

C051

Coronary artery perforation during Primary Angioplasty: rescued by guideliner

65 Year old female presented with Acute Anterior wall MI. Coronary angiogram revealed CAD–double vessel disease. LAD proximal has 90% lesion with total occlusion of MID LAD. Lesion was crossed with whisper wire and both the lesions were predilated with 2.0 X 10 mm balloon. 2.75 x 28mm EES stent deployed at 14 atm. Check shoot shows Ellis type III perforation. Stent balloon inflated at 6 atm for 15 minutes. Despite 2 attempts the perforation persisted. We planned for the covered stent but because of proximal lesion and bends the graftmaster (2.80 x 19mm) because of larger profile could not reach the lesion. Proximal lesion was again dilated and then subsequently stented with Xience 2.75 x 23mm at 14 atmosphere. The grafmaster still couldnot be negotiated across the lesion. We crossed the guideliner across the proximal stent and after crossing the bend till the proximal edge of the mid LAD stent. Now the graftmaster was easily negotiated across the lesion and was deloyed. Post procedure check shoot showed no residual leak.

Patient was hemodynamically and symptomaticly stable. Serial Echocardiogram showed minimal pericardial effusion which resolved on follow up.

Patient is asymptomatic at 6 months clinical follow up