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### Marvelous crossability of GUIDEPLUS

A 77-year-old woman was hospitalized for effort angina pectoris. Cardiac CT showed severe calcified lesion at mid right coronary artery (RCA). Coronary angiogram revealed severe stenosis with calcification at mid RCA and ad-hoc PCI was performed.

A 6F IL4.0 guiding catheter was engaged to RCA ostium via trans-femoral approach. OCT image after predilation revealed calcification especially at the distal part of lesion. Two Synergy stents were successfully delivered to the lesion. A 3.0/28mm Synergy stent was deployed at the distal and a 3.5/38mm Synergy stent at the proximal. Because the stent expansion was inadequate according to angiogram and OCT image, postdilation was intended. No balloon could be advanced through the stent: however, GUIDEPLUS<sup>®</sup> was easily passed itself, followed by successful delivery of balloon.

Several types of guide-extension catheters have been available. They are helpful for delivery of stents and are usually advanced distally with it anchored by ballooning. GUIDEPLUS<sup>®</sup> has unique structure for making delivery easy. It is sometimes easier passed to the distal by itself without balloon anchoring, even in the situation of difficult delivery of balloon. We will show several presentative cases of GUIDEPLUS in this presentation.