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Midterm Clinical Outcome of Iatrogenic Coronary Artery Dissection

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[Purpose] Iatrogenic coronary artery dissection during coronary angiography (CAG) and percutaneous coronary intervention (PCI) is a rare but a feared complication. We evaluated the midterm outcome of iatrogenic coronary artery dissection. [Methods] From June 2000 to Nobember 2011, CAG and PCI were performed in 58442 patients in our hospital (CAG 42482, PCI 15960), and those with iatrogenic coronary artery dissection were followed by angiography at 6 to 8 month after intervention. [Results] The prevalence of iatrogenic coronary artery dissection was 0.12% (73/58442), and 90.4% (66/73) of patients underwent bail-out stenting: bare metal stent (BMS), 65.1% (43/66) and drug-eluting stent (DES), 34.8% (23/66). The follow-up rate was 83.3%. The rate of the lesions in remained coronary artery dissection after BMS implantation and DES implantation was 0.0% (0/34) and 26.3% (5/19) (p=0.004). There was no MACE except target lesion revascularization, and the target lesion revascularization rate after BMS implantation was 11.8% (4/34), and that after DES implantation was 5.3% (1/19) (p=0.64) [Conclusion] Midterm result after stenting the lesions of iatrogenic coronary artery dissection with BMS or DES was acceptable. However, we should carefully follow up the lesions of iatrogenic coronary artery dissection treated in DES implantation.