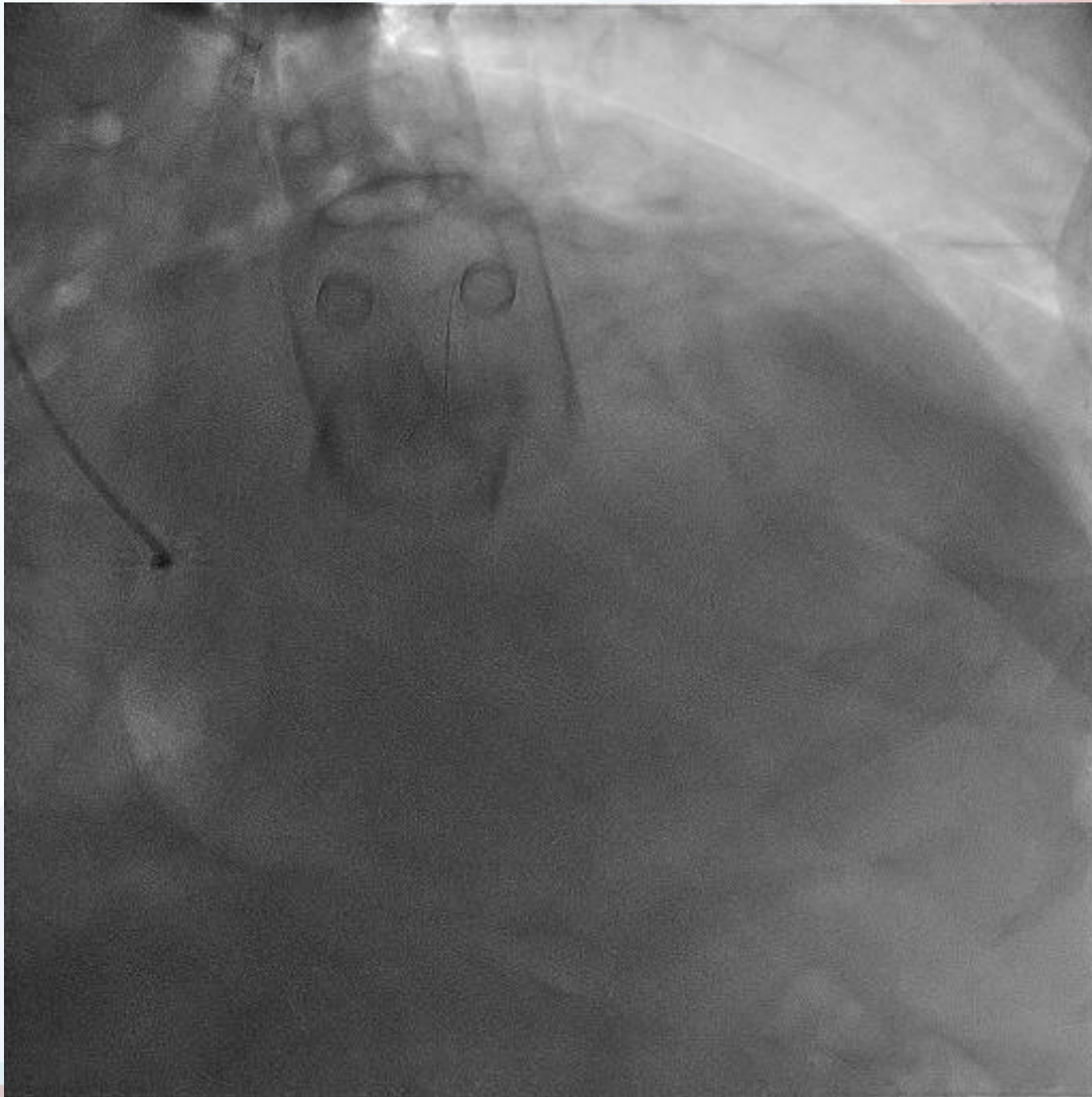
- Cr 0,83 mg/dl
- Tnt 193ng/l -> 200 ng/l
- Hb 14,4 g/dl
- PCR 220 pg/ml
- NT-ProBNP 3800 pg/ml
- Lactato 1,6

Rx tórax: signos de congestión pulmonar

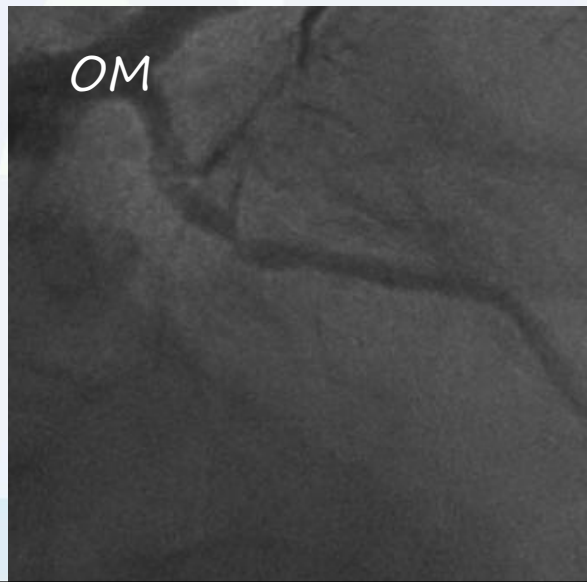
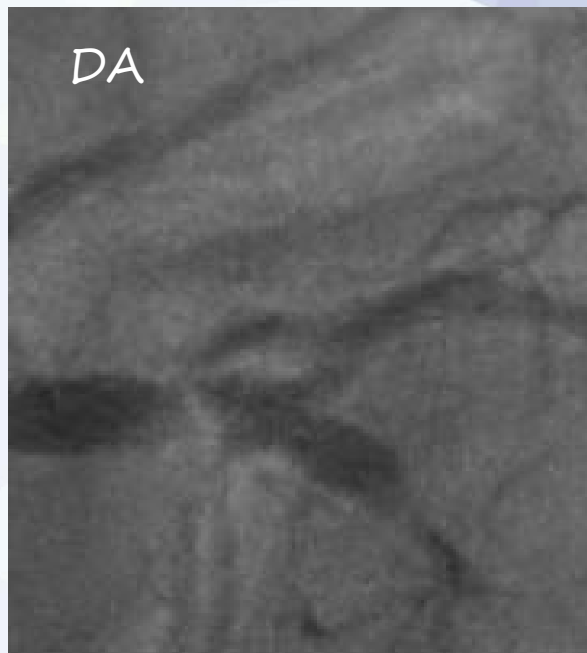
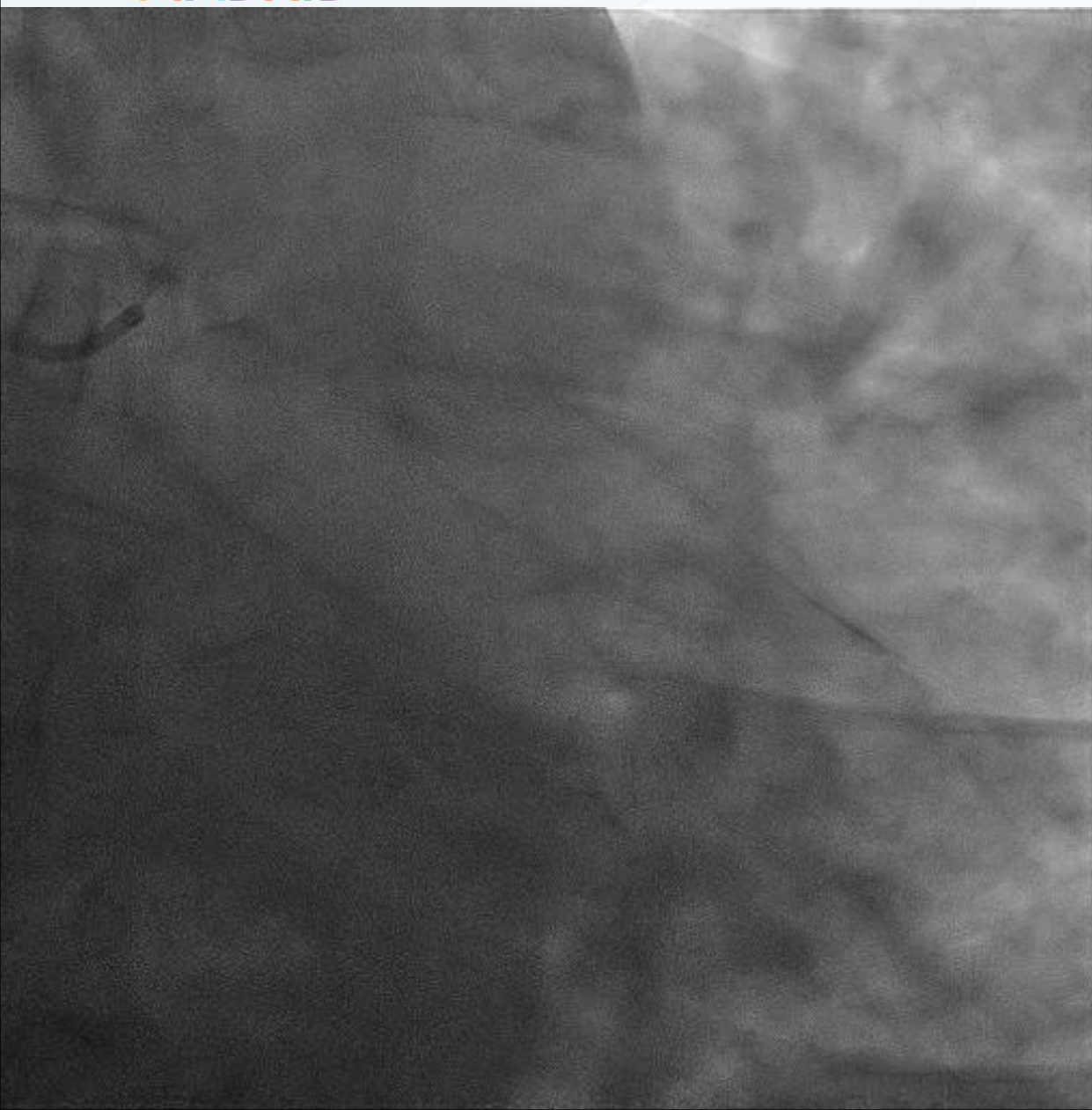
Ingres para realización de coronariografía urgente

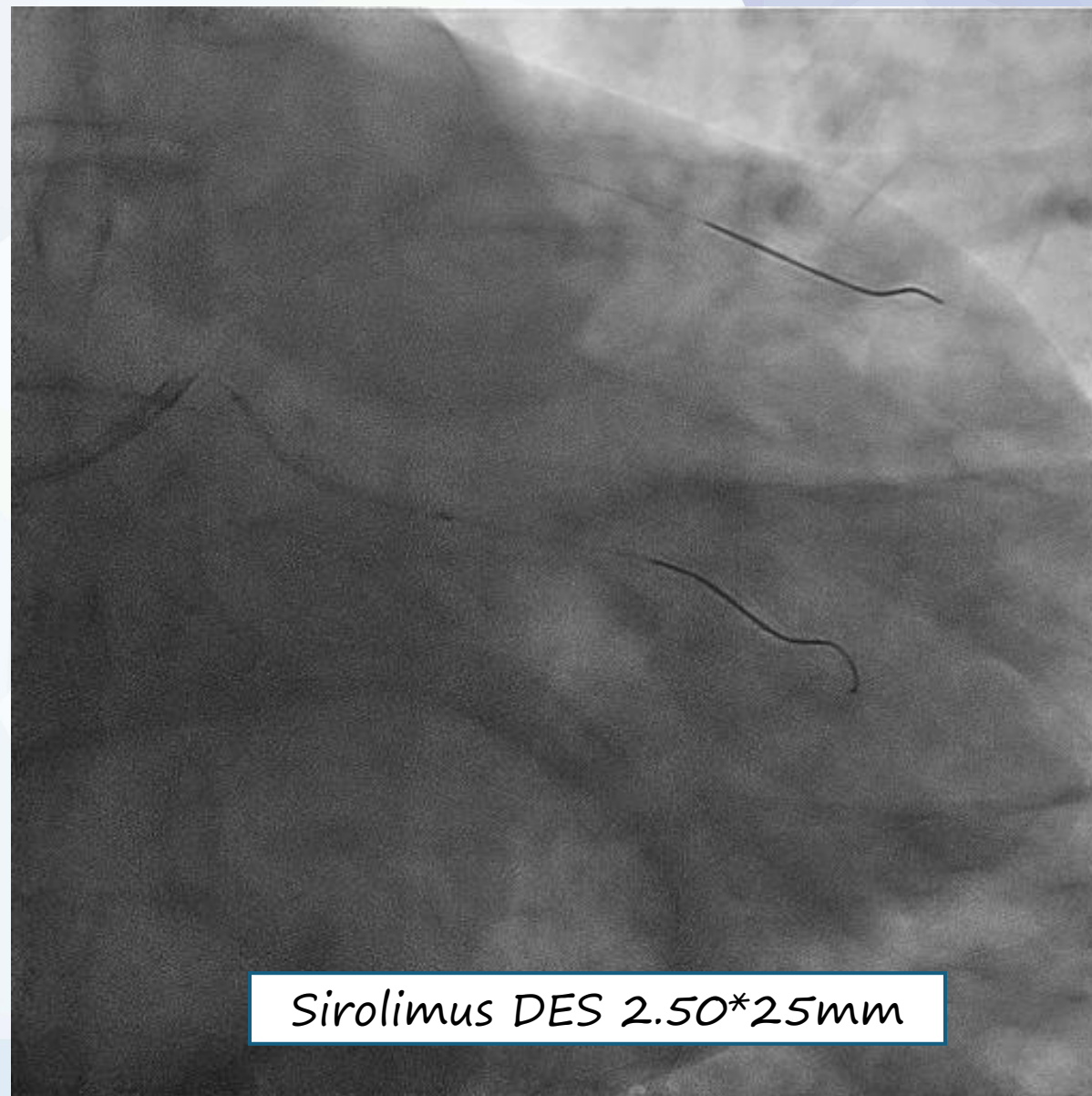
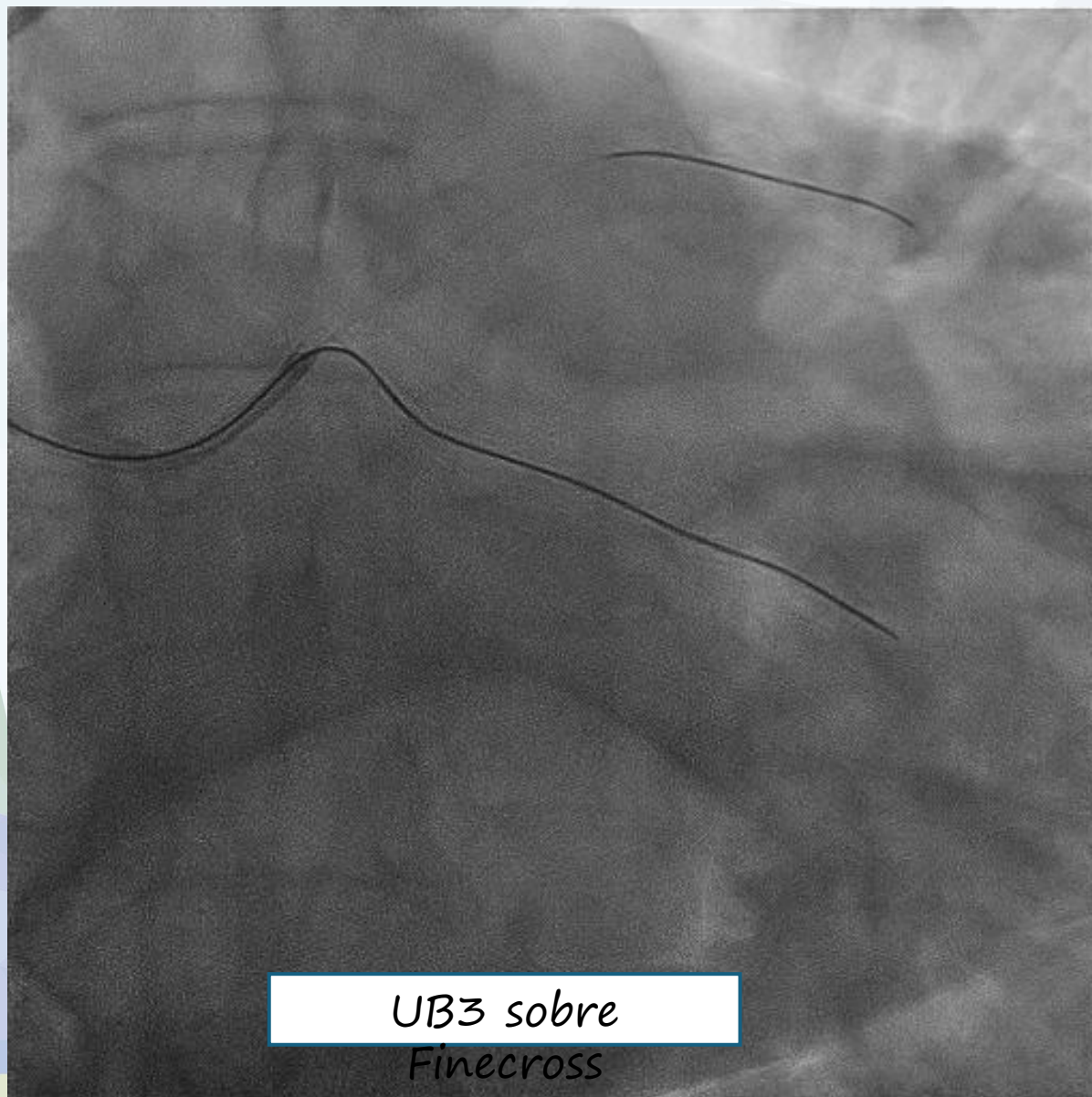


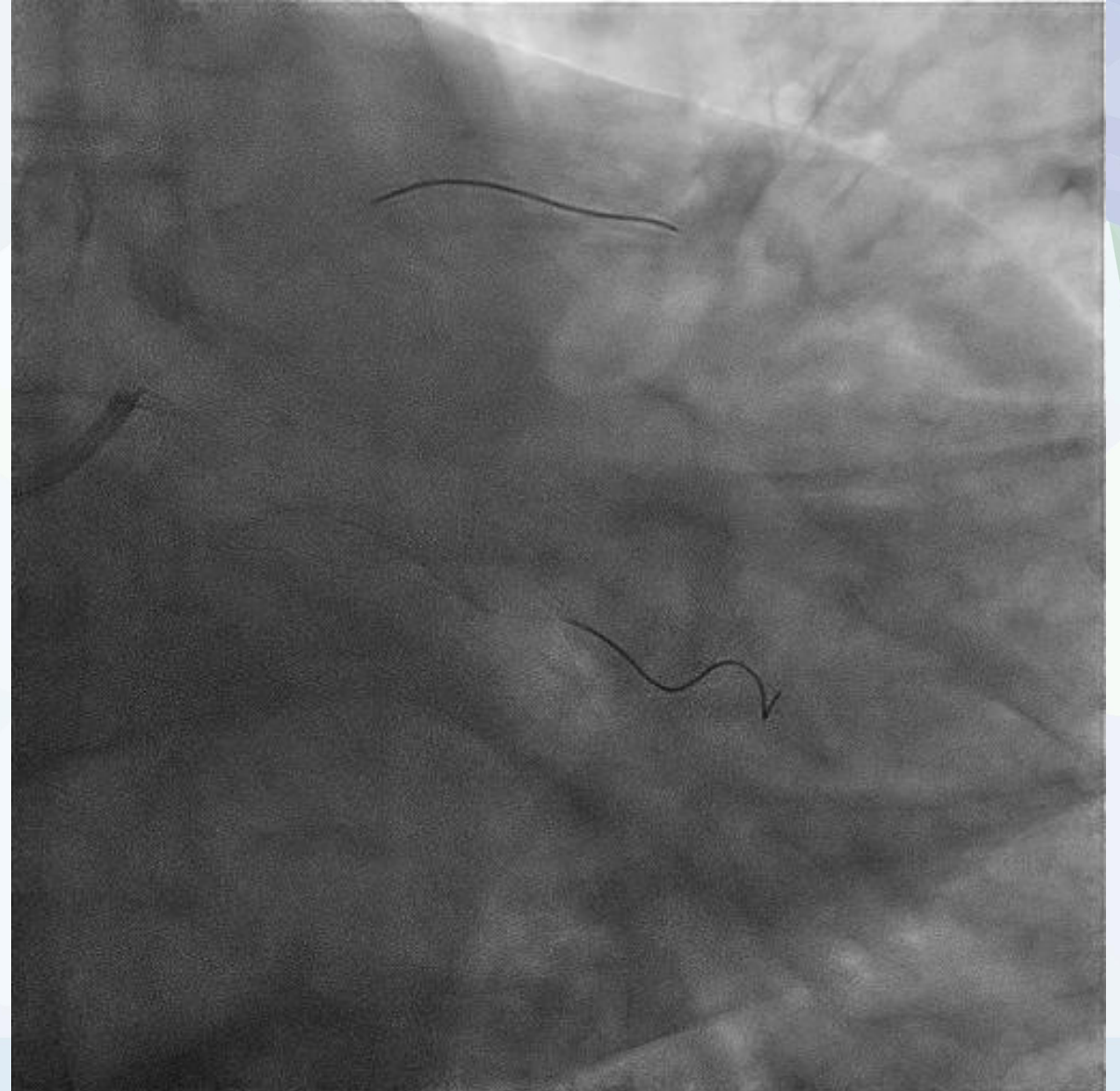
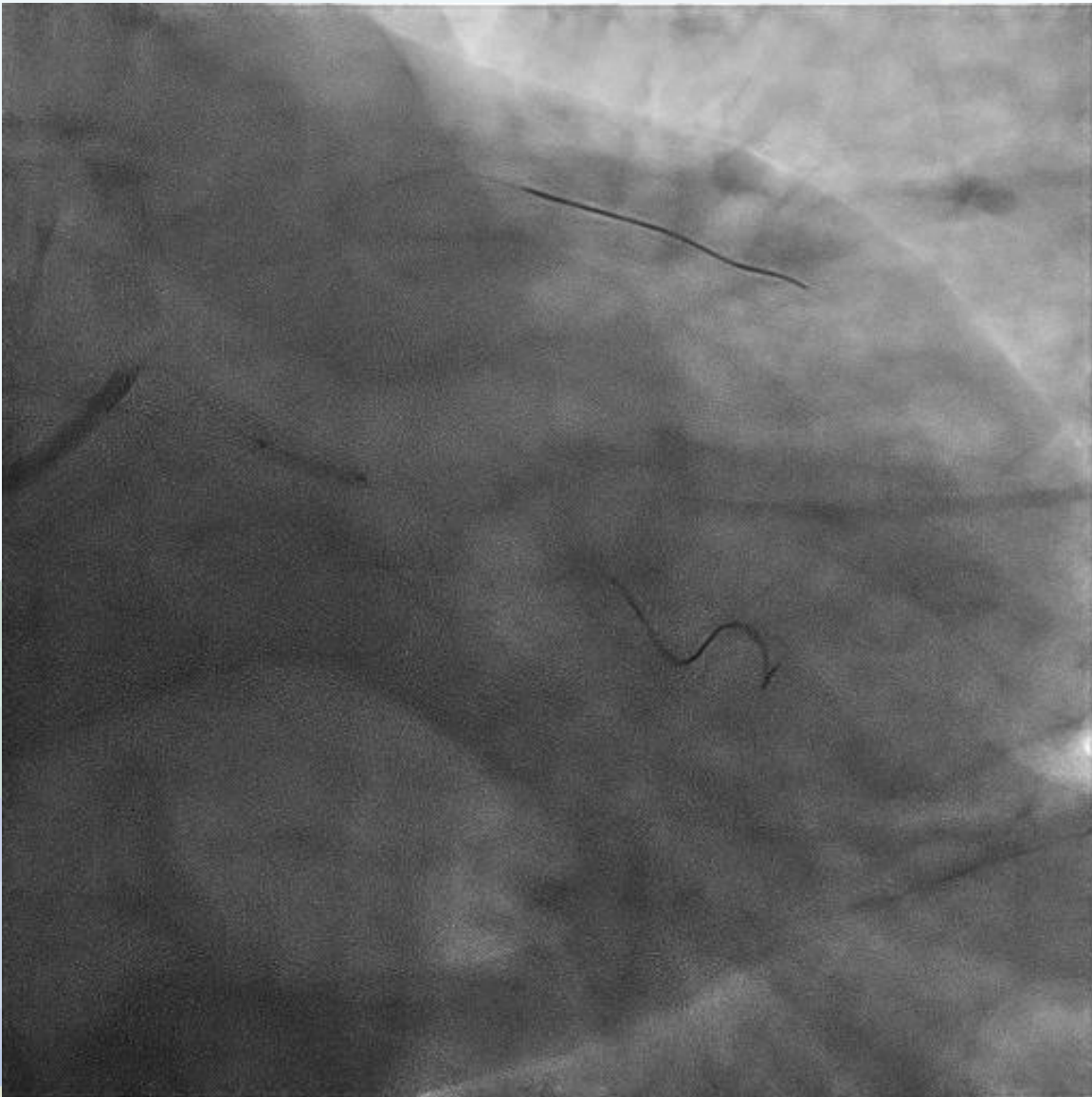




