1137 A complete dislodged stent: To salvage and deploy it to the right lesion

A 71 year old gentleman was admitted for unstable angina. He had history of percutaneous coronary intervention to Left anterior descending artery (LAD), Left circumflex artery (LCx) and Left main artery (LM) in 2013. Urgent coronary angiogram was done. It showed LCx, LAD and LM patent stents with mild instent restenosis. There were 2 de novel lesions at proximal and distal LCx respectively. Balloon pre-dilatation was performed with a 2.5mm balloon (Accuforce, Terumo), then intravascular ultrasound (Eagle Eye Platinum, Volcano) preassessment was done. A 2.5 x 18mm drug eluting stent (Ultimaster, Terumo) was chosen and delivered to distal LCx. However, angiogram suggested stent length was not enough to cover the whole lesion. Operator decided to retrieve the stent and change to a longer one. However, the stent was dislodged at distal LM carina during the retrieval, due to the old stent strut and LM-Cx angulation. A GuideLiner-and-balloon rescue system was used to salvage the stent. A 1.5mm balloon (Sapphaire II, OrbusNeich) and 6F-GuideLiner (Teleflex) were used. However, the stent could not be retrieved by pulling with distal inflated balloon nor by antegrade capture with 6F-GuideLiner. On the contrary, the stent could be loosened and was pushed to distal by the GuideLiner. So the dislodged stent was finally pushed forward to proximal LCx lesion. Moreover, the stent position can be adjusted by this GuideLiner-and-balloon system. After confirmation of right position and lesion coverage with angiogram, the stent was deployed by the 1.5mm balloon at the proximal lesion. Then the stent was further dilated with 2.0mm balloon (Sapphaire II, OrbusNeich) and 3.25mm balloon (Accuforce, Terumo). After tackling the proximal LCx lesion, another 2.5x 24mm drug eluting stent (Ultimaster, Terumo) was chosen and deployed at distal LCx. The 6F-Guideliner was used to protect the delivery track from the LM-LCx angulation and the proximal new stent. Final angiogram and intravascular ultrasound showed good result. No dislodged stent was wasted after using the GuideLiner-and-balloon recue system.