

The observation of perforated lesion 10 months later with angioscopy

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A 63-year-old man with hypertension, dyslipidemia, and chronic Af underwent PCI because of STEMI. We deployed Xience Prime 2.75/38mm to RCA#2 total occlusion. Then coronary dissection occurred at stent proximal edge, we covered the lesion by Resolute Integrity 3.5/22mm. After that we dilated stents by NC balloon 4.0/15mm, and Ellis 3 coronary perforation occurred at stent overlapping site. We dilated the perfusion balloon 3.5/20mm at perforation site, and got hemostasis. There was a coronary aneurysm at that lesion two months later.

Ten months later, follow up CAG was performed, and the coronary aneurysm existed as not so different from last angiography. OCT showed the halo from around the aneurysm to distal lesion, and stent malapposition. There was no indication of vascular healing. We also observed the lesion by angioscopy. The inner tissue of the aneurysm looked like as organized thrombus with red thrombus, and stent strut was uncovered. There was no yellow plaque as neoatherosclerosis.

There are few reports of healing process of coronary perforation observed with angioscopy. While, it was difficult to assess the characteristics of inner aneurysm with OCT, we could do it with angioscopy. In this case, healing process delayed because the media might be damaged widely, and the stent was not covered with neointima.