

C021

A ACS case of the super-old person with severe 3VD who was able to rescue by hybrid therapy of MIDCAB and PCI

This case was 92-year-old female. She had a history of hypertension. She was super-old woman, but kept ADL and lived without dementia. She presented with chest pain and was diagnosed of NSTEMI. CAG on the 2nd hospital day revealed severe 3VD with heavy calcification (LMT 90%, LAD proximal 90%, LCX proximal 100%CTO, RCA mid 99%). Her family and we could not decide soon the treatment plan considering her age and risk of PCI and CABG, so that we continued treatment with drug therapy but heart failure gradually worsened. We planned a hybrid therapy of MIDCAB and PCI that could be treated minimally invasively. MIDCAB (LITA-LAD) was performed under IABP on the 10th hospital day, and PCI (to RCA) was done on the 20th hospital day. In this PCI, the conus branch of collateral souse to LCX was protected with guide wire using revers wire technic. After that, heart failure improved, and she was transferred to the rehabilitation hospital on the 50th hospital day. We experienced the ACS case of the super-old person with severe 3VD who was able to rescue by hybrid therapy of MIDCAB and PCI, and we have reported it.