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A case of stent thrombosis associated with in-stent neoatherosclerosis in the very late phase after DES implantation

40-year-old man was admitted to our hospital because of persistent chest pain. Three years ago he had several drug-eluting stent(DES) implantation on left descending coronary artery(LAD)and he continued dual anti-platelet therapy. Emergent coronary angiography(CAG) revealed in-stent occlusion in distal LAD and we subsequently performed PCI. After catheter thrombus aspiration and pre-ballooning, optical coherence tomography (OCT) showed lipid-laden-neointima with plaque rupture in previous treated-DES. No delayed arterial healing and incomplete endothelialization were recognized in the culprit lesion. We used scoring balloon to fully expand the lesion. TIMI III flow was observed after final CAG. In addition to statin therapy, he was discharged after EPA administration. The mechanism of very late stent thrombosis(VLST) is generally considered to be caused by exposed stent strut from a lack of covering neointima or from malapposition. In-stent neoatherosclerosis and subsequent plaque rupture should be suspected as another cause of VLST and OCT could help to understand the mechanism of late stent complication.