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Successful retrieval of the entrapped stent in the calcified lesion

The 67-year-old male patient with the past history of Type 2 DM, hypertension, and dyslipidemia, suffered from NSTEMI (Troponin-I: 27.701 ng/mL, CK-MB: 291.1 ng/mL) in April this year. And we performed primary PCI for middle part of left circumflex arteries uneventfully. Two months later, we performed elective PCI for the proximal right coronary artery which was severely calcified and had a large angulation. After pre-dilatation, we wanted to introduce the stent cross the largely angulated lesion. However, the stent got entrapped in the proximal calcified lesion. We can not push forward nor pull back the stent. More terribly, the stent partially disconnect with the balloon after manual traction for a while. Then we tried to inflate the balloon at the low pressure and the stent was loose and movable. After retrieving the stent into aorta, we inflated the balloon at the nominal pressure. We removed the stent to right radial artery and deployed it right here. Afterward, we continued to performed PCI via left radial artery and introduced the stent to the right position by using the GuideLiner catheter. Finally the RCA lesion was treated optimally.