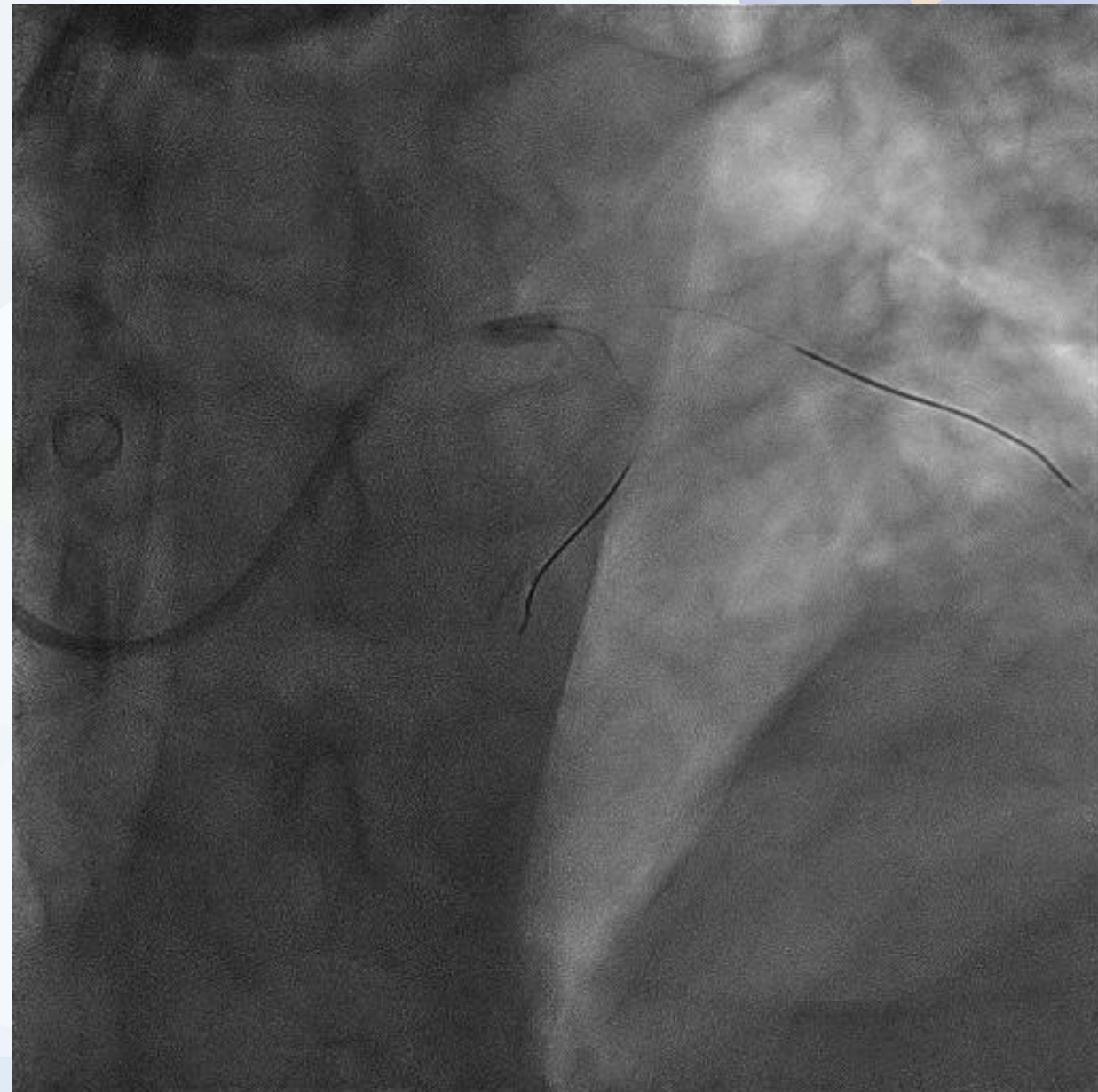
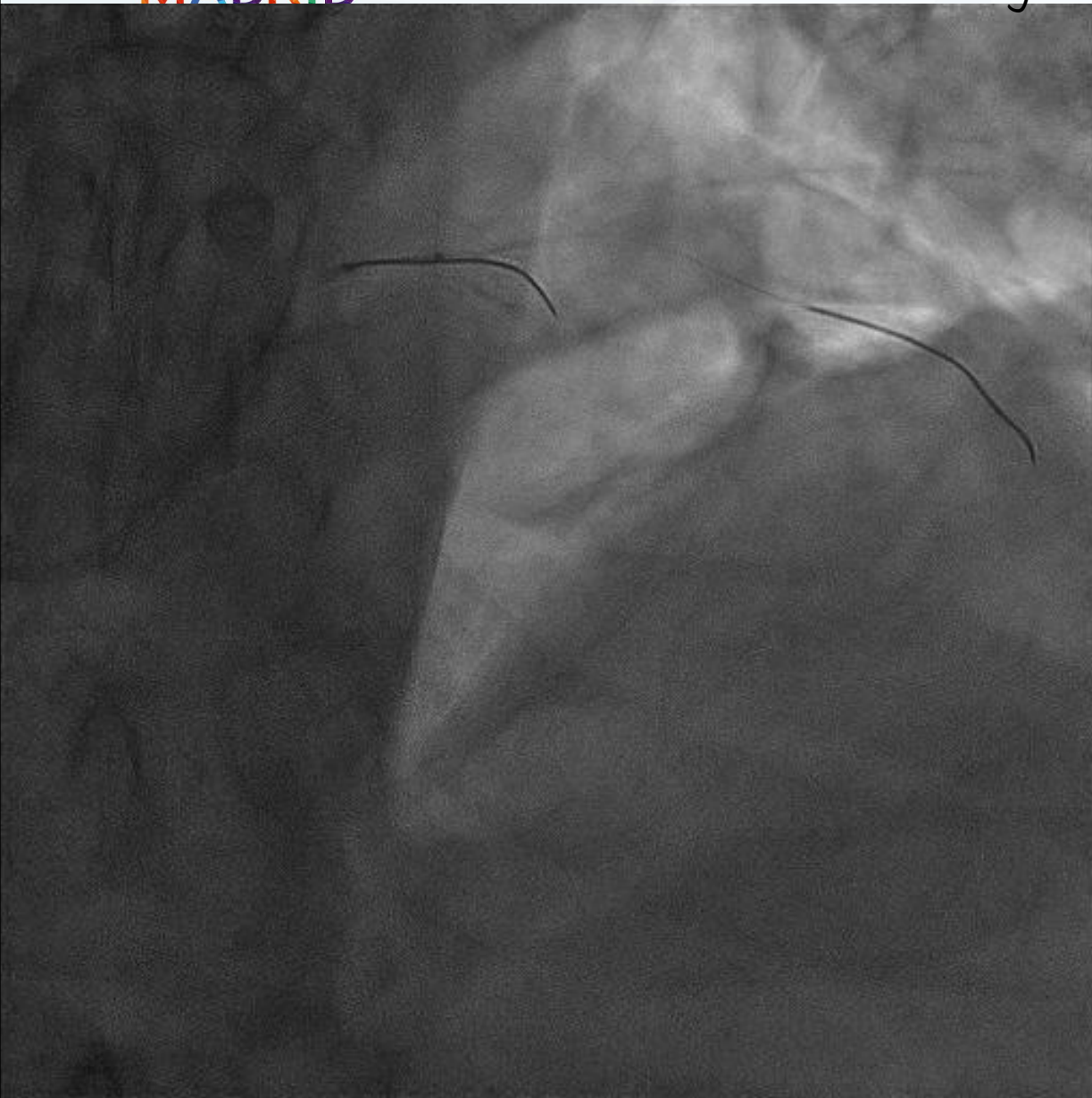
¿Qué tratar?



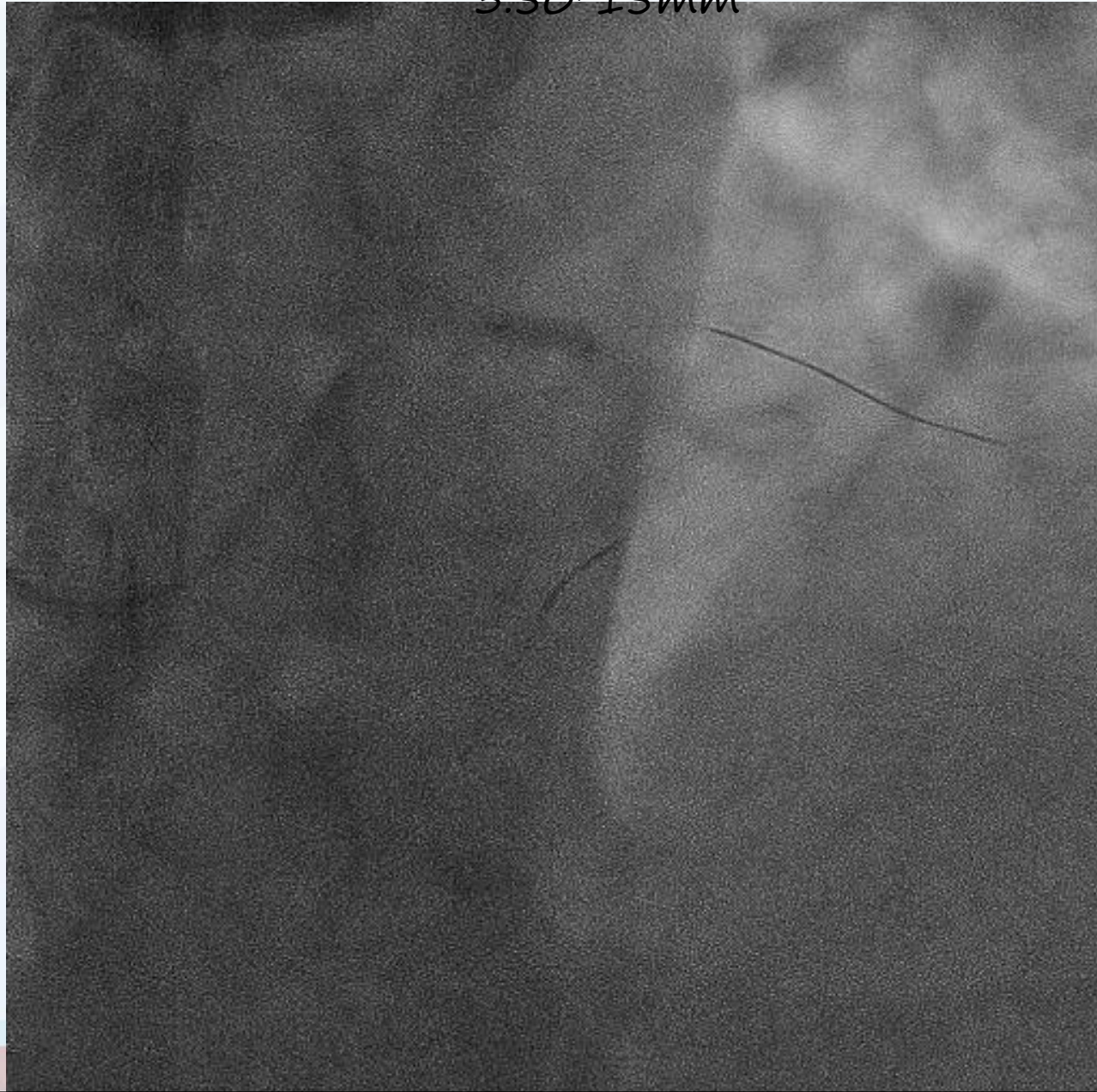


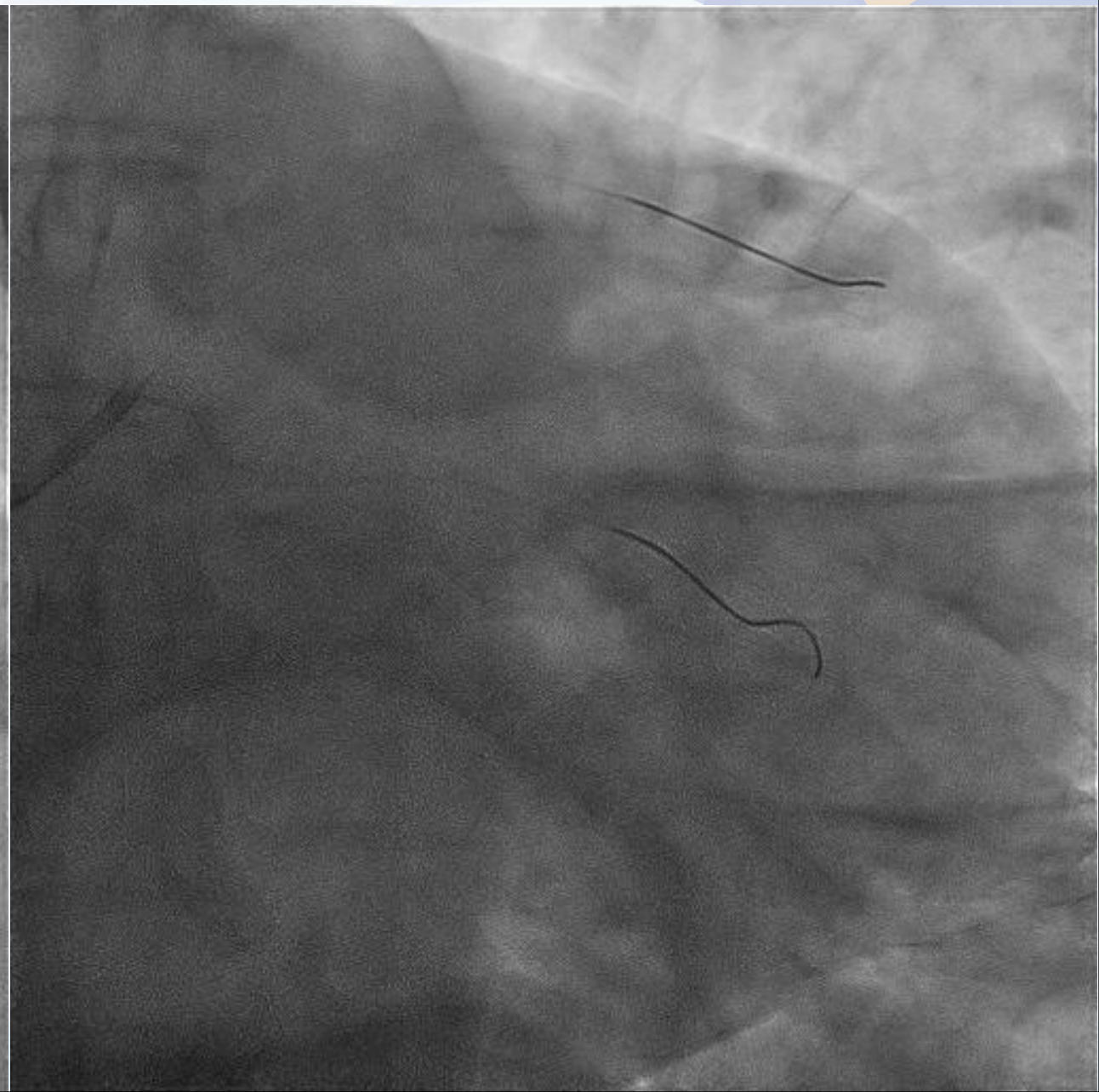
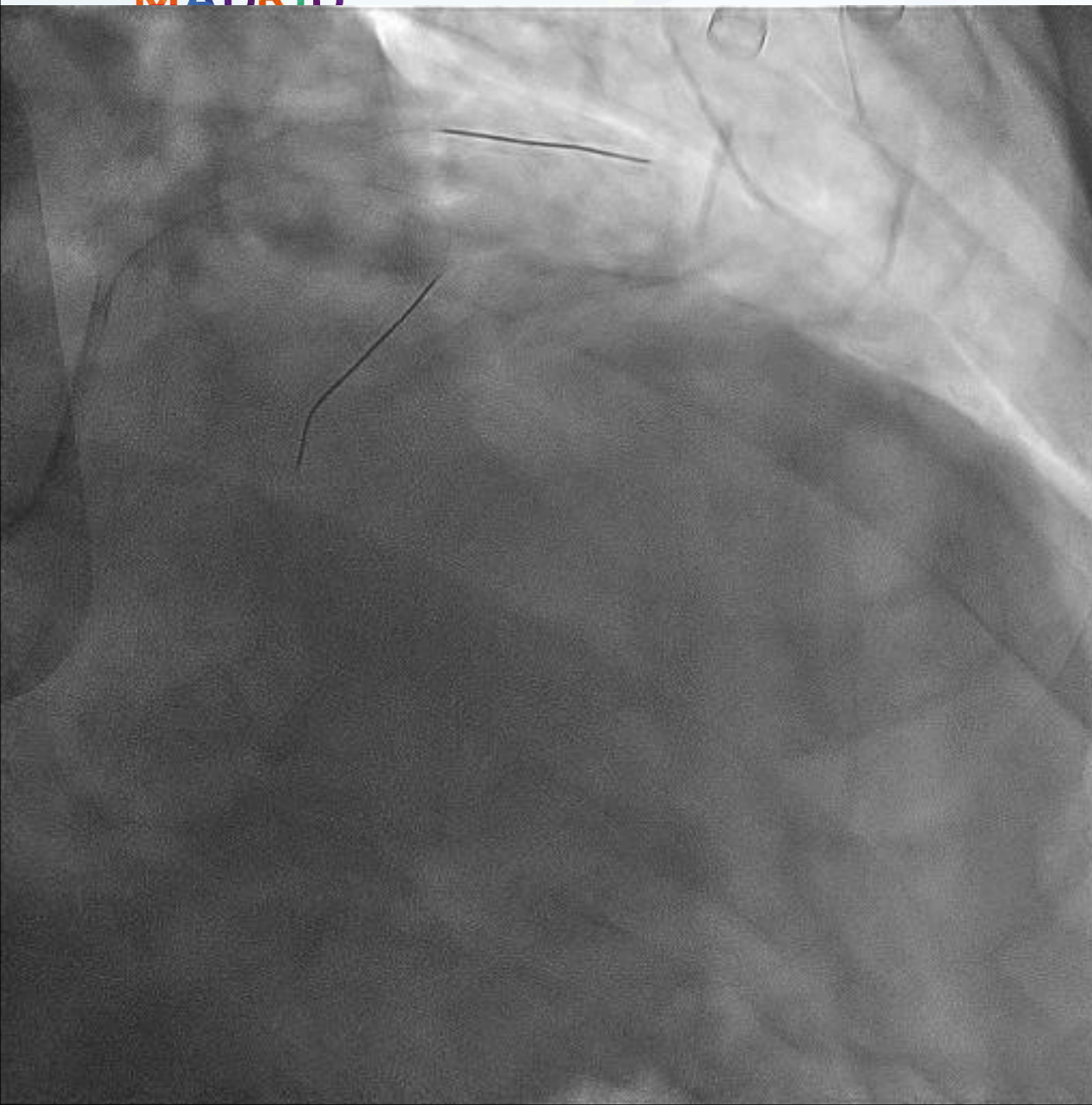


Se predilata lesión en DA proximal con balón SC 2.50
y 3.50mm



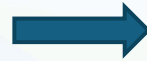
Se completa ICP mediante balón farmacoadactivo de paclitaxel
3.50*15mm





Evolución en UMI:

- *Tendencia a la congestión pulmonar con dependencia de diuréticos ev.*
- *Tnt 200 ->800 ng/l ->1200 ng/l ->1105 ng/l*



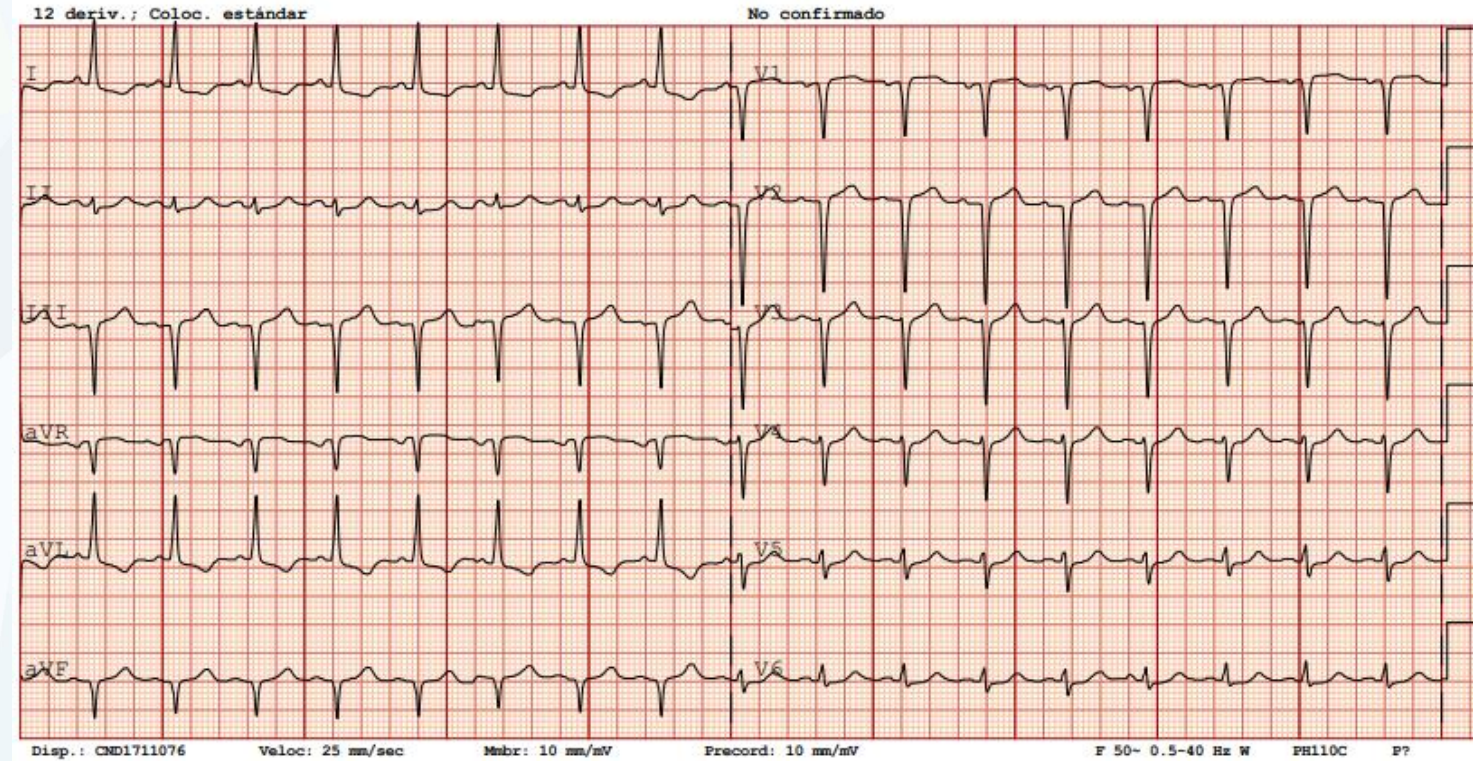
10 días tras la coronariografía previa se programa ICP a DA.

Set:

- *Acceso radial izquierdo distal slender 7F.*
- *Acceso radial derecho slender 7F.*
- *Catéter guía:*
 - *TCl: EBU 3.75.*
 - *CD: AL1.*

Evolución en UMI:

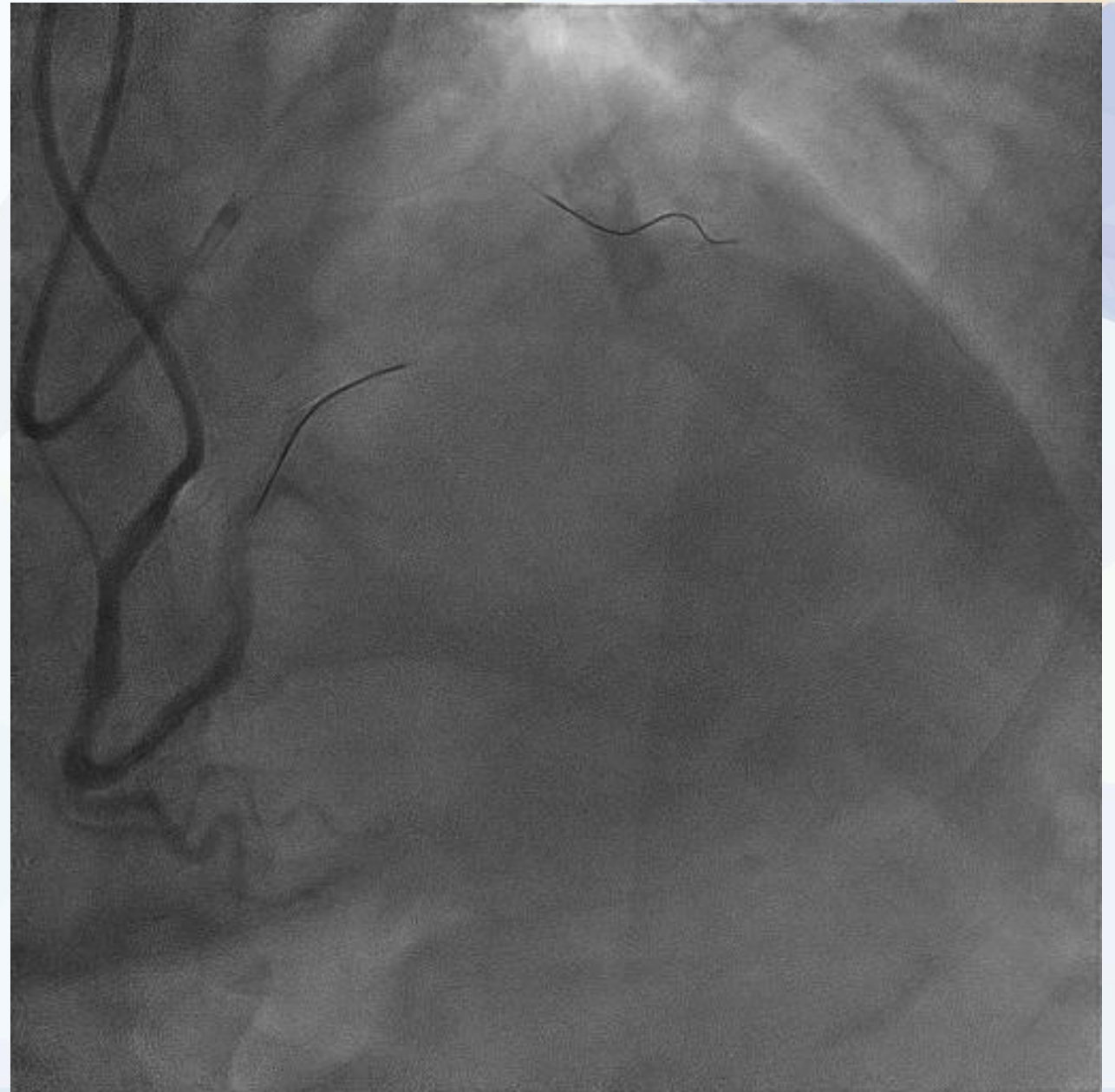
- *Tendencia a la congestión pulmonar con dependencia de diuréticos ev.*
- *Tnt 200 ->800 ng/l ->1200 ng/l ->1105 ng/l*

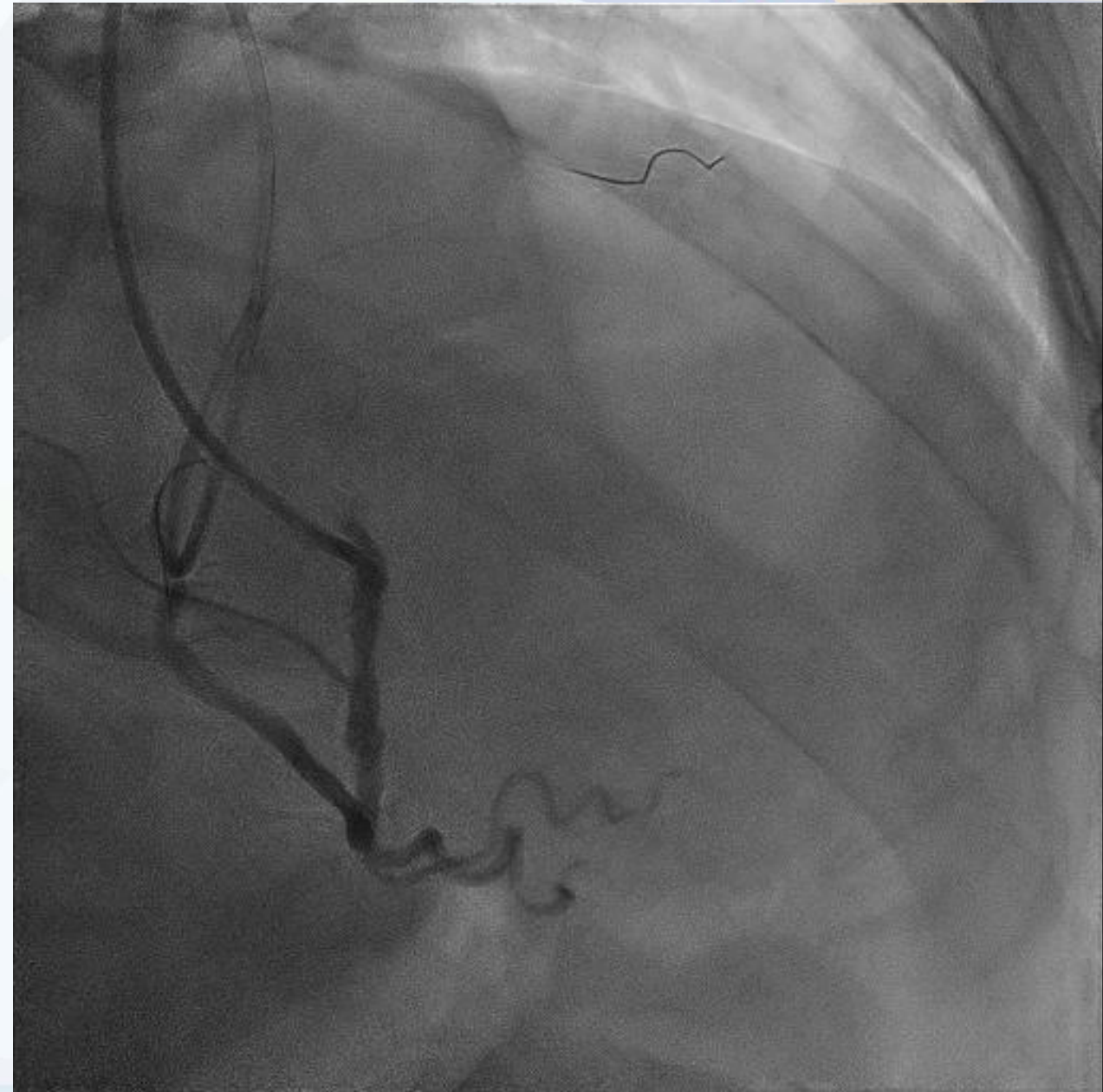


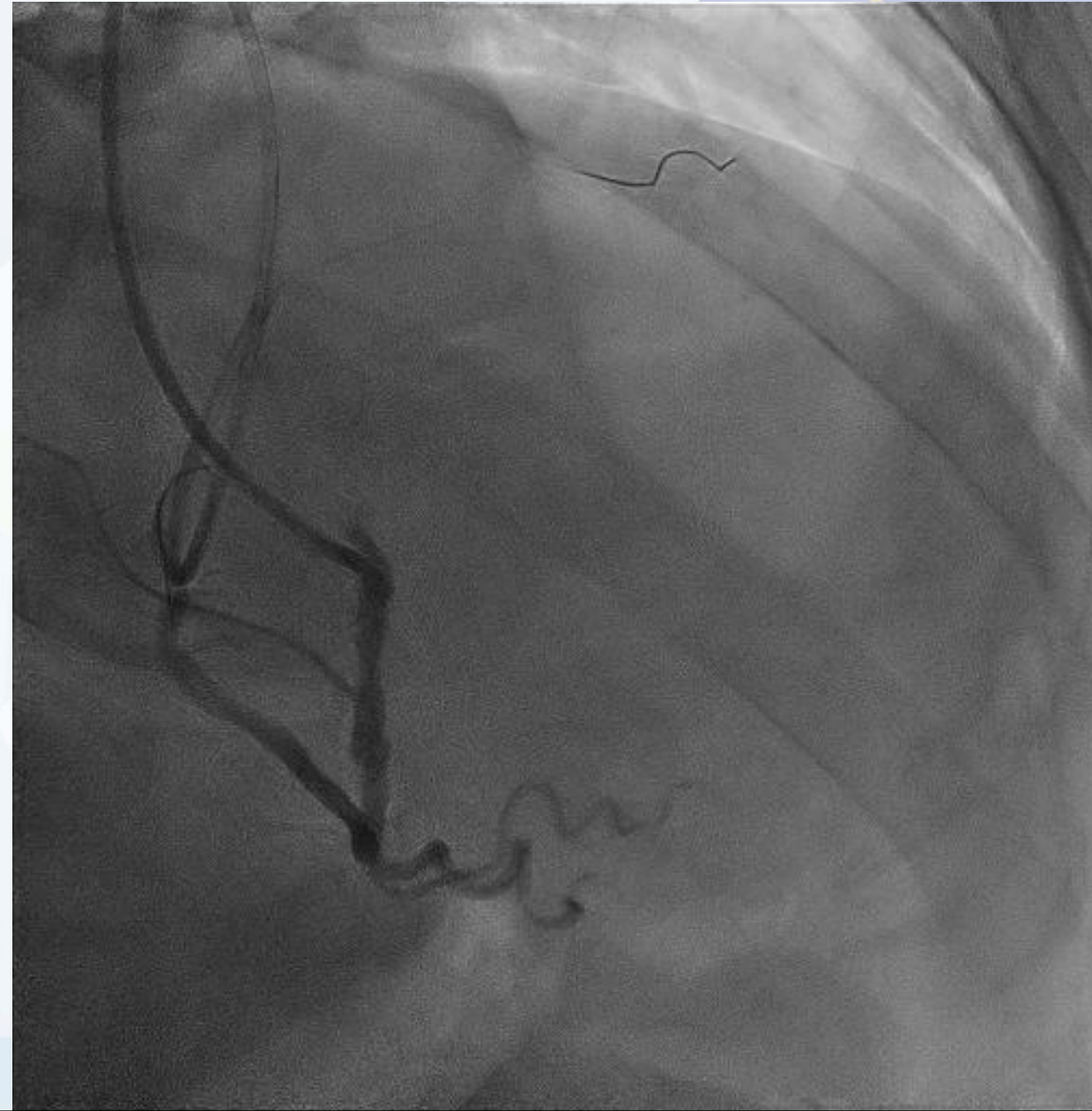
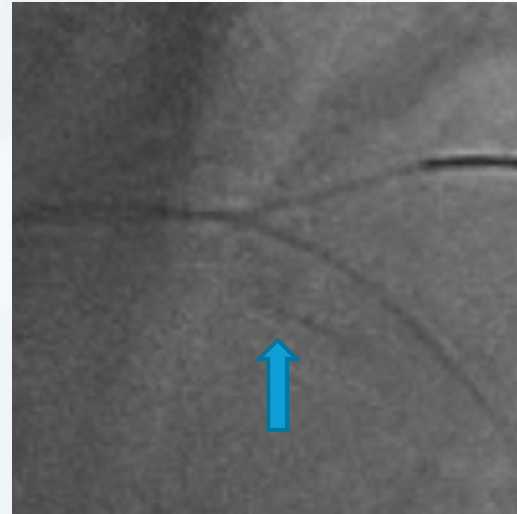
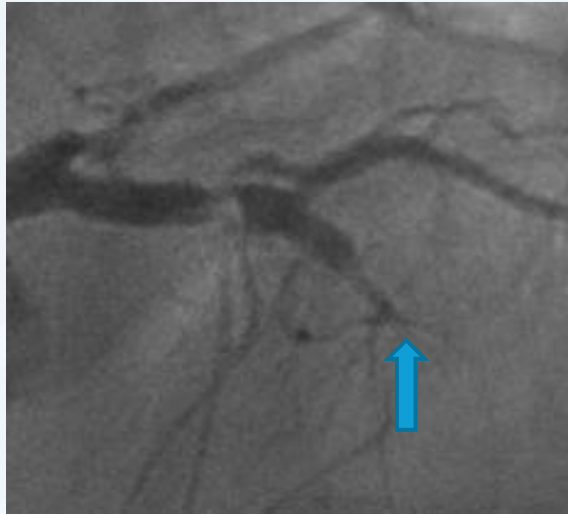
15 días tras la coronariografía
previa se programa ICP a DA.

Set:

- Acceso radial izquierdo distal slender 7F.
- Acceso radial derecho slender 7F.
- Catéter guía:
 - TCI: EBU 3.75.
 - CD: AL1.





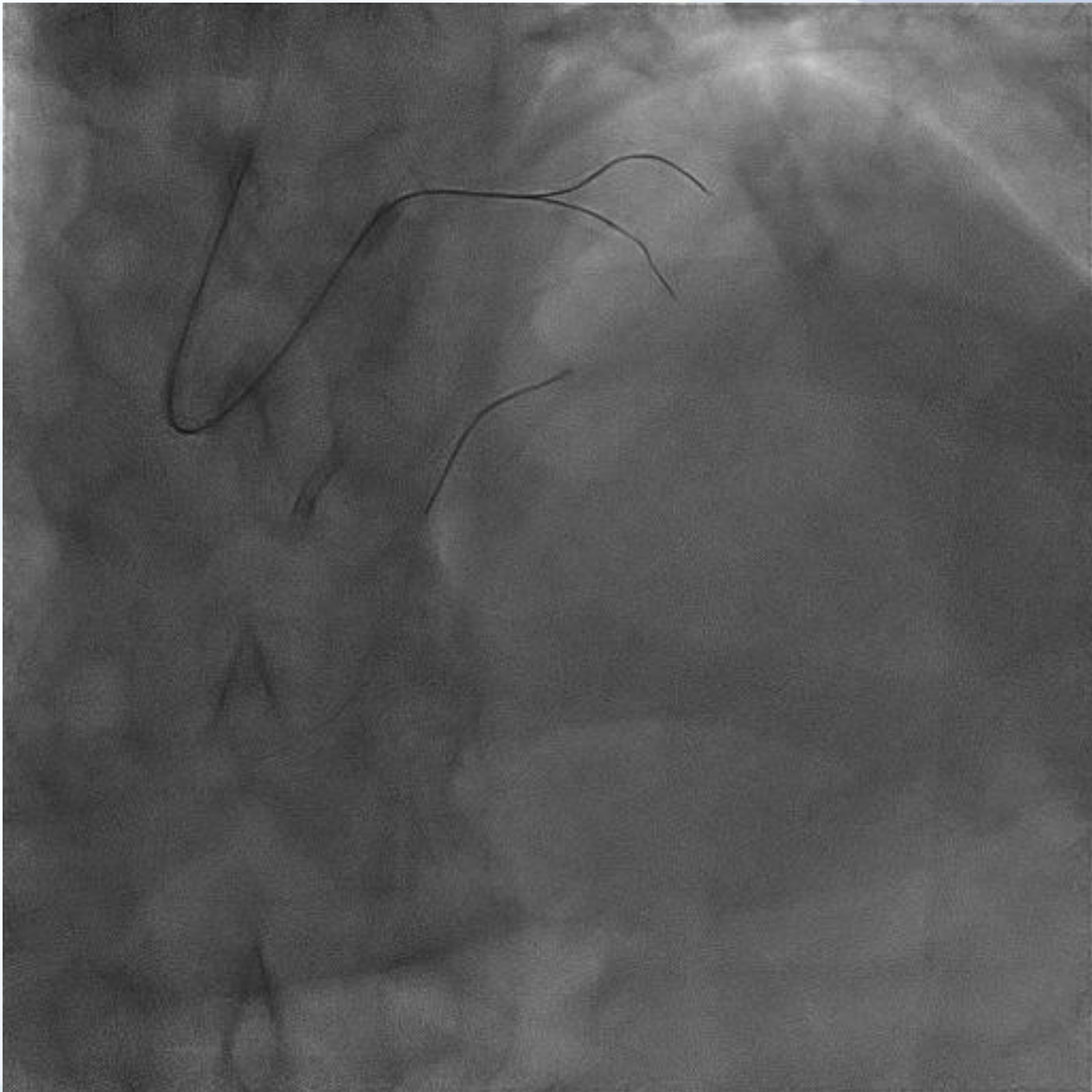


<i>J CTO SCORE</i>	<i>Difficulty</i>
<i>Entry: tapered</i>	<i>0</i>
<i>Calcification: yes</i>	<i>1</i>
<i>Bending >45°: no</i>	<i>0</i>
<i>Oclusion lenght: <20mm</i>	<i>0</i>
<i>Retry lesion: no</i>	<i>0</i>

AWE



Fielder XTR

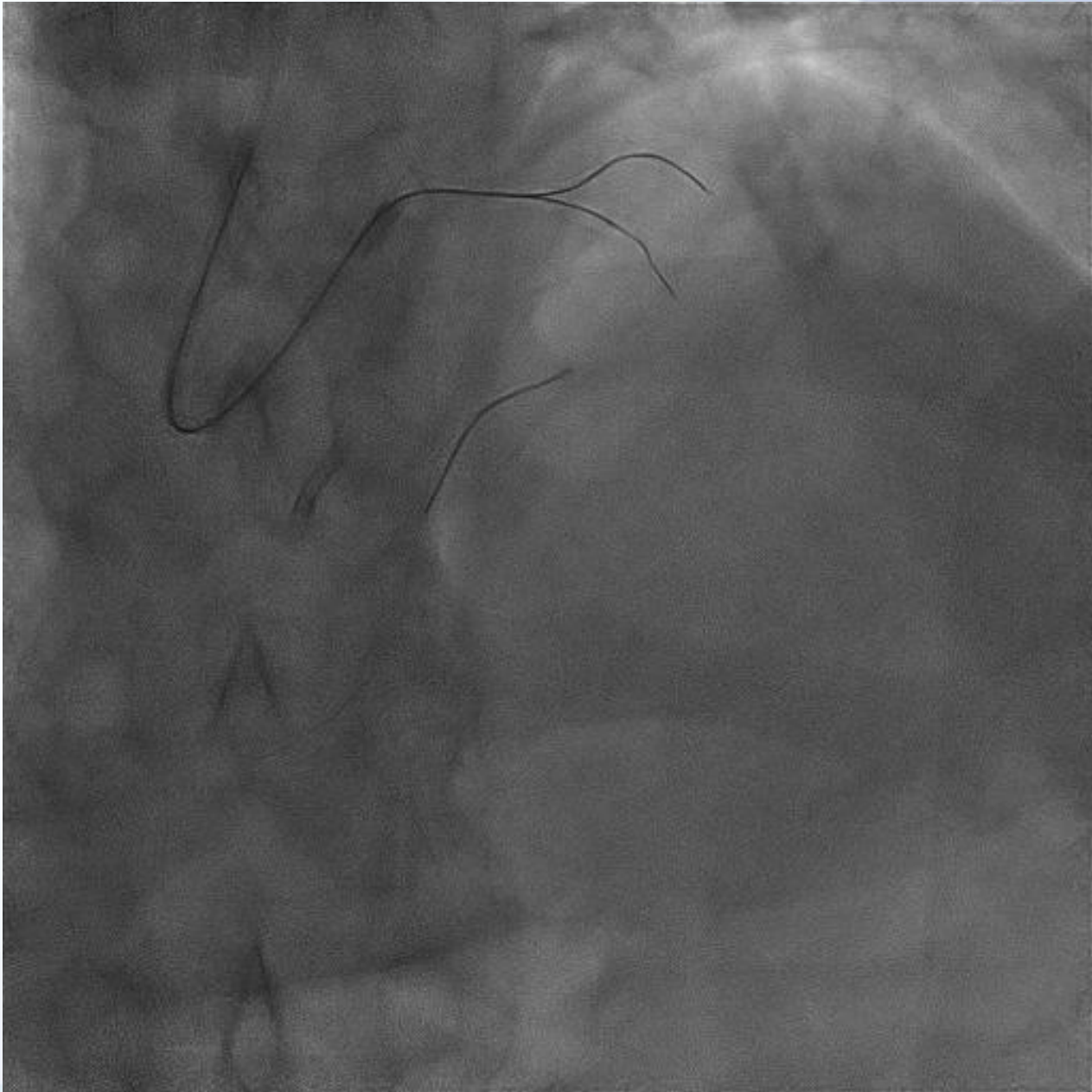


AWE



Fielder XTR

UB3



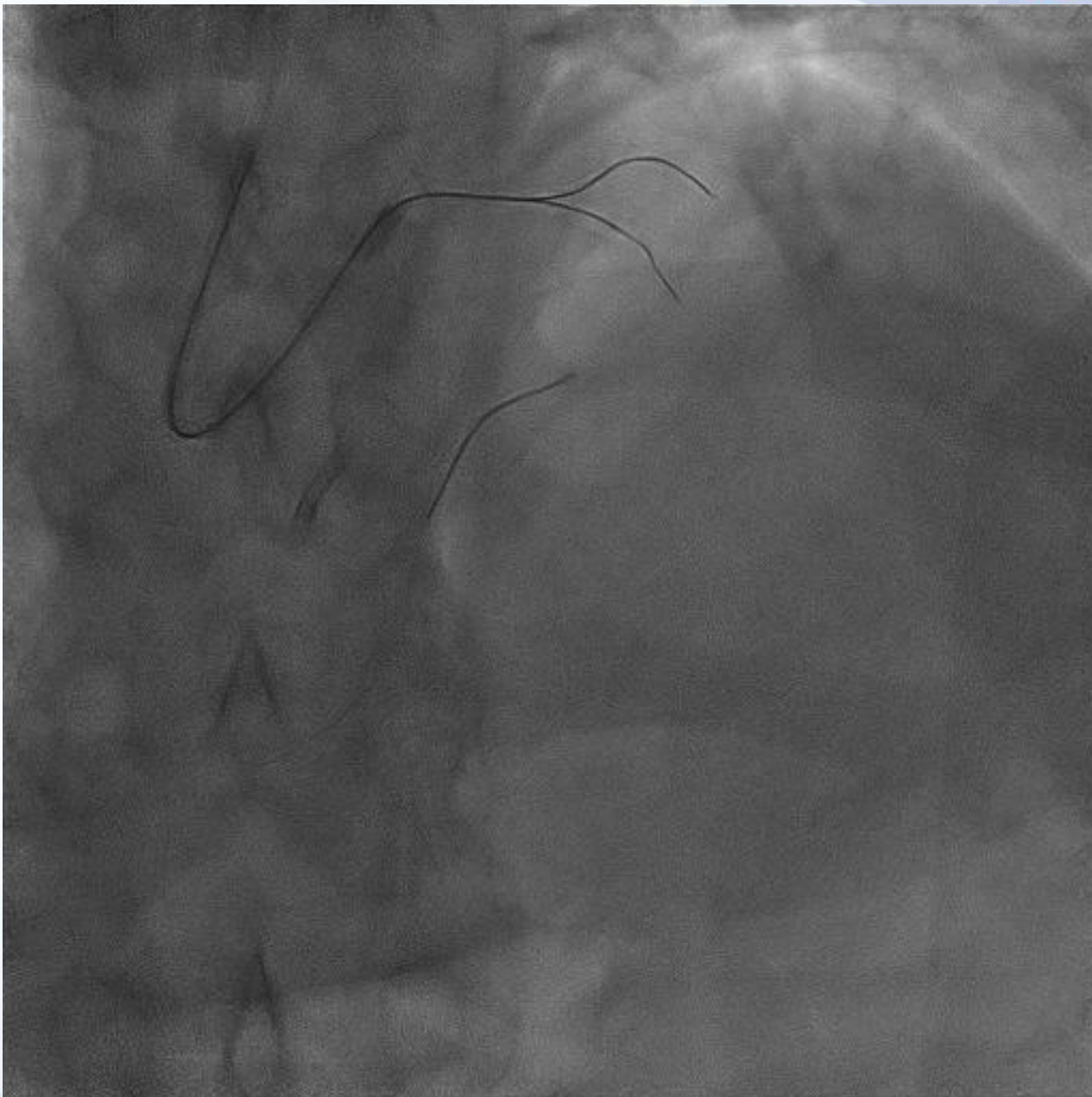
AWE

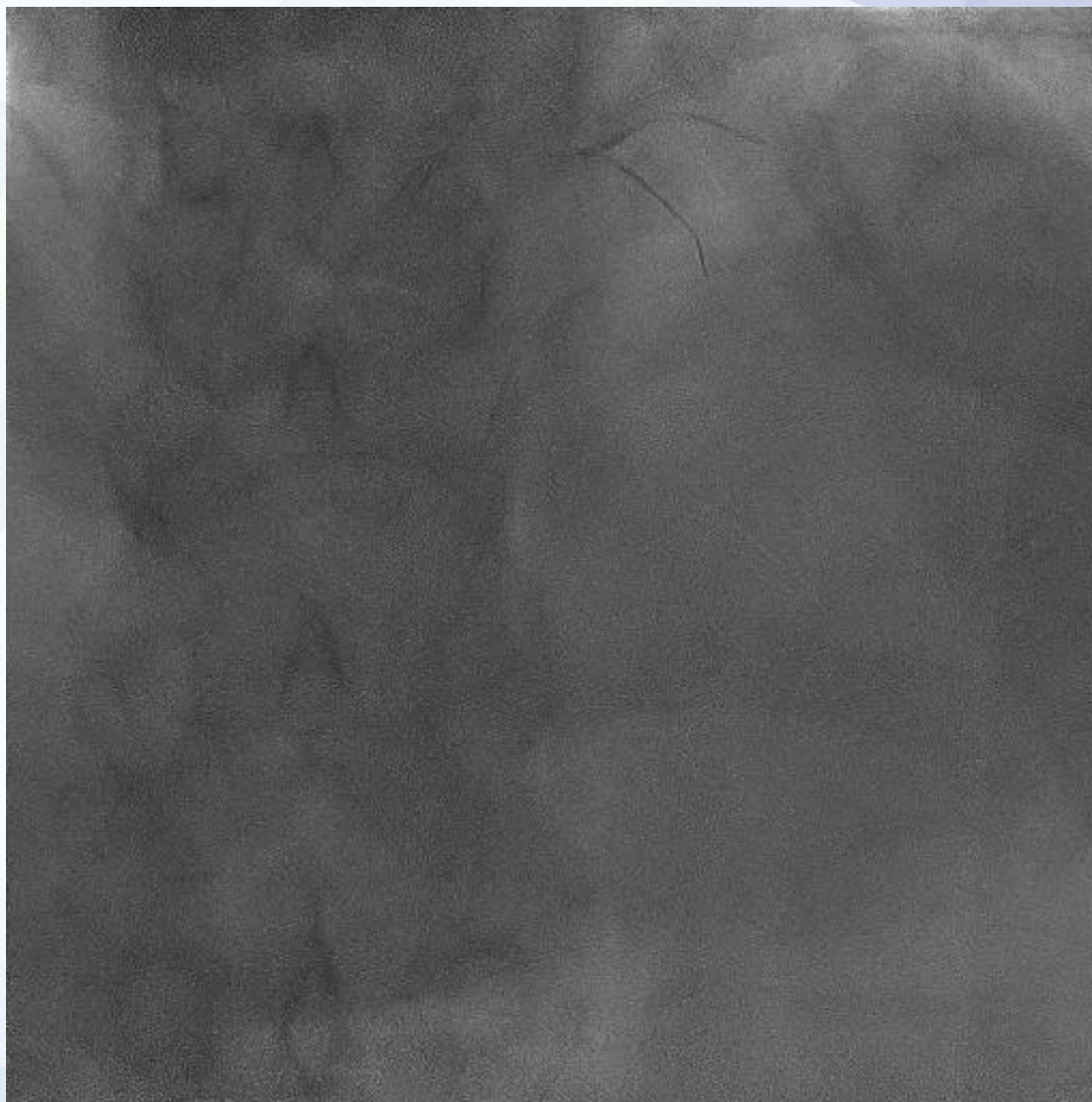
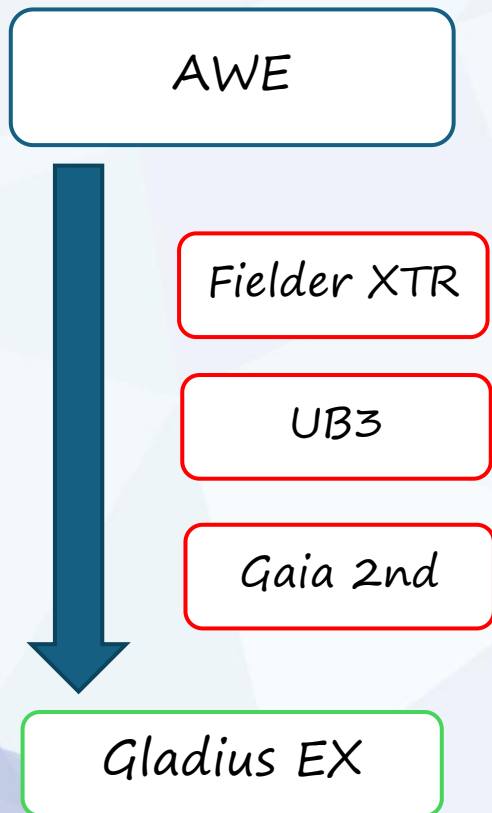


Fielder XTR

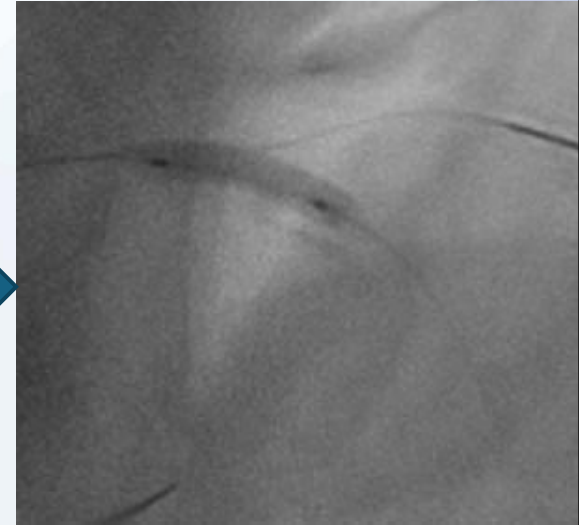
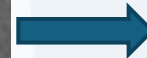
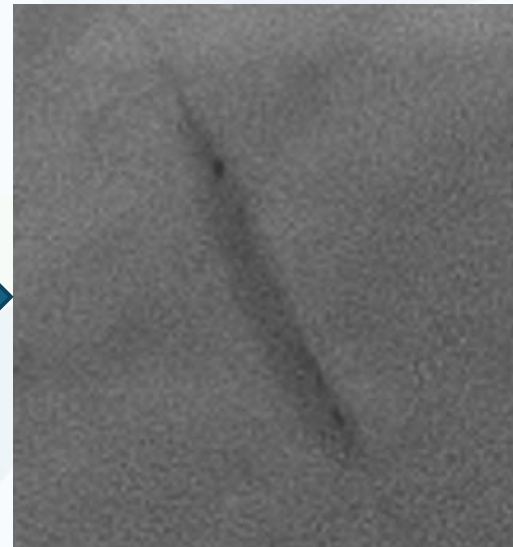
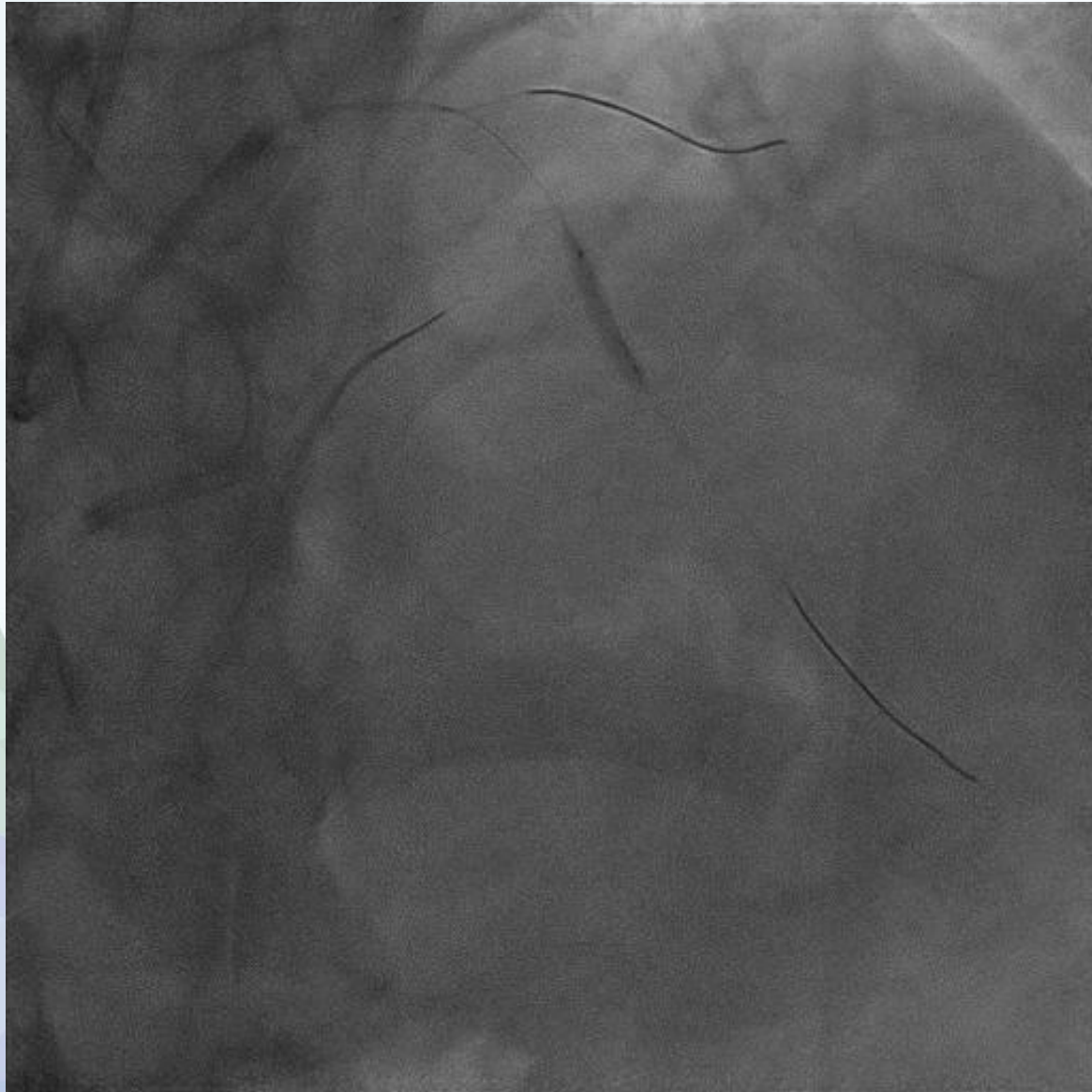
UB3

Gaia 2nd



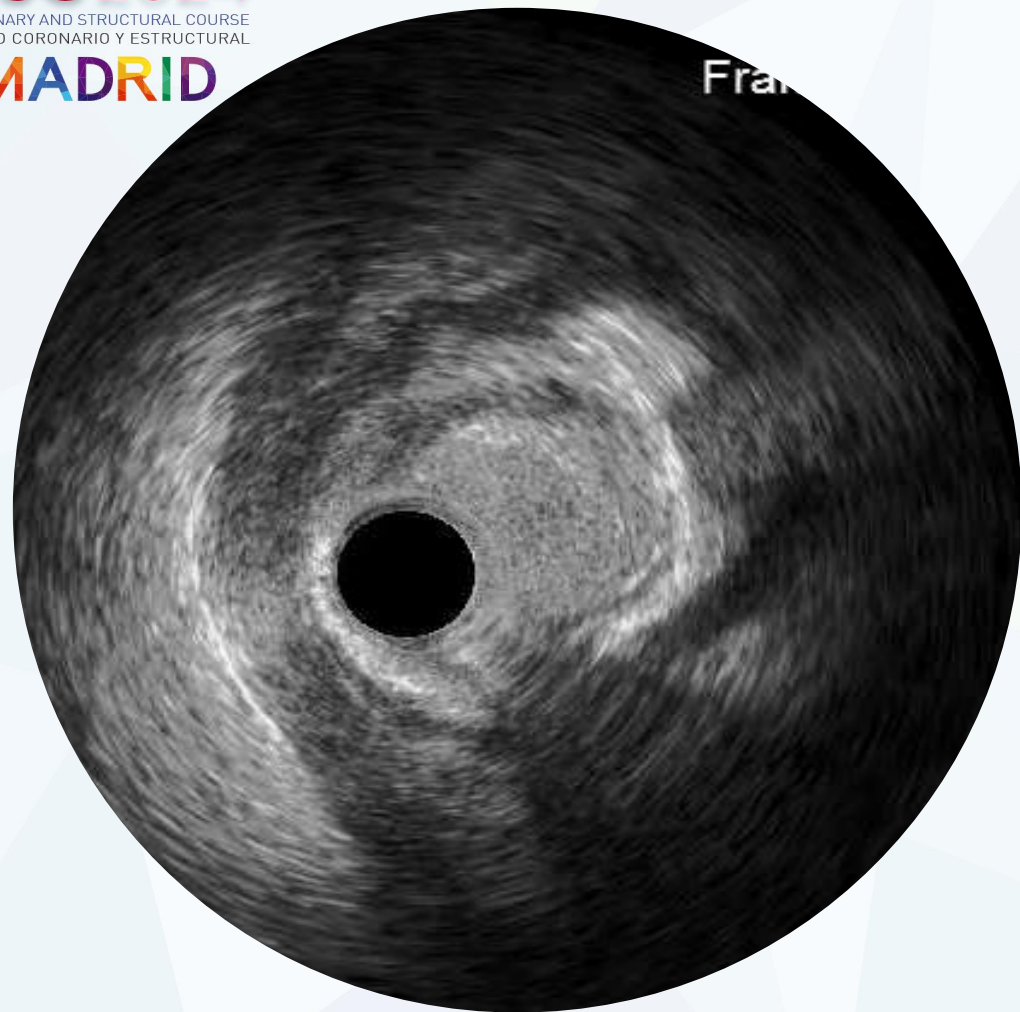


Predilatación con balón SC
2.00*15mm

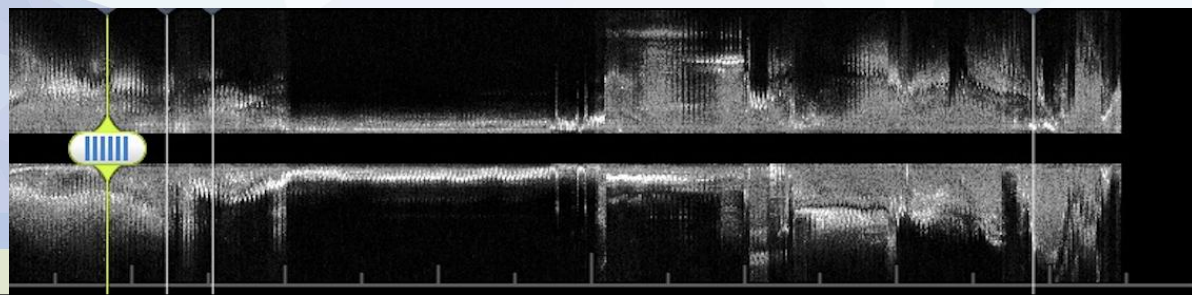
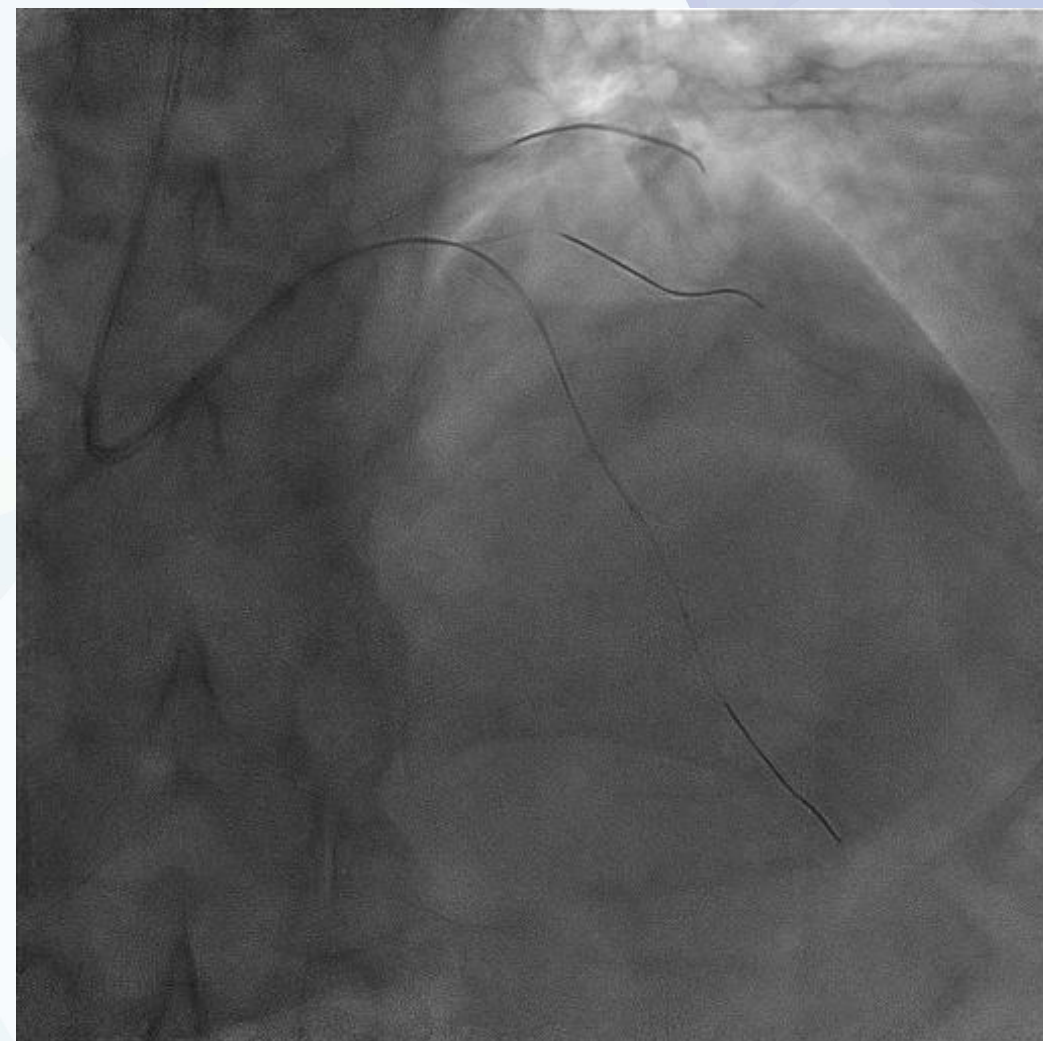


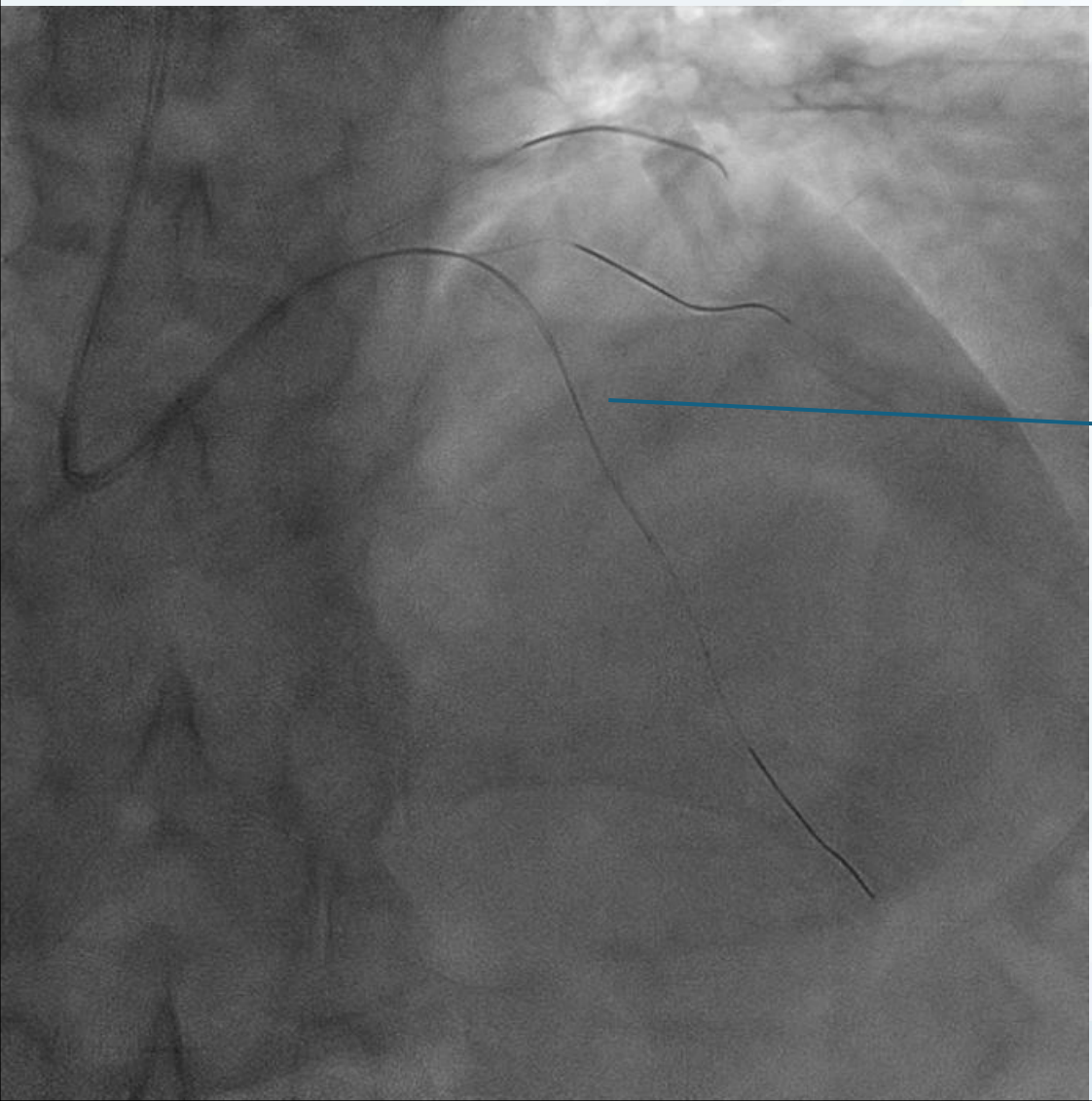
¿Siguiente paso?

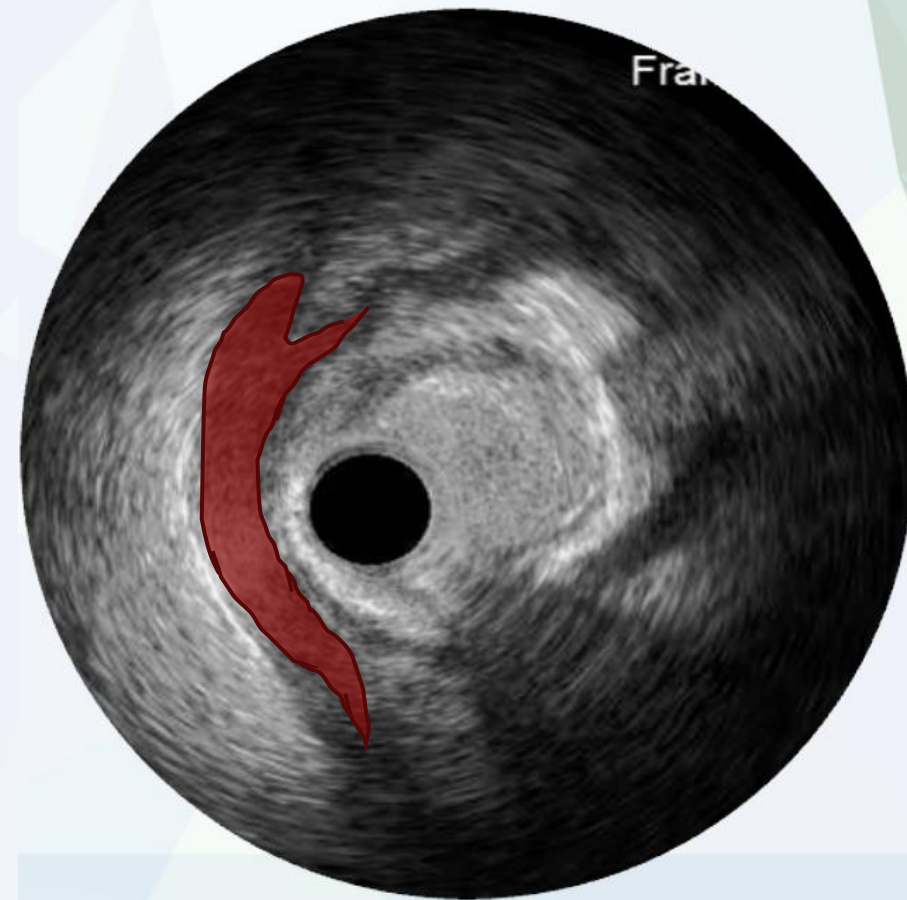
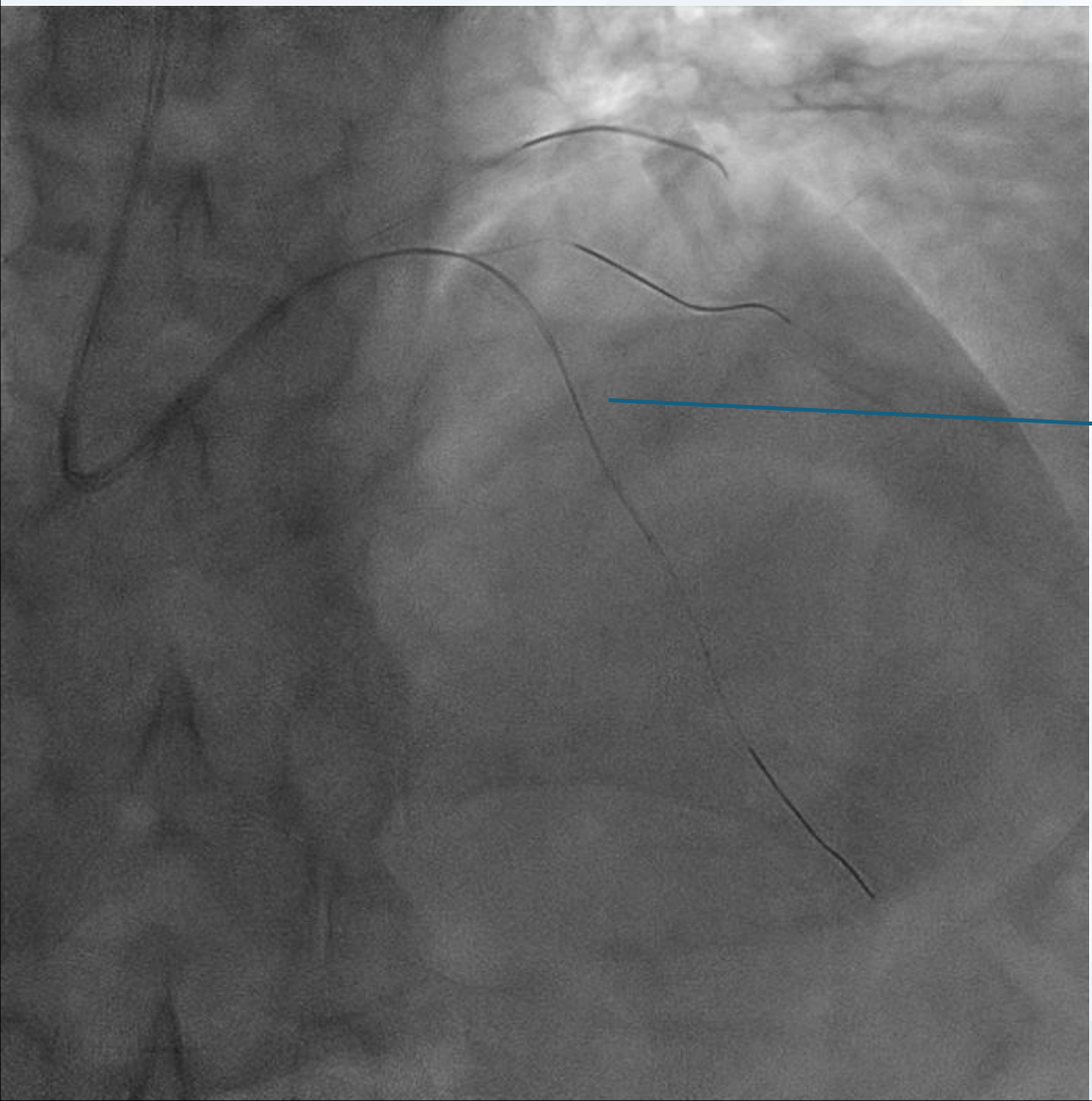
- *Completar predilatación.*
- *Implantar stents.*
- *Imagen intravascular.*

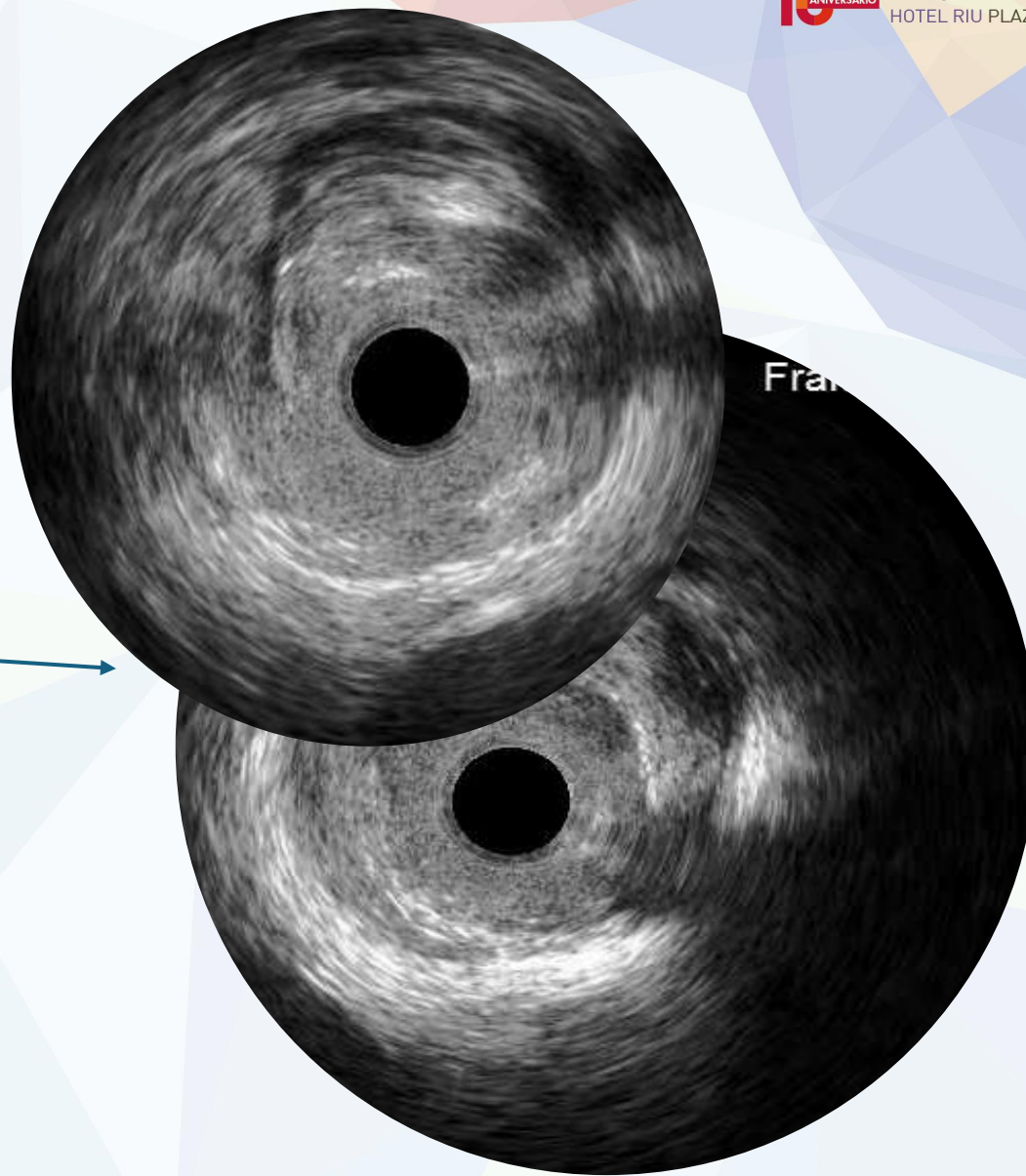
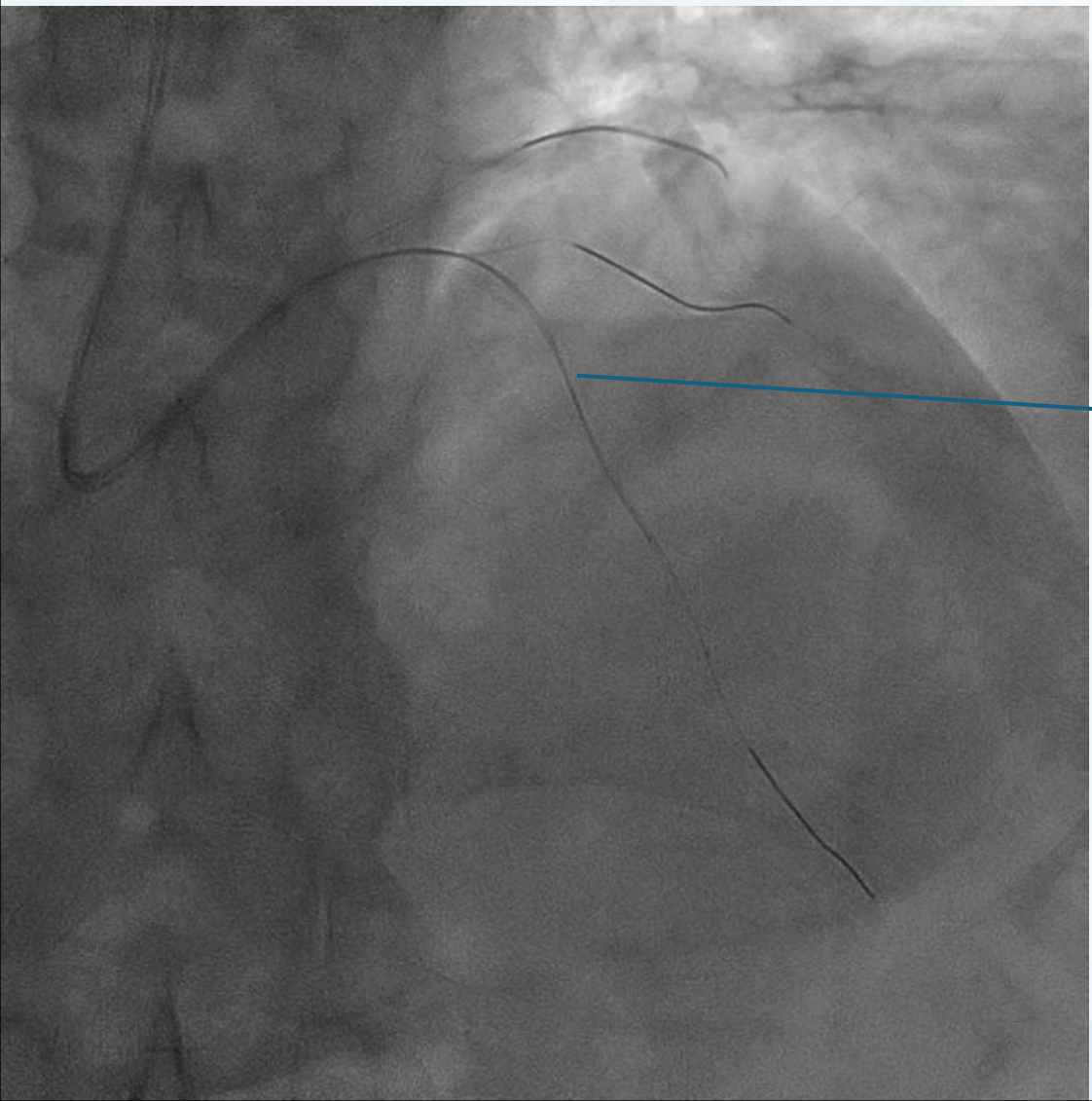


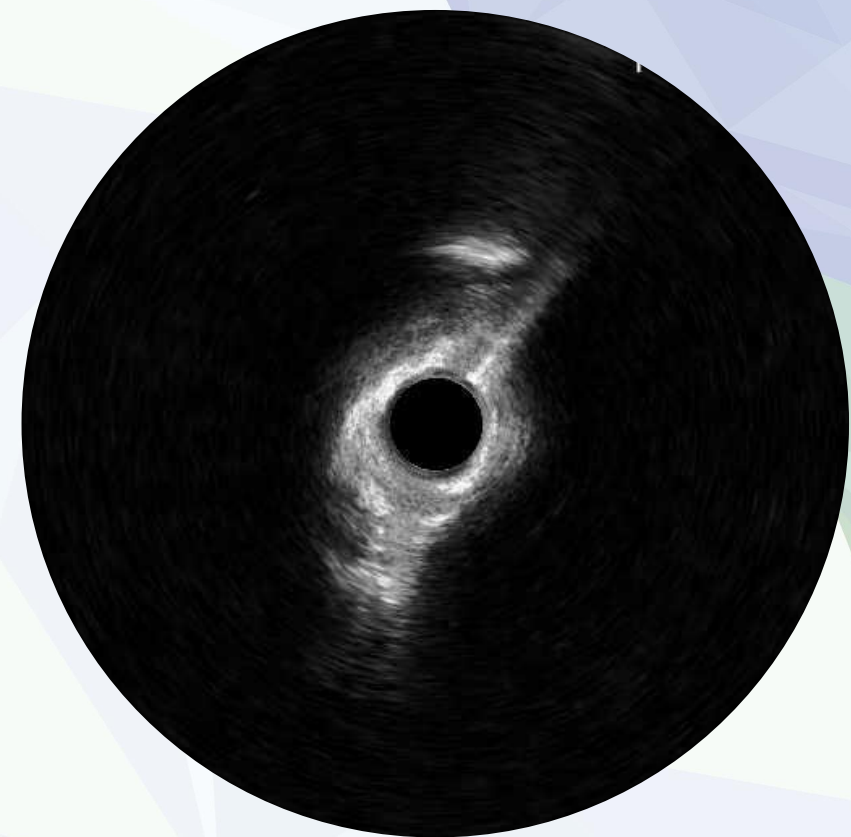
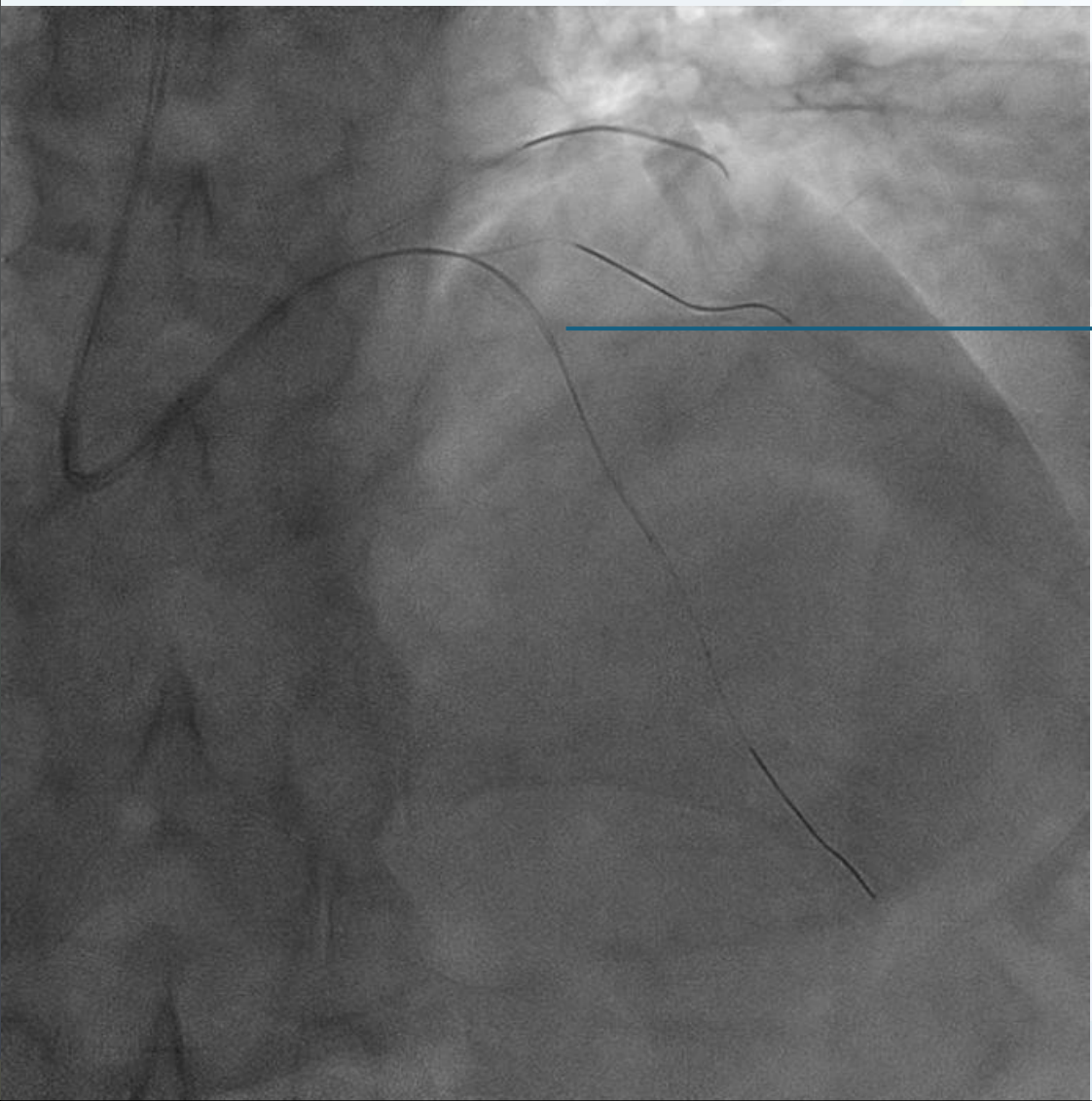
Fran

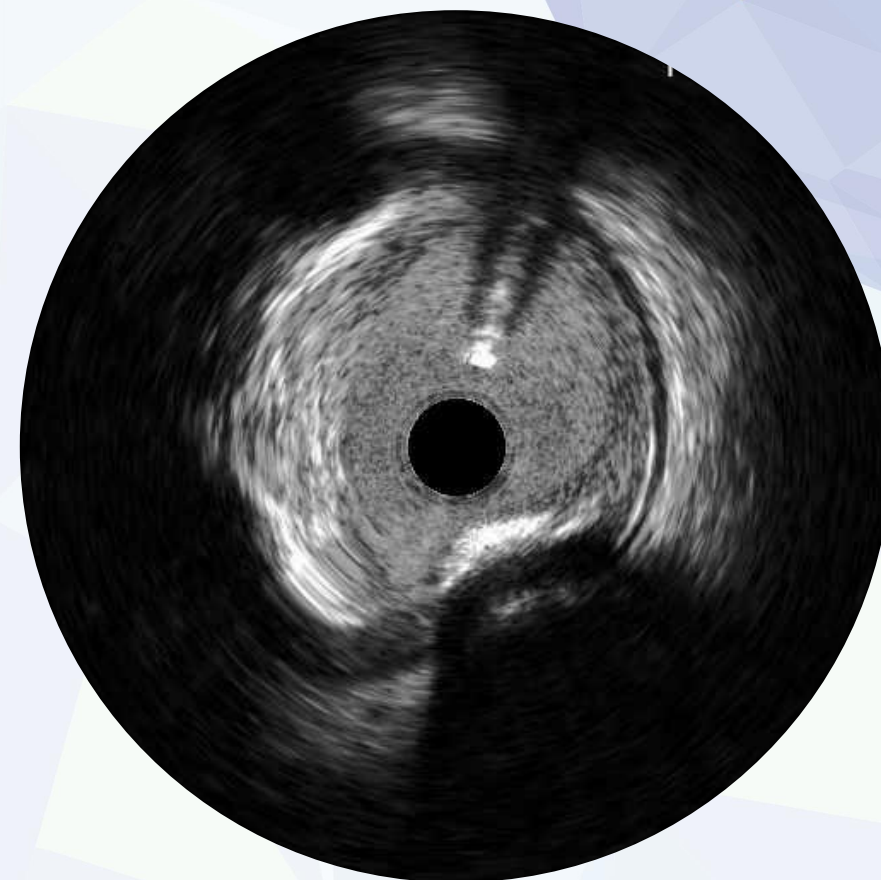
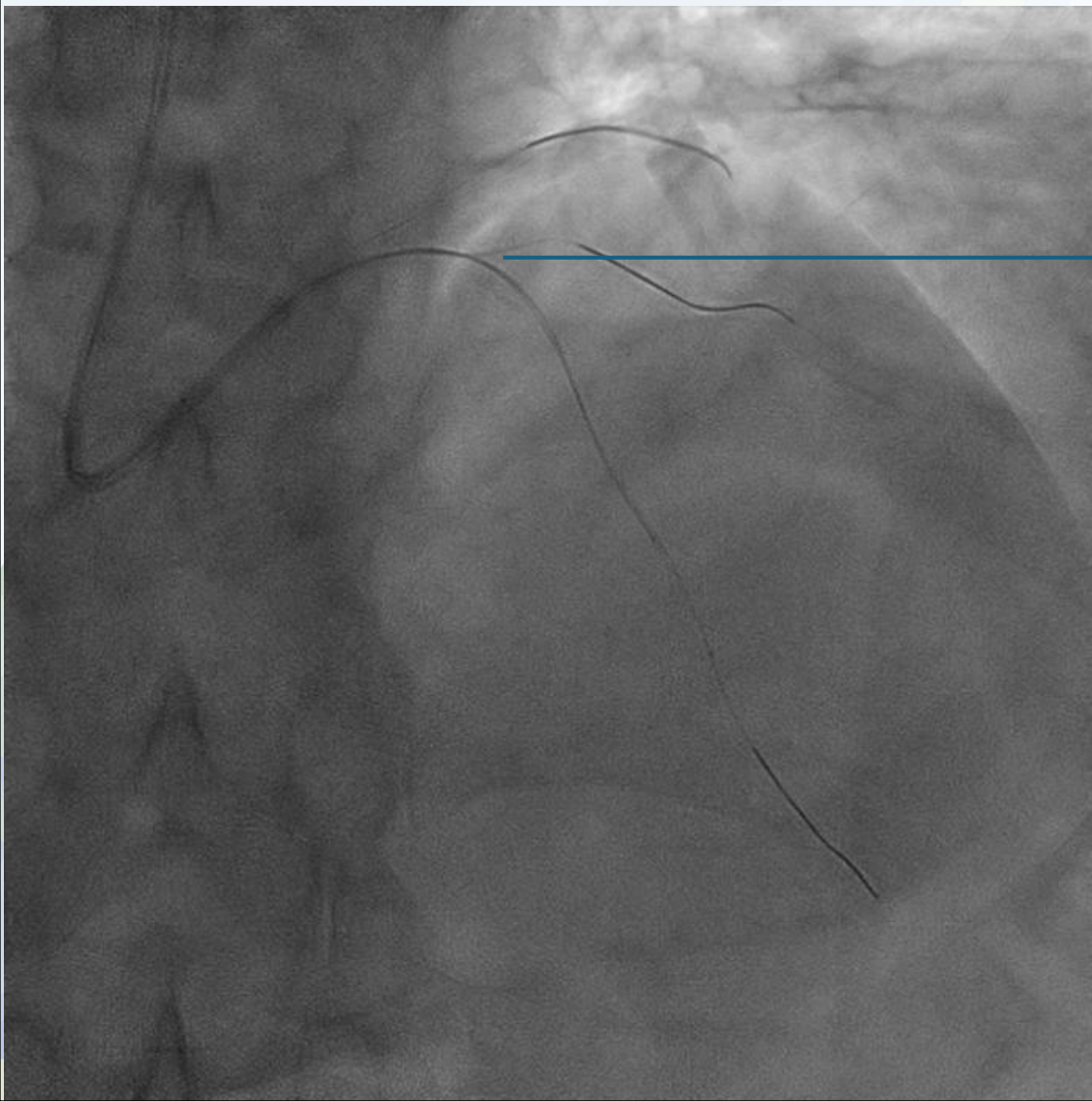




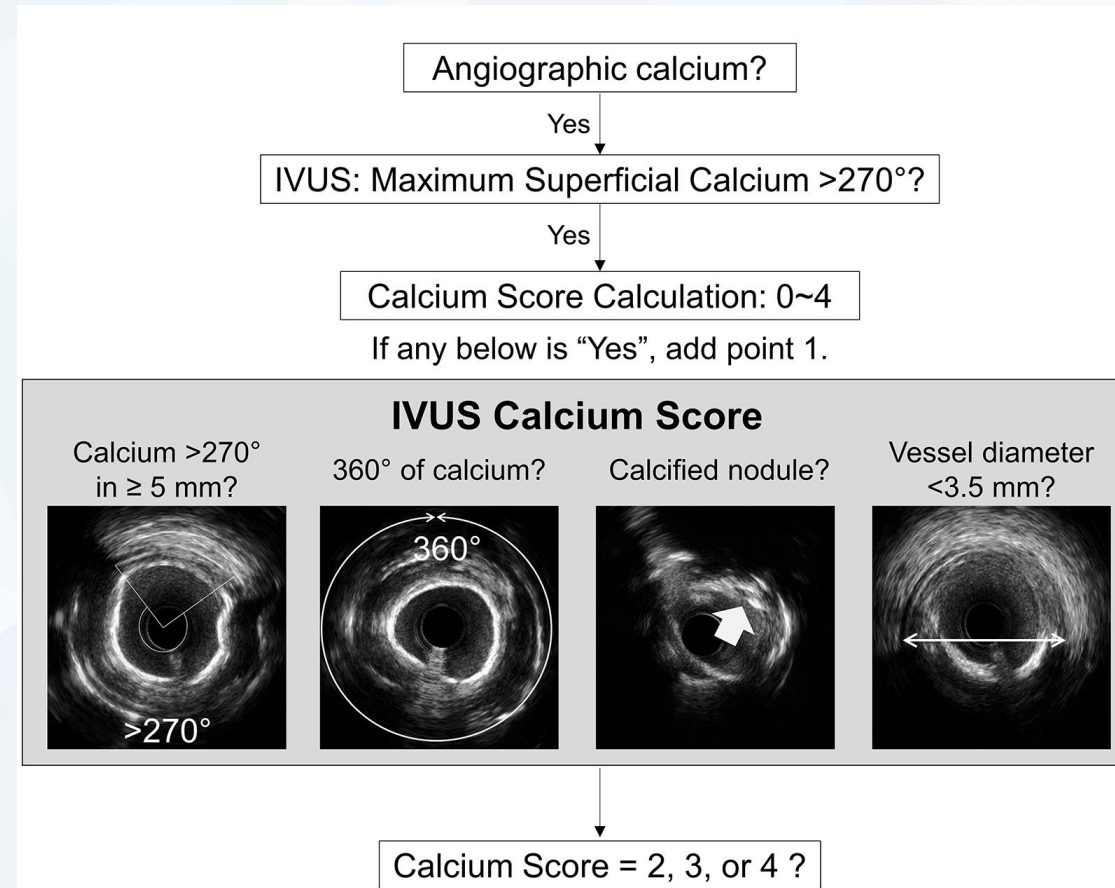






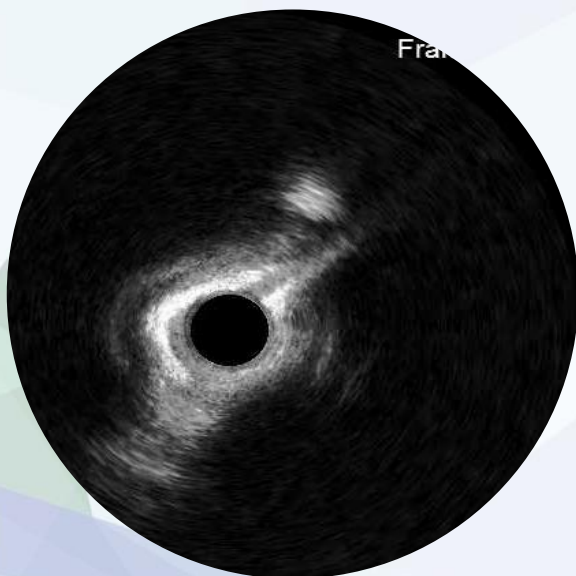


¿Requiere modificación de la placa?

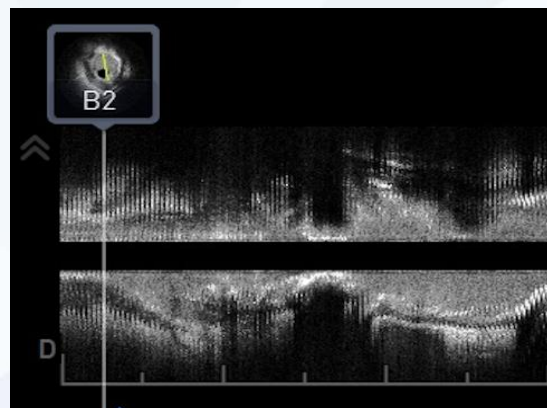


¿Requiere modificación de la placa?

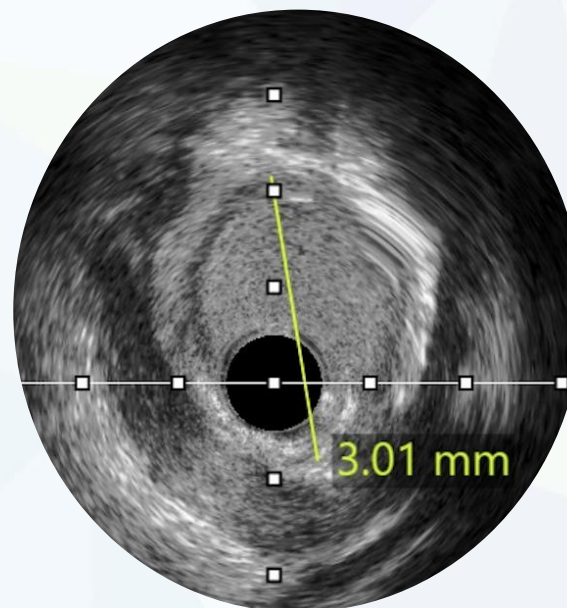
1



2

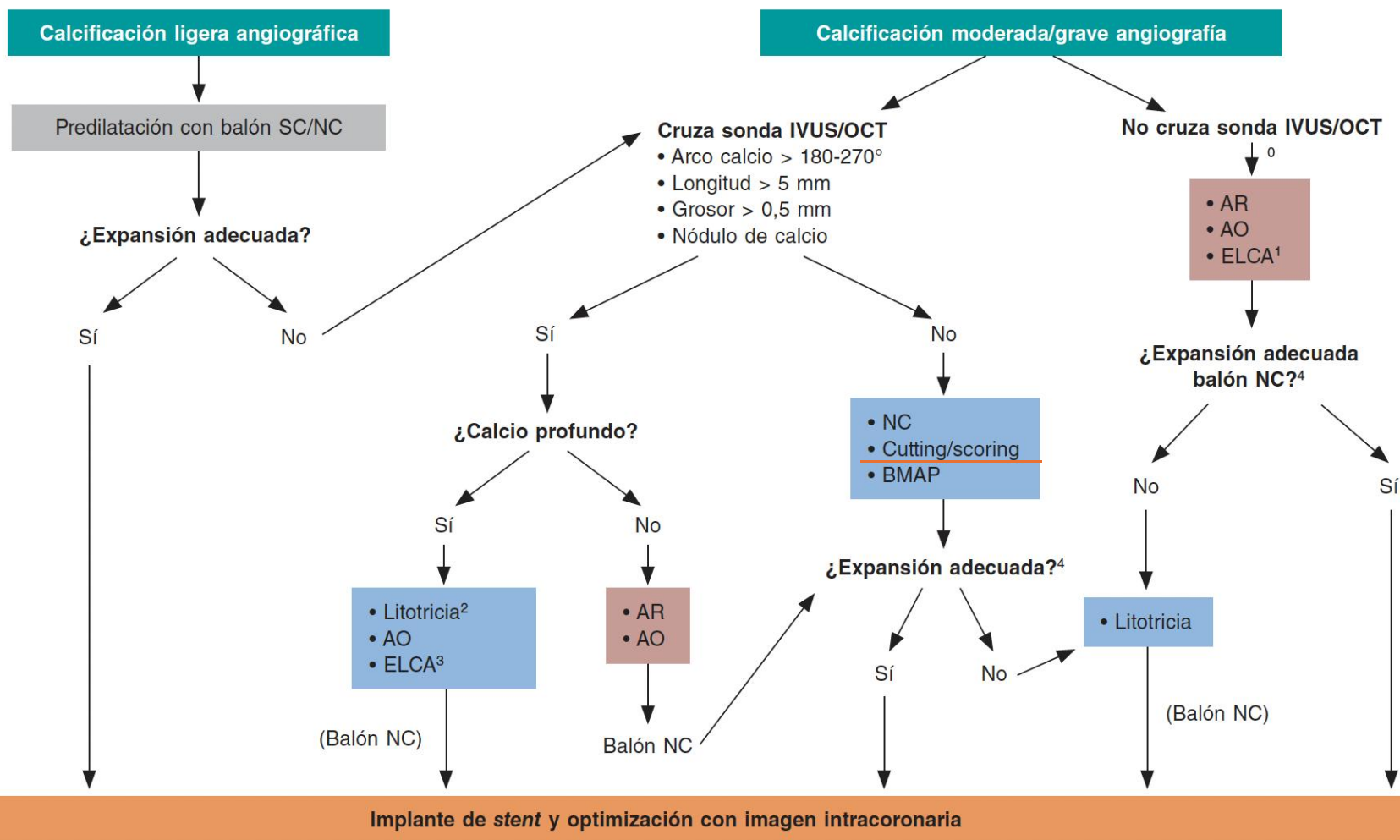


3

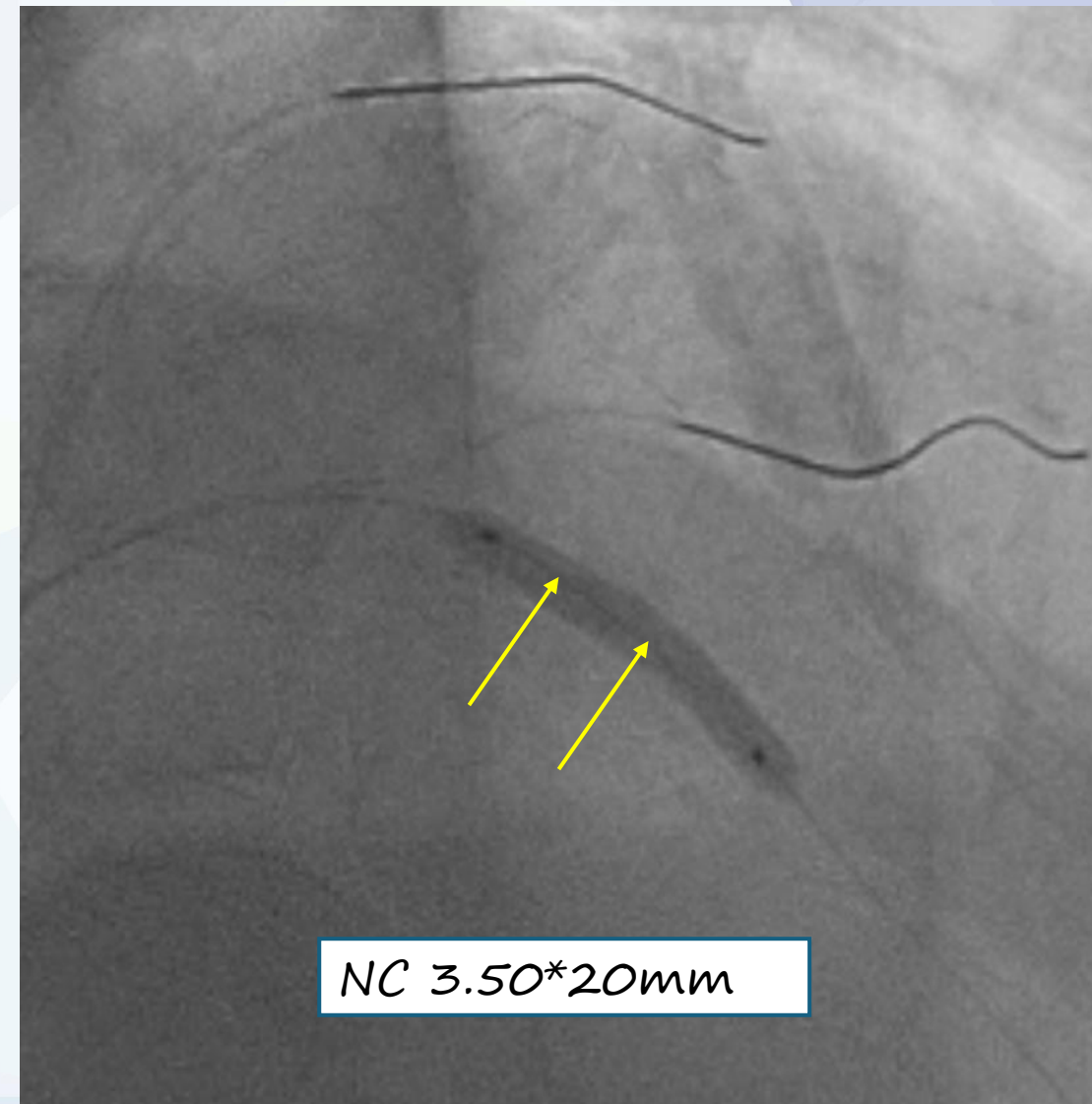
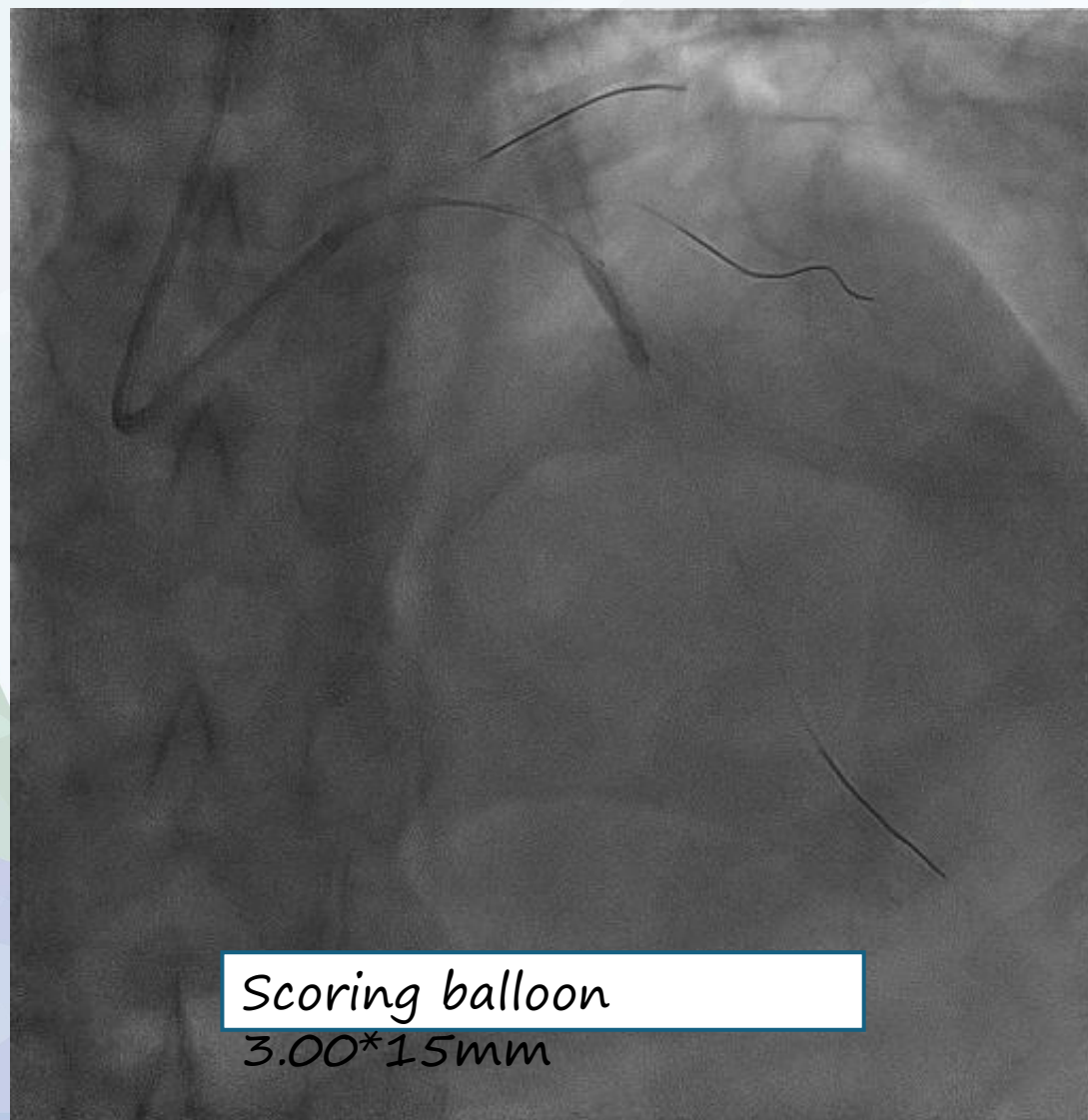


ITEM		Puntuación
1	Arco de calcio	360°
2	Longitud	270° > 5mm
3	Tipo	No nodular
3	Diámetro	<3.5mm

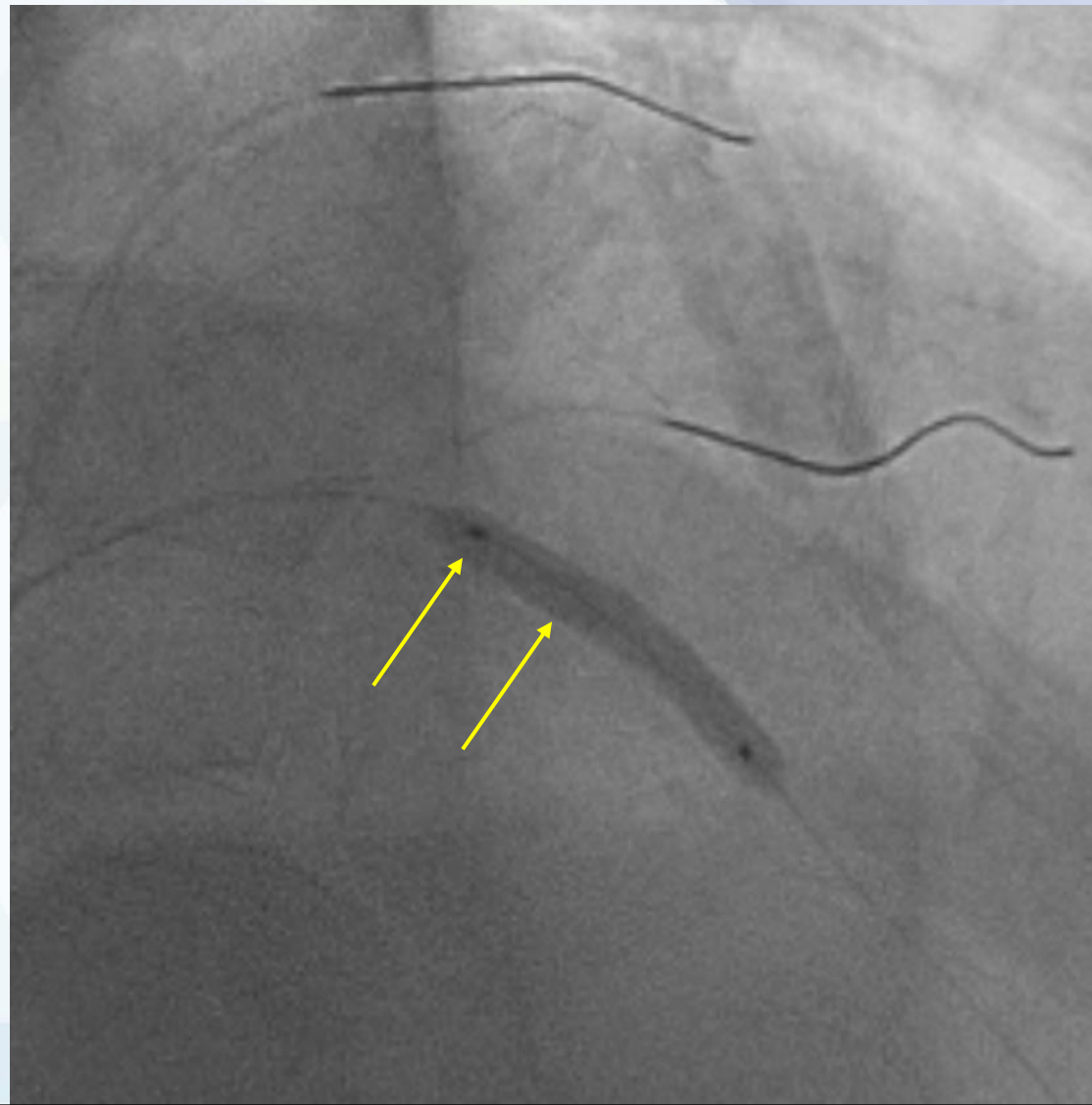
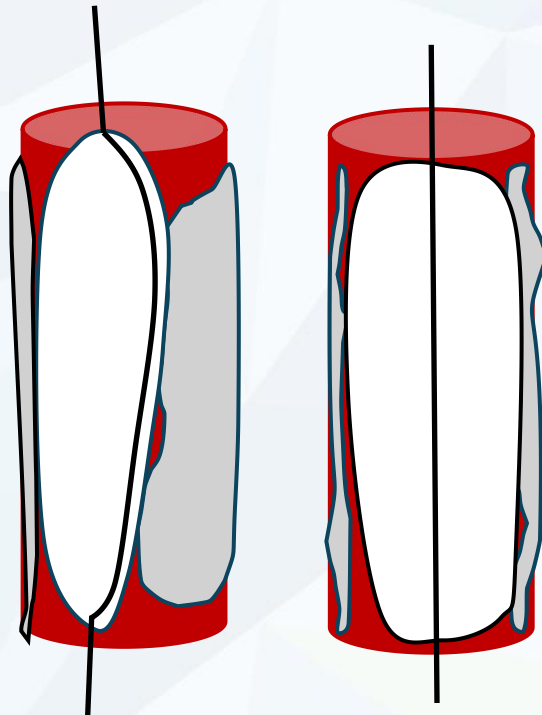
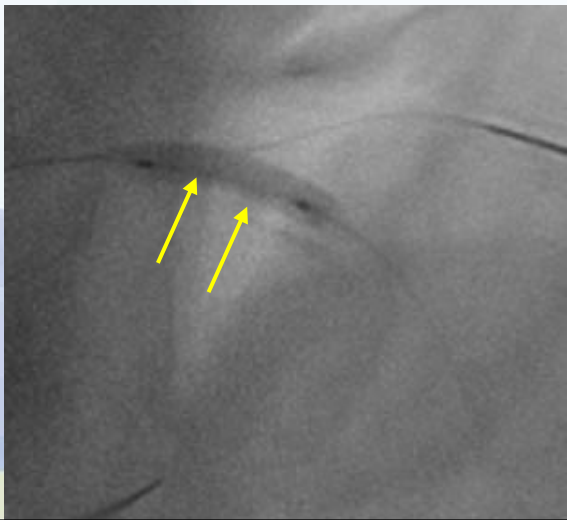
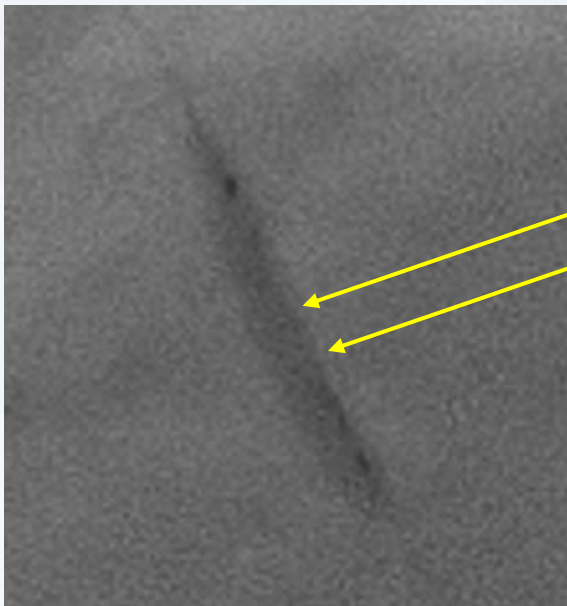
¿Requiere modificación de la placa?



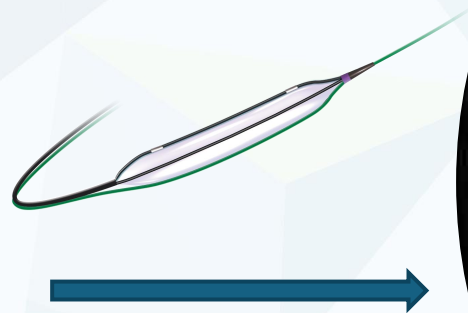
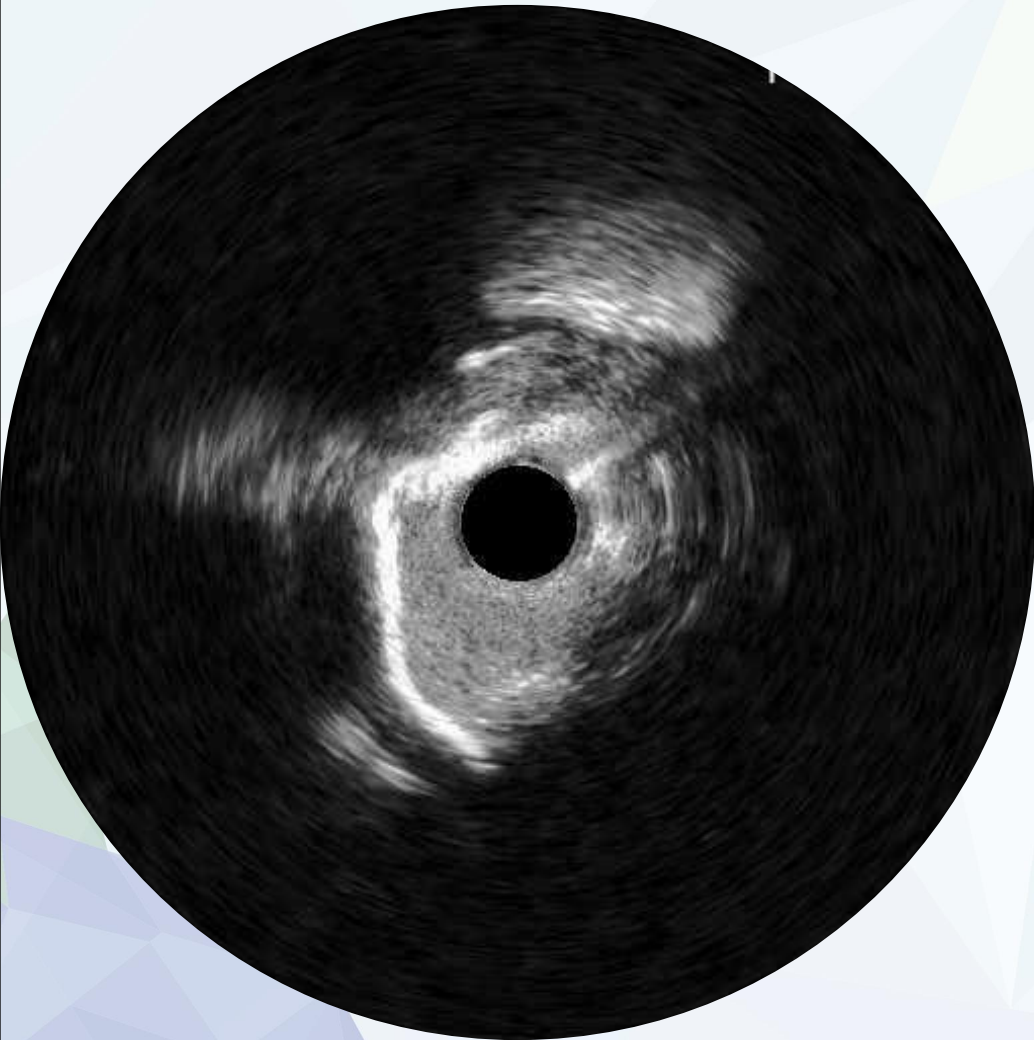
ITEM	Puntuación
1 Arco de calcio	360°
2 Longitud	270° > 5mm
3 Tipo	No nodular
3 Diámetro	<3.5mm



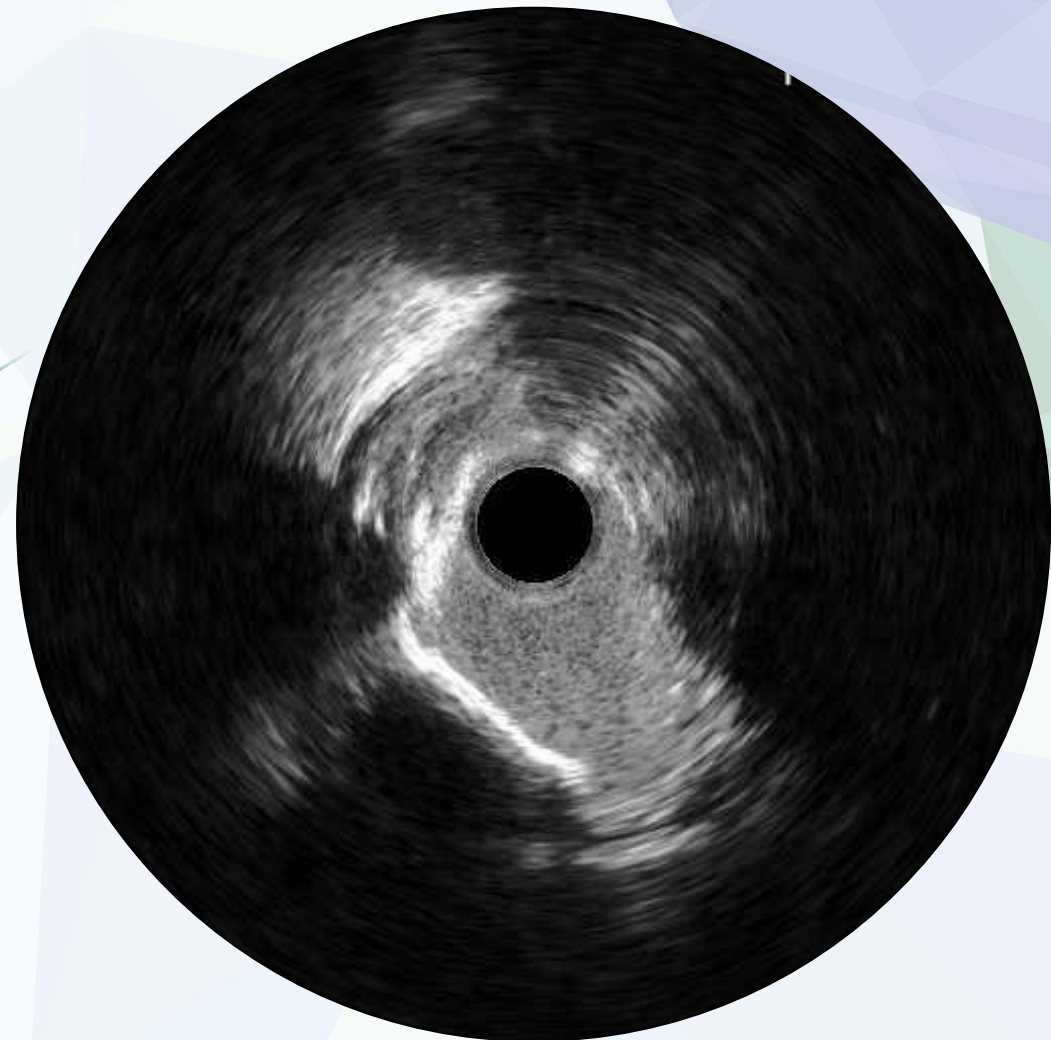
“Wire bias”



Pre



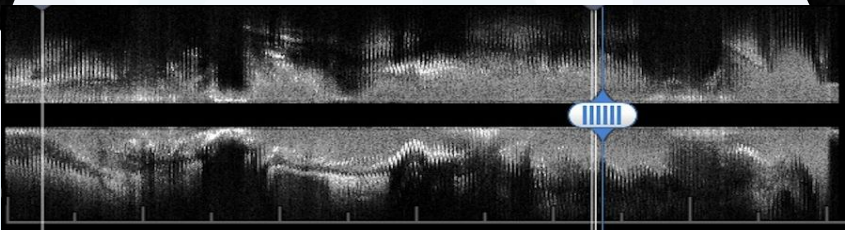
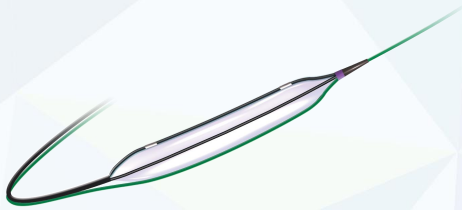
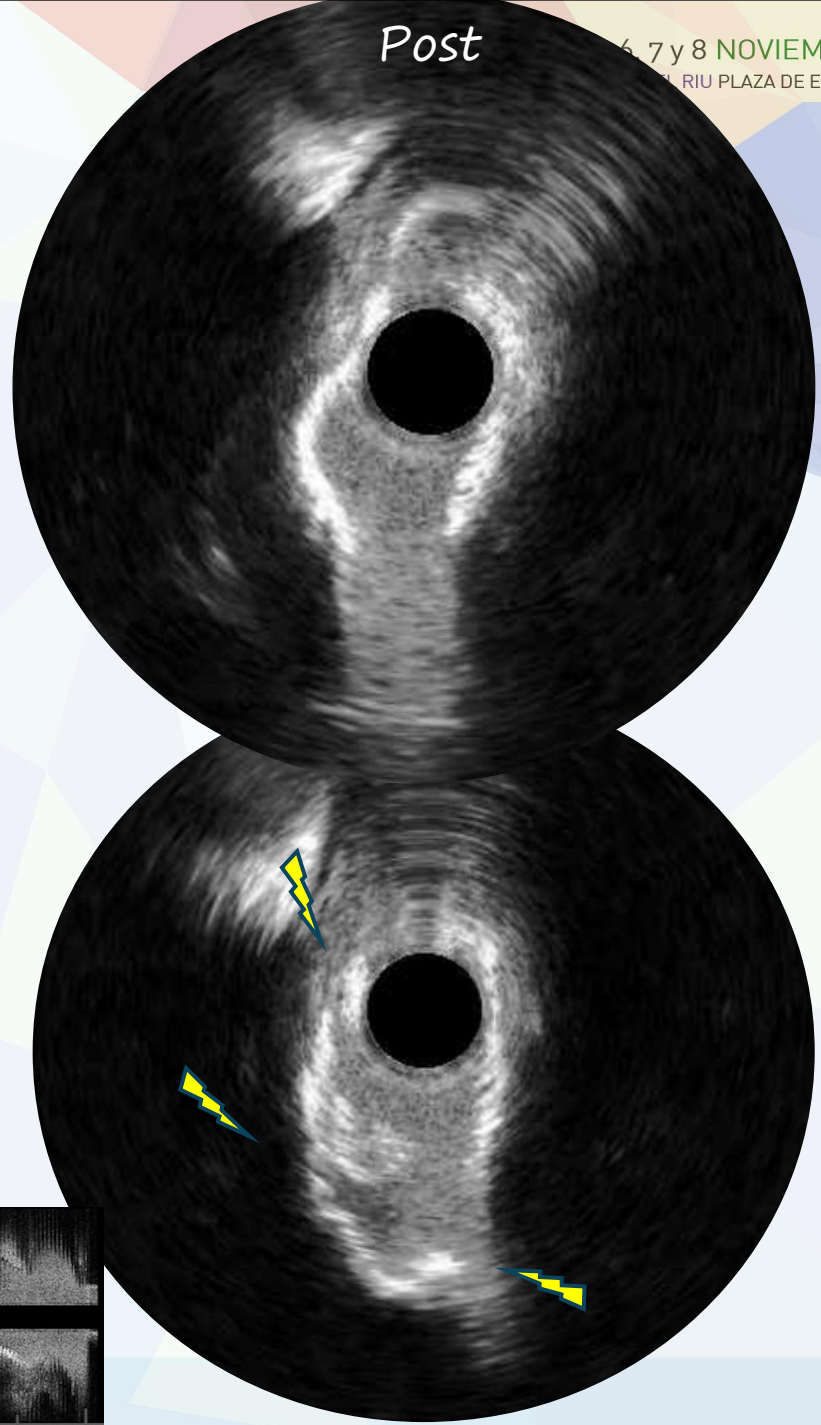
Post



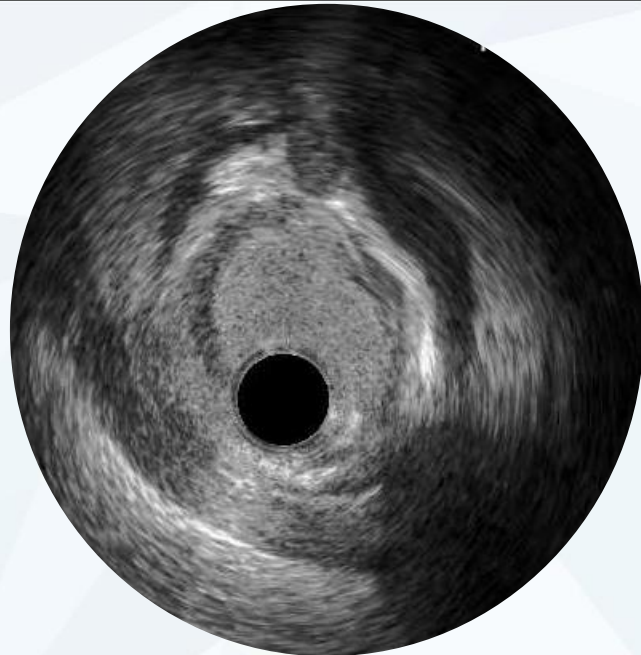
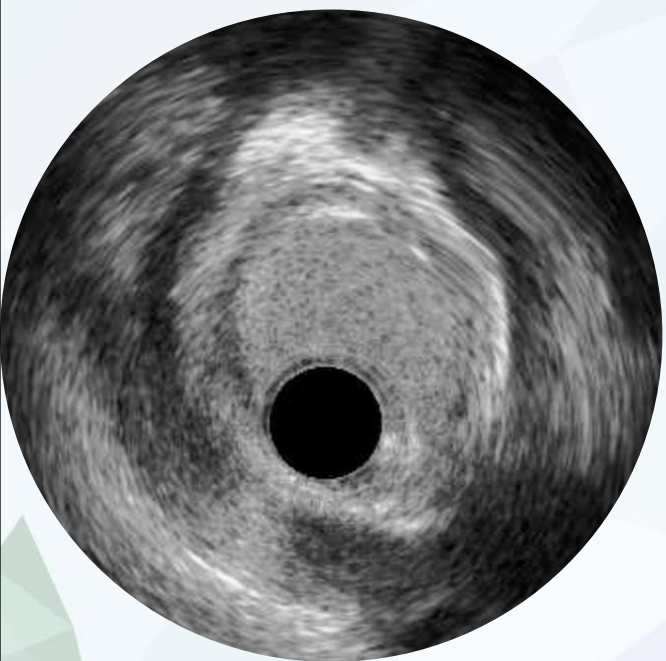
Pre



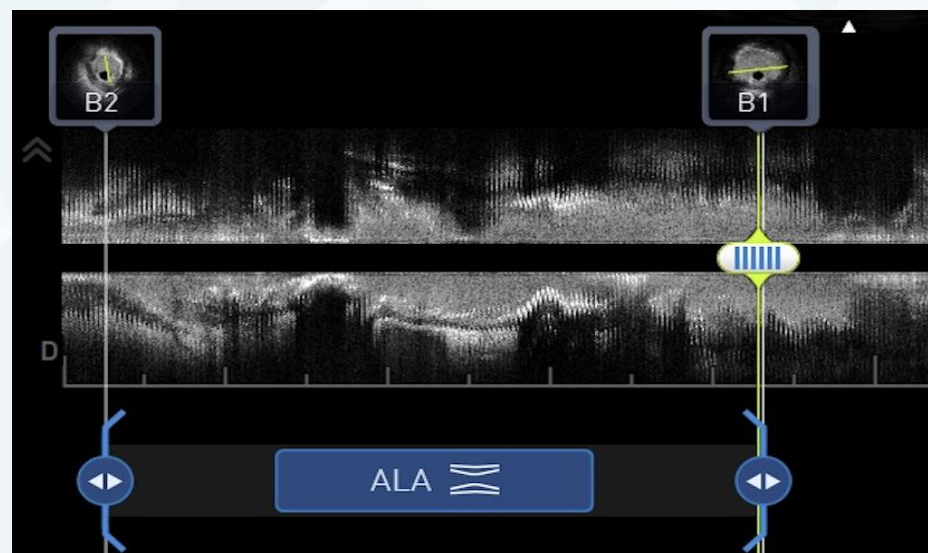
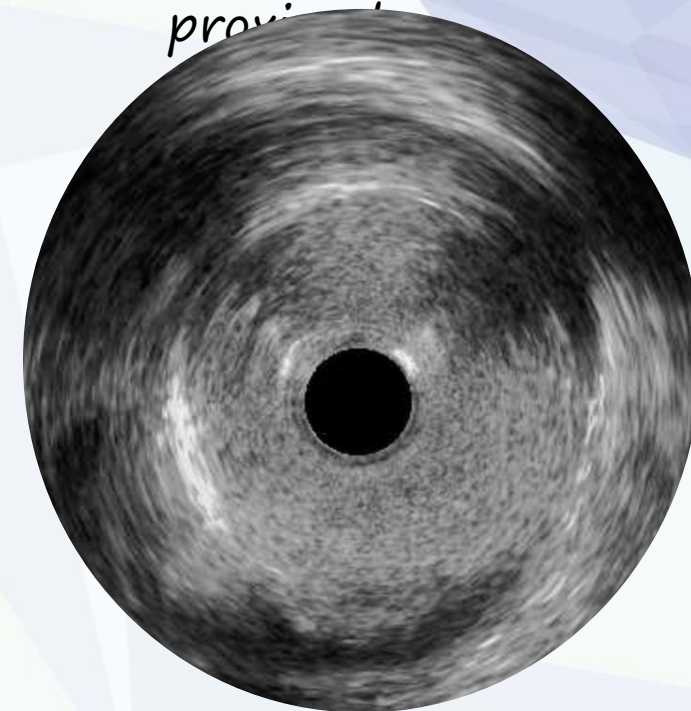
Post



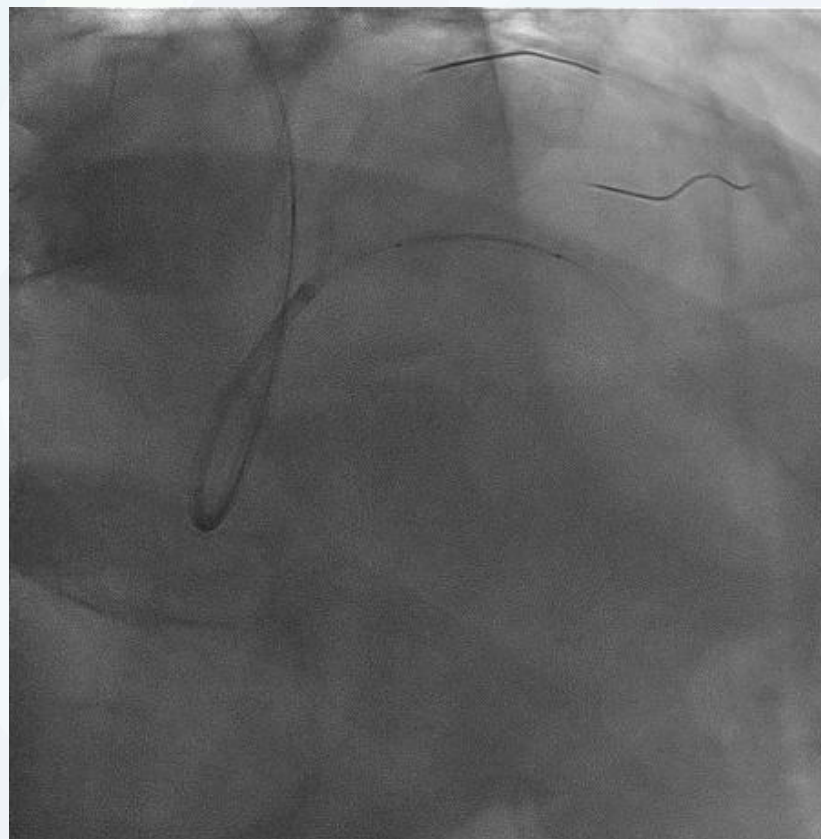
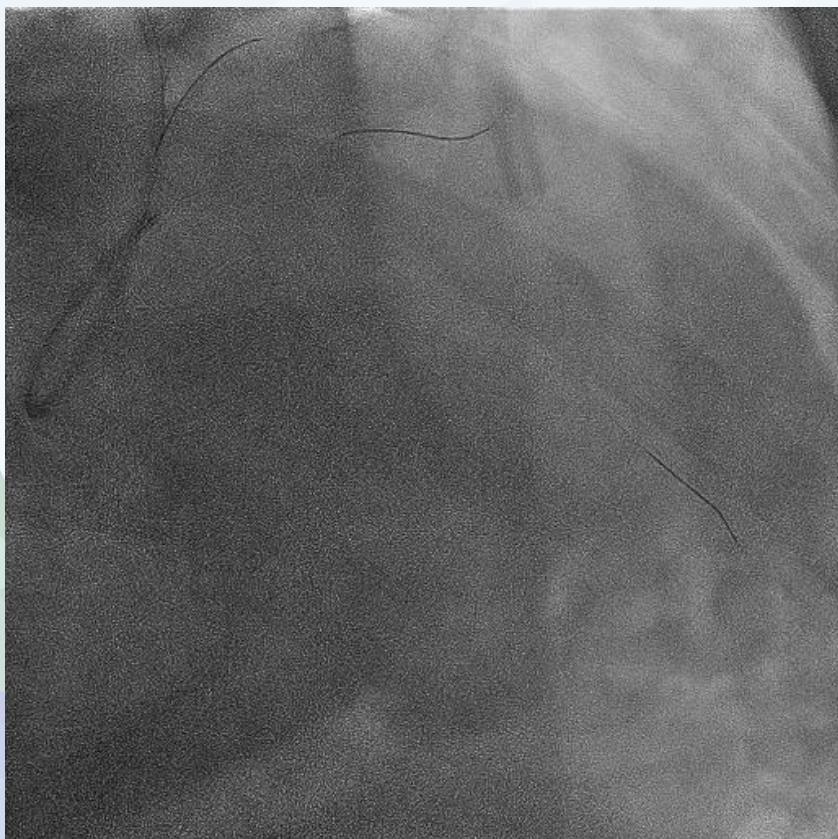
Landing distal



Landing proximal



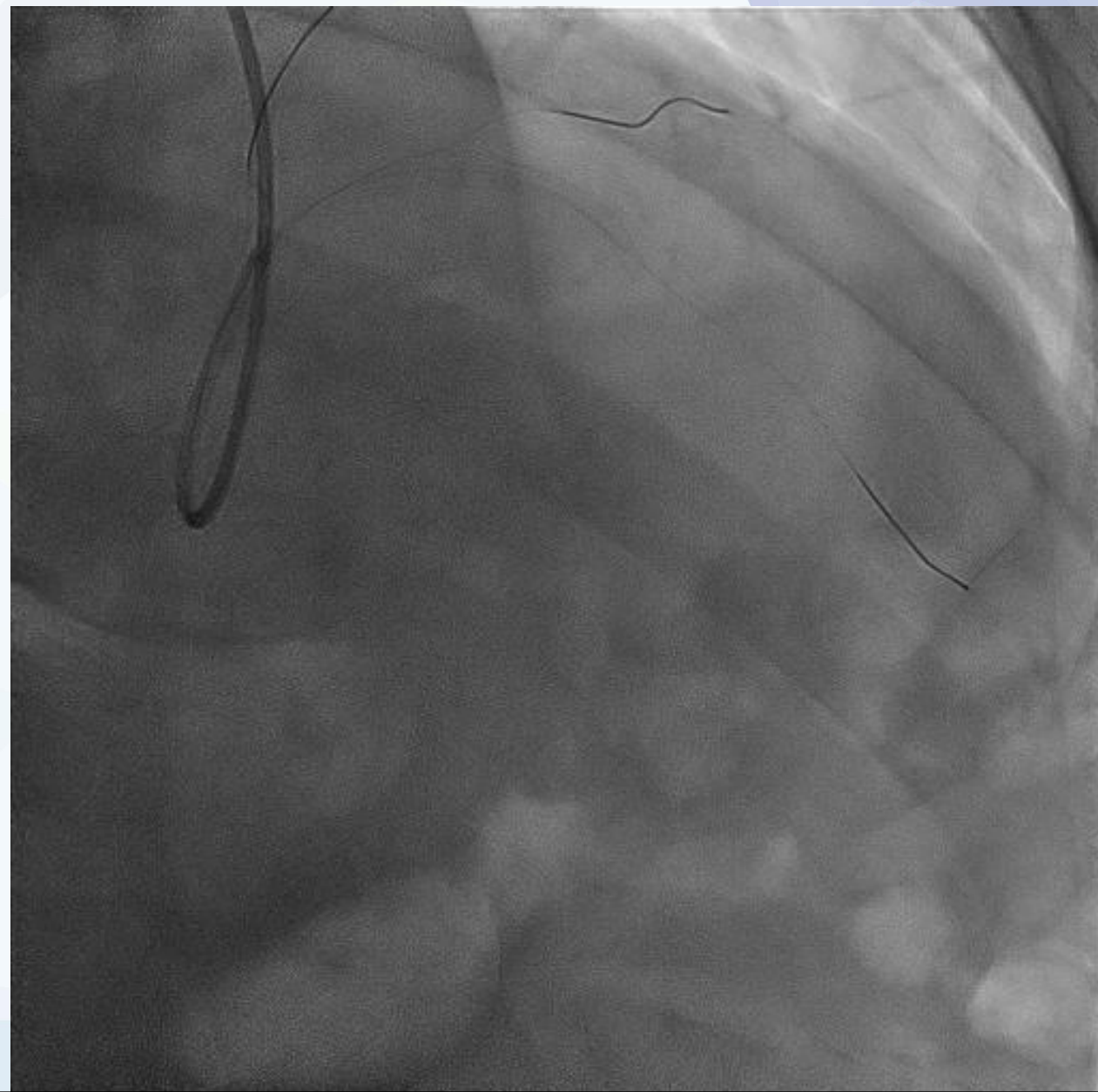
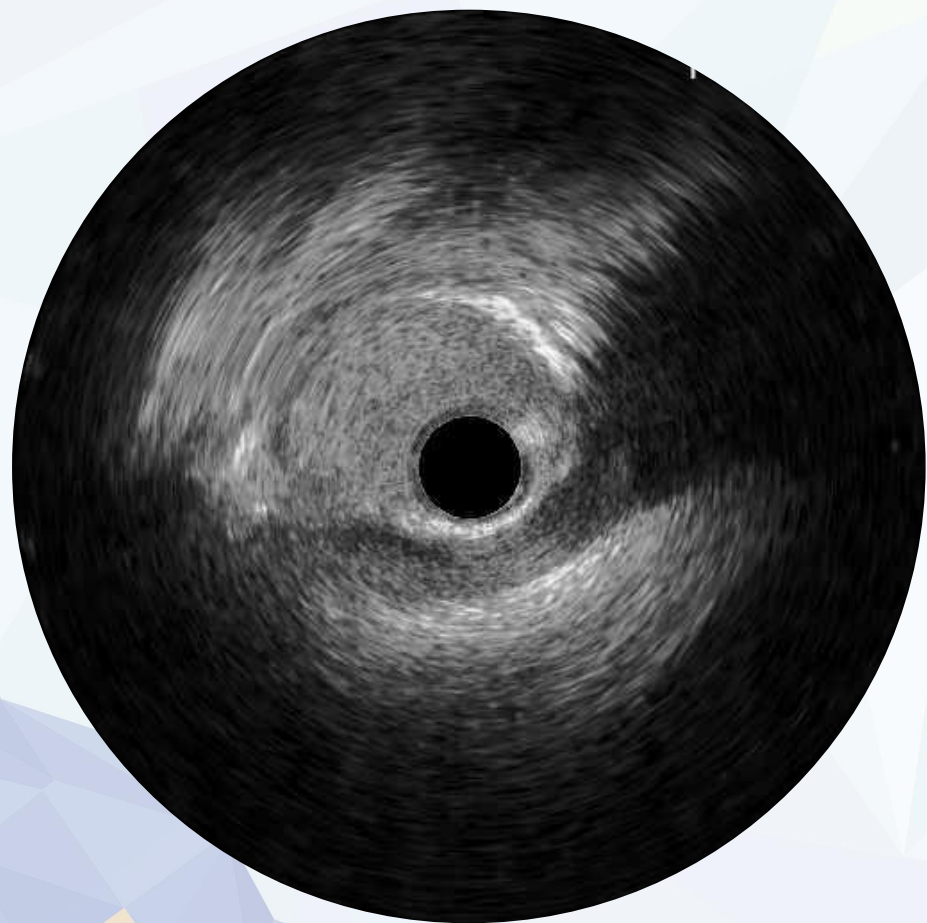
Longitud 42



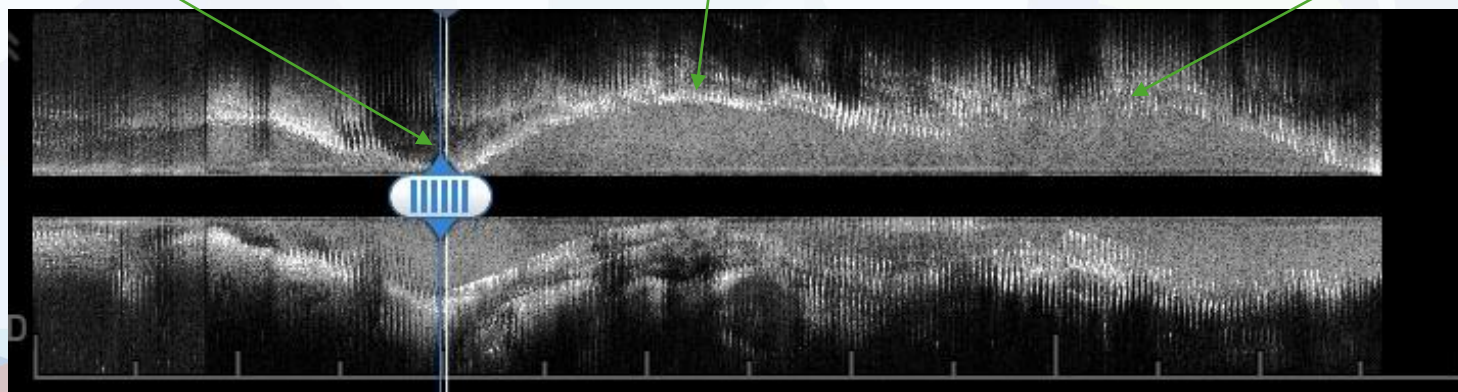
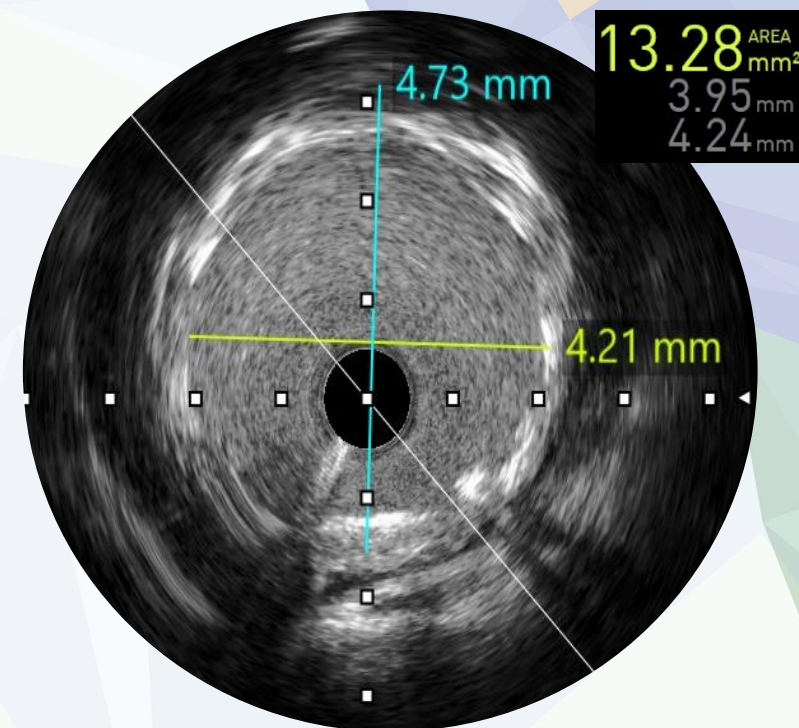
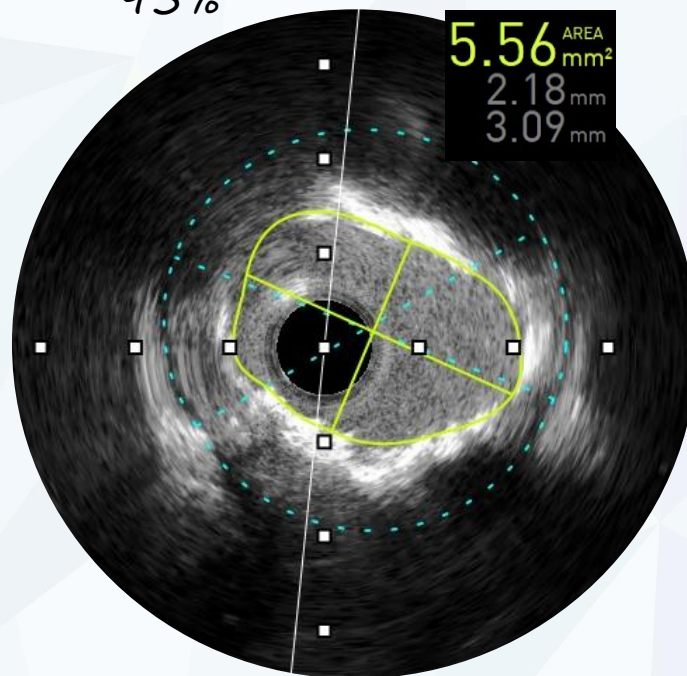
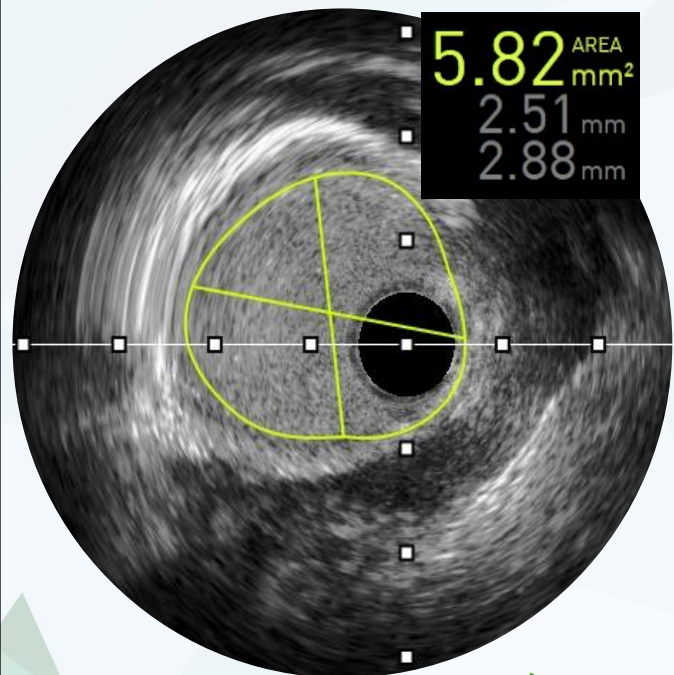
EucALIMUS DES 3.00*23
mm

EucALIMUS DES
4.00*23mm

POT: NC 4.50*8
mm



Expansión relativa:
95%





GENERALITAT VALENCIANA

La Fe

HOSPITAL UNIVERSITARI I POLITÈCNIC

HOSPITAL UNIVERSITARI I POLITÈCNIC
LA FE