

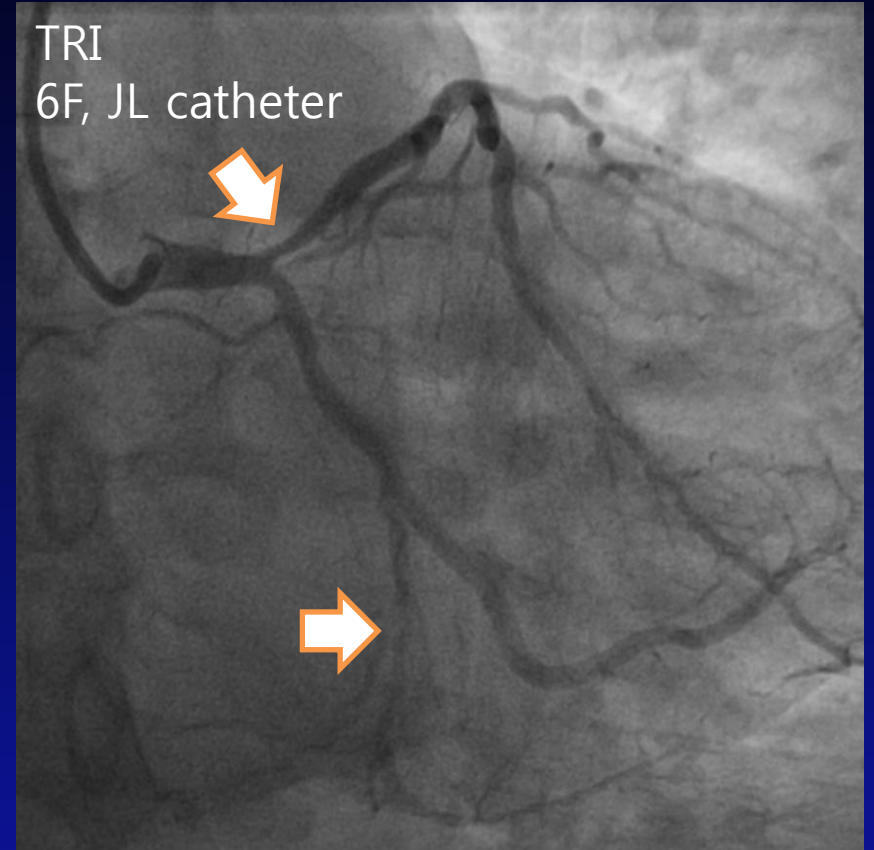
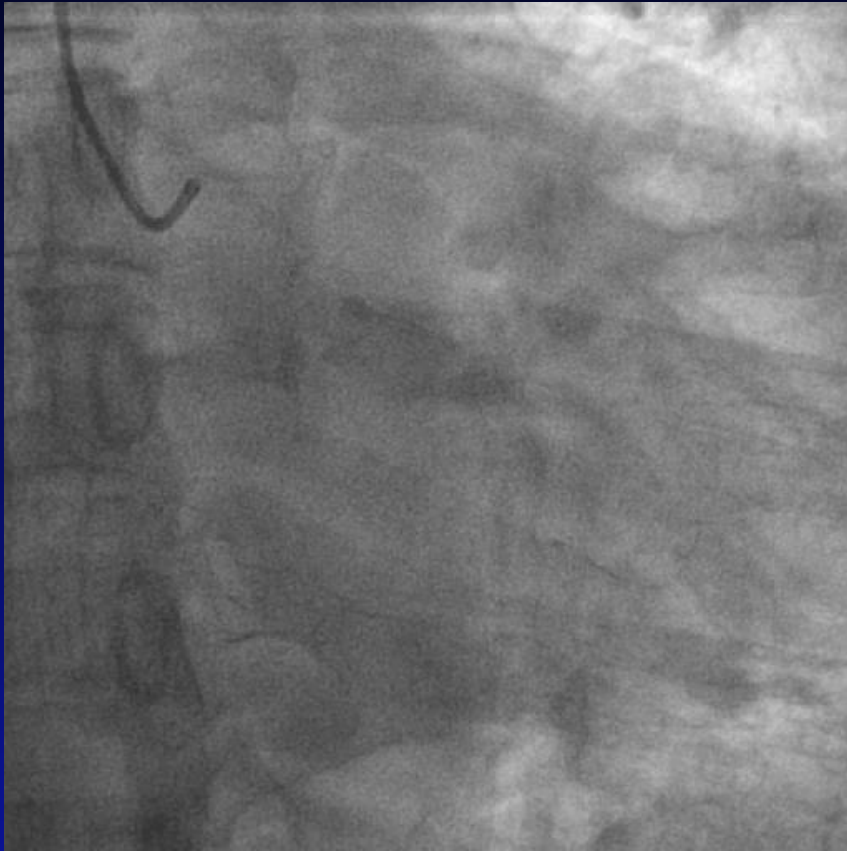
# Deferred cases with negative remodeling in IVUS study

Taek-Geun Kwon, Jang-Ho Bae  
Konyang University Hospital,  
Heart Center, Deajeon

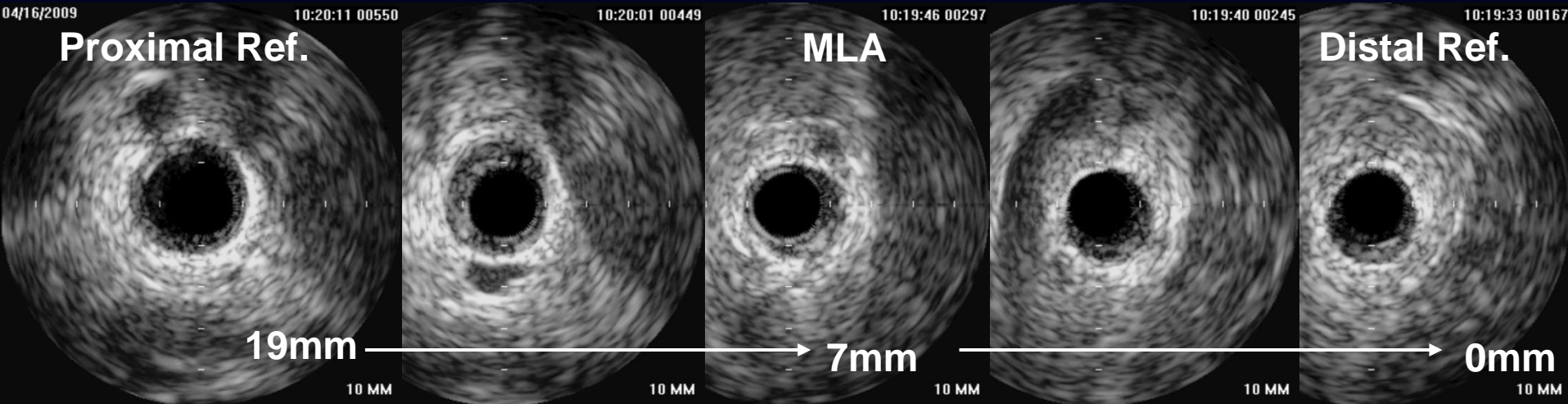
# Case 1 (45/M)

- CC: chest pain for 10 days (CCS class III)
- Risk Factors: HBP (+), DM (-), Smoking (+)
- TC 193 mg/dL, HDL-C 37.9 mg/dL, LDL-C 131 mg/dL
- TTE: No RWMA, EF=65%, concentric LVH

# CAG



# IVUS at LCXd



Proximal Ref.  
EEL CSA=6.4  
Lumen CSA=4.3

EEL CSA = 4.6

**MLA=2.4**

P+M CSA=2.2

Max Lumen dia=1.7

MLD=1.7

**Plaque burden=46.7%**

Average reference EEM CSA=5.65

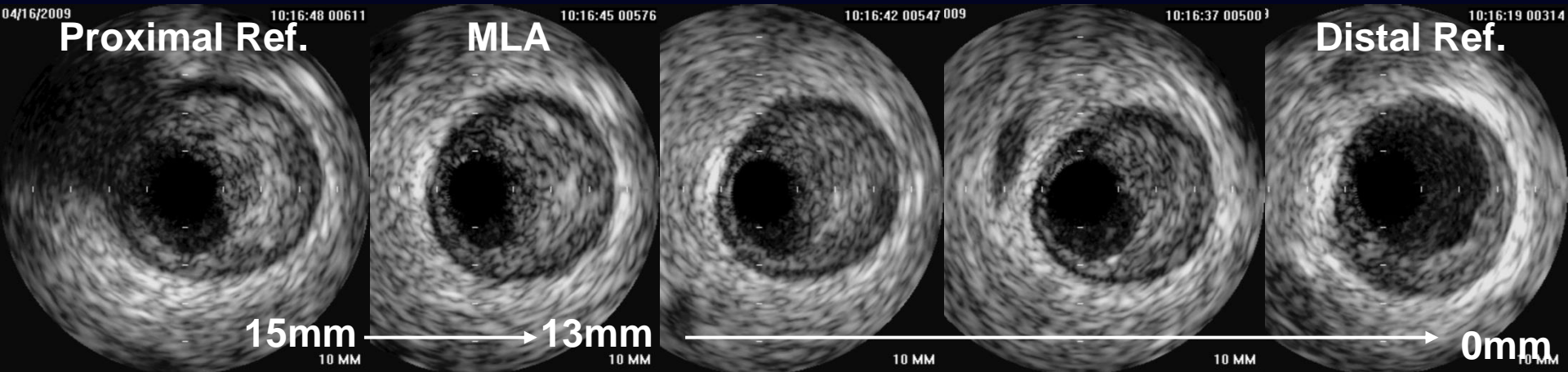
**Remodeling Index=0.81**

Average reference Lumen CSA=3.45

Area Stenosis=30%

Distal Ref.  
EEL CSA=4.9  
Lumen CSA=2.6

# IVUS at LADp

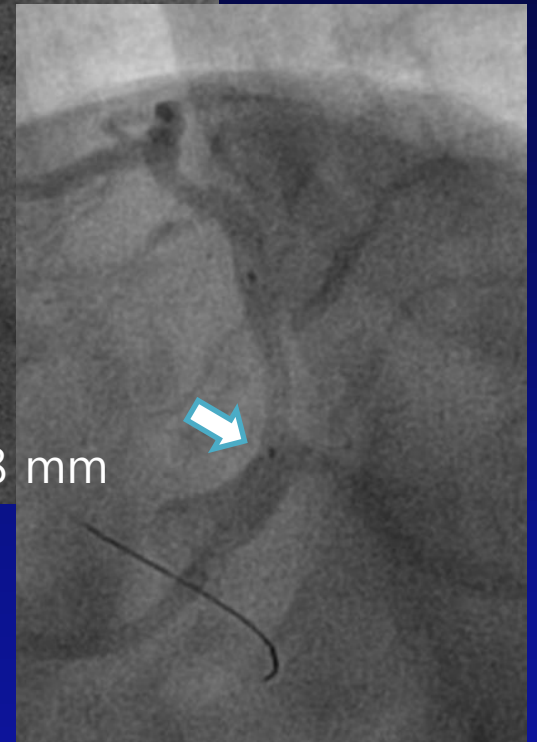
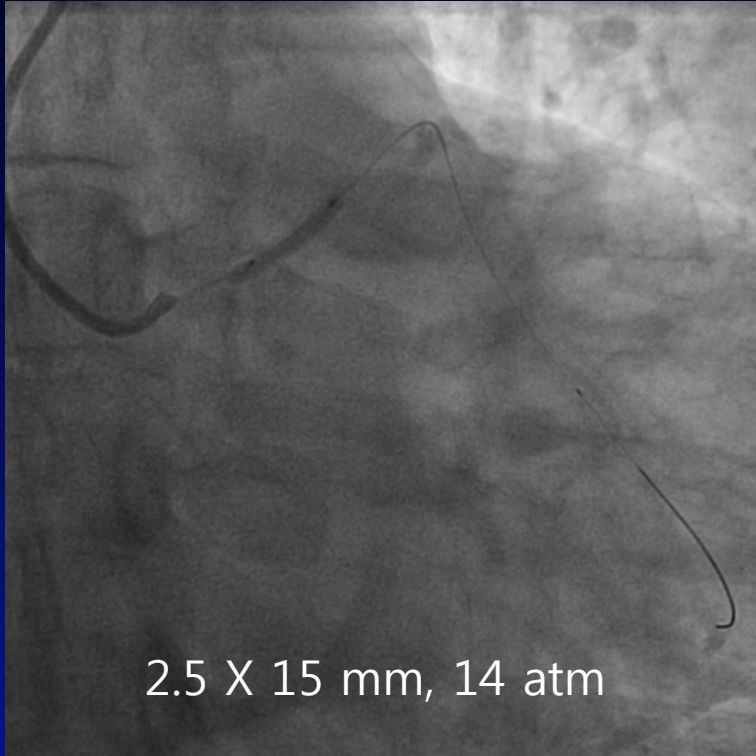


EEL CSA=24.1  
Lumen CSA=6.4

EEL=20.0  
**MLA = 3.7**  
P+M CSA= 16.3  
Max Lumen dia=2.5  
MLD=1.8  
**Plaque burden=81.5%**  
Average reference EEM CSA=22.25  
**Remodeling Index=0.90**  
Average reference Lumen CSA=8.9  
Area Stenosis=58%=(8.9-3.7)/8.9

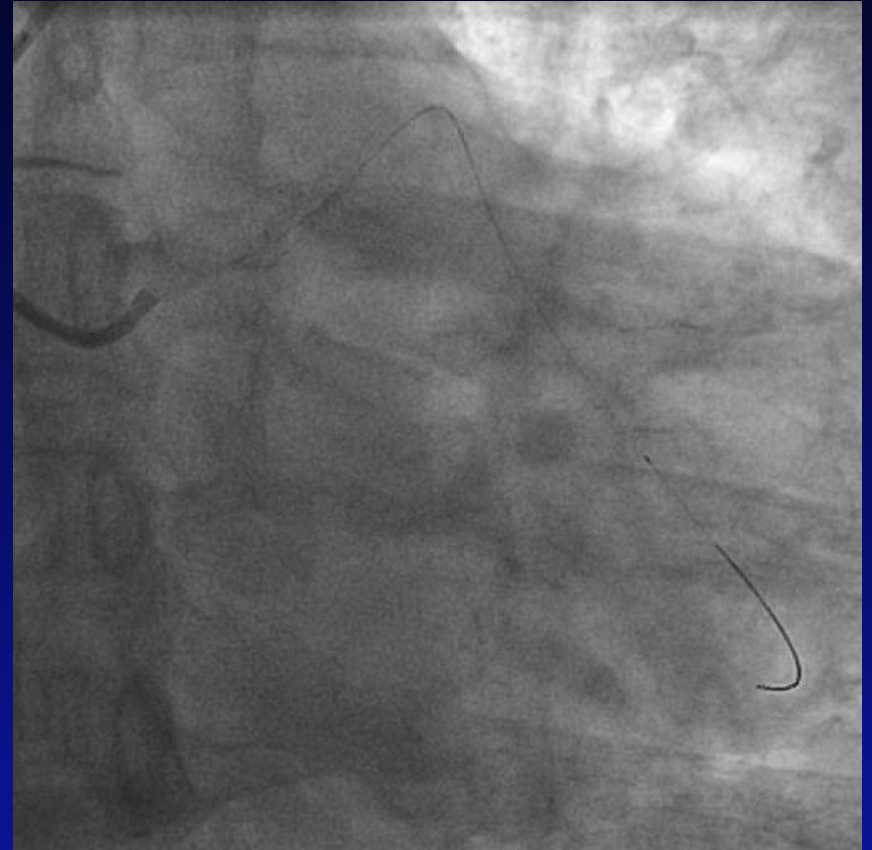
EEL CSA=20.4  
Lumen CSA=11.4

# PTCA





# Final CAG

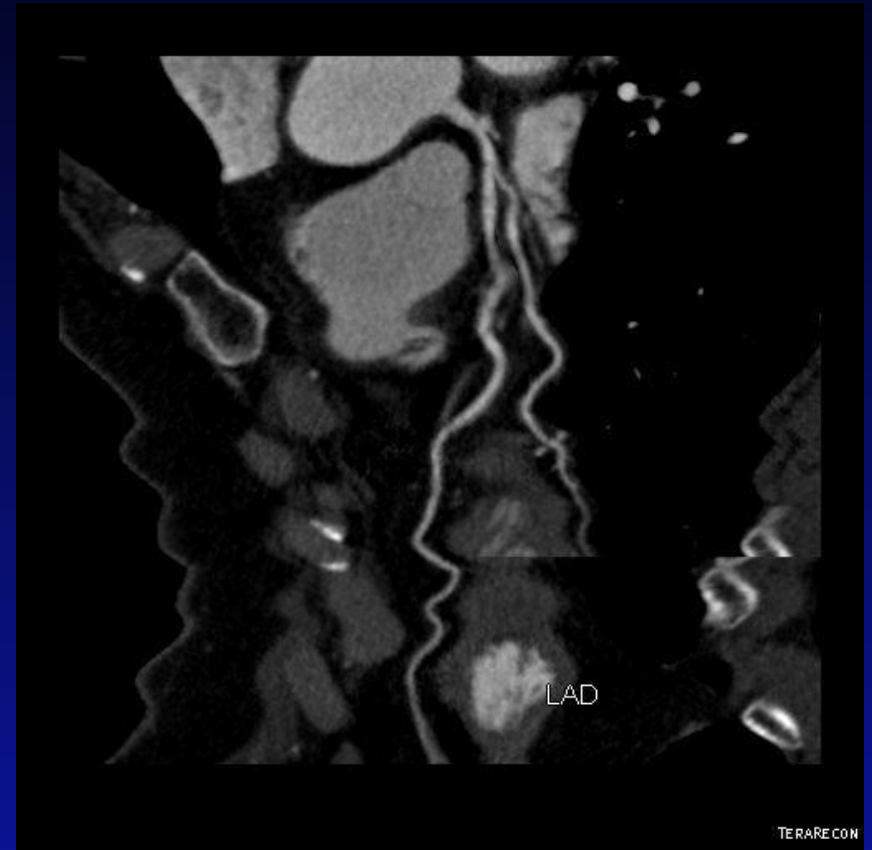
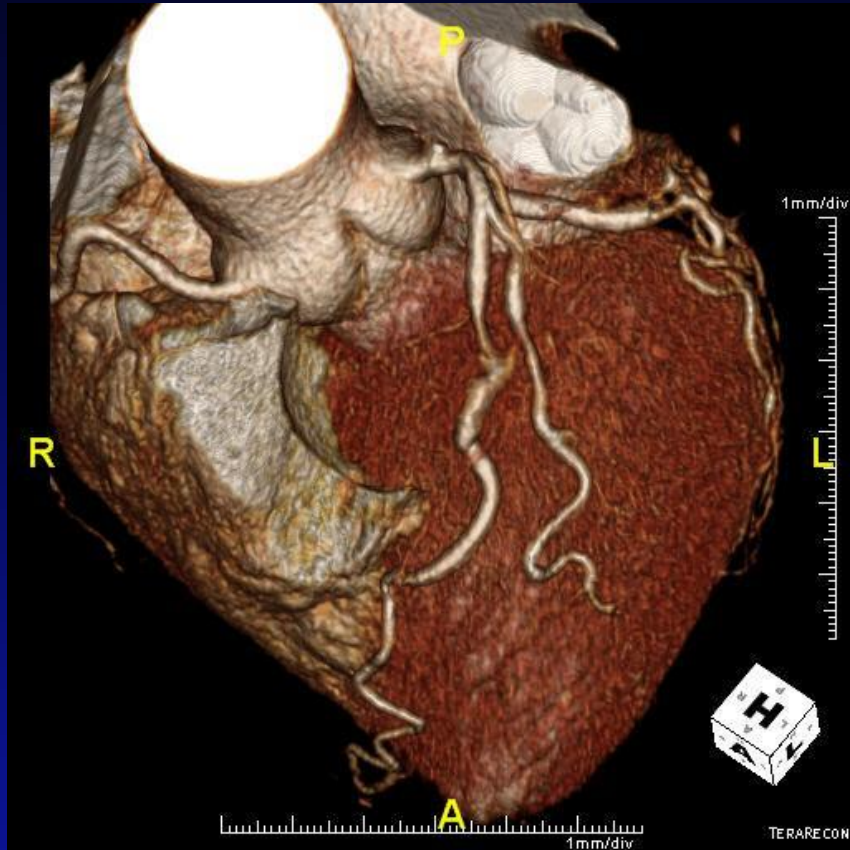


# Case 2 (70/F)

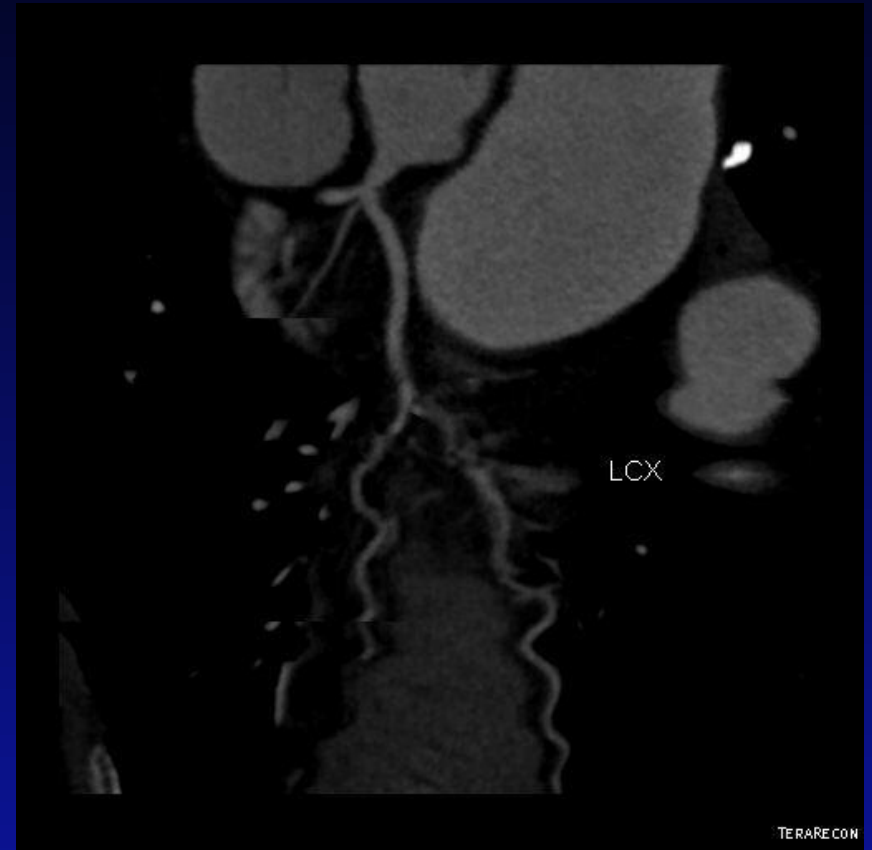
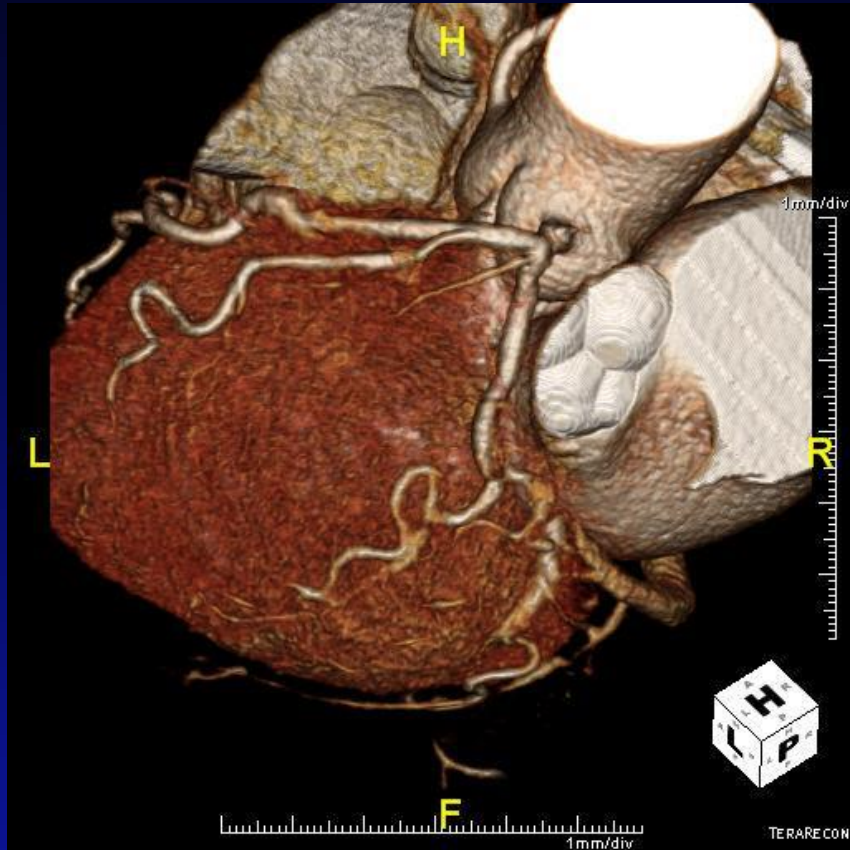
- CC: postprandial chest pain
- Risk Factors: HBP (+), DM (+), Smoking (-)
- TC 258 mg/dL, HDL-C 50.4 mg/dL, LDL-C 189 mg/dL
- HbA1c 7.3%
- TTE: No RWMA, EF=63%



# Cardiac MSCT



# Cardiac MSCT

