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Case is 66 y/o male. Chief complaint was ECG abnormality. Coronary risk factors include dyslipidemia and family history. Severe stenosis of the mid LAD was suspected on coronary CT, and stress echocardiography was positive for ischemia. Coronary angiography confirmed the stenosis, and PCI was performed. Cypher 3.5X18mm was implanted to the lesion. There was no restenosis at follow-up angiography at 8 months after PCI, but chest pain was observed at 21 months, and angiography was performed. A stenosis of 99% was observed at stent proximal edge, and PCI was performed with placement of Cypher 3.5X13mm. There were no restenosis at 11 months follow-up angiography, and patient was free from chest pain. But non-sustained ventricular tachycardia was observed, and at 36 months after the second PCI, patient was admitted for evaluation. Coronary angiography revealed 90% stenosis at stent proximal edge. Stress echocardiography confirmed ischemia, and Xience V 3.5X15mm was implanted. Patient is free from complications to date. We report a case with two episodes of late catch-up phenomenon after Sirolimus eluting stent implantation.