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Serial OCT follow up of covered stent implanted in subintimal space of undilatable heavily calcified lesion in right coronary artery

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The case is 75years old man, presented with asymptomatic myocardial ischemia. His left anterior descending artery (LAD) and right coronary artery (RCA) were severely calcified. We first treated left anterior descending with rotablator and everolimus eluting stent (EES). A week later, we performed PCI to the RCA. Although we used rotablator, cutting balloon, non-compliant balloon with buddy wire technique, the heavily calcified lesion was difficult to dilate. To obtain larger lumen area, we performed subintimal wire tracking of the lesion and implanted 2 EESs. After post dilation with a 3.5mm balloon, coronary aneurysm was formed. For bailout, we deployed 3.5/19 mm covered stent (Graftmaster) in the lesion. Additional EES was implanted to proximal edge restenosis of the covered stent 3 months later. 10 months and 2 years after the implantation of the covered stent, we performed follow up angiography and OCT. Both series of angiography showed no restenosis. At 10 month, OCT revealed that whole strut of the covered stent was completely covered with neointima. Minimum lumen area was 6.71mm² at 2 years after the implantation.