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The fail case of the treatment of LCx with heavy calcified lesion

We report a painful case of a 79-year-old female with stable angina. Her coronary risk factor is diabetes mellitus and dyslipidemia. We try to operate PCI for LCx#13 disease which is tricky severe stenosis with calcification. PCI system is 7 Fr back-up guiding catheter. The floppy guidewire can pass the stenosis easily, but micro-catheter cannot pass. At first, we try to pass the 1 mm balloon. But the balloon cannot pass, next we try to pass with anchor balloon technique. But cannot pass. At last, we perform rotational atherectomy with 1.25mm barr after exchanging to ROTA support wire. We start to perform ablation from front of severe stenosis but cannot go any further. While ablation, we hear a strange sound. So, we stop ablation and return the barr. At the time, we turn out that the ROTA wire is stuck. It seems to be caught in the lime of the calcified lesion. Fortunately, we can succeed to remove the stucked wire by passing the side of the stucked wire with conquest pro 12. We think it is so difficult to continue further treatment and abandoned the procedure. We report fail case of the treatment of LCx with heavy calcified lesion and any devices cannot pass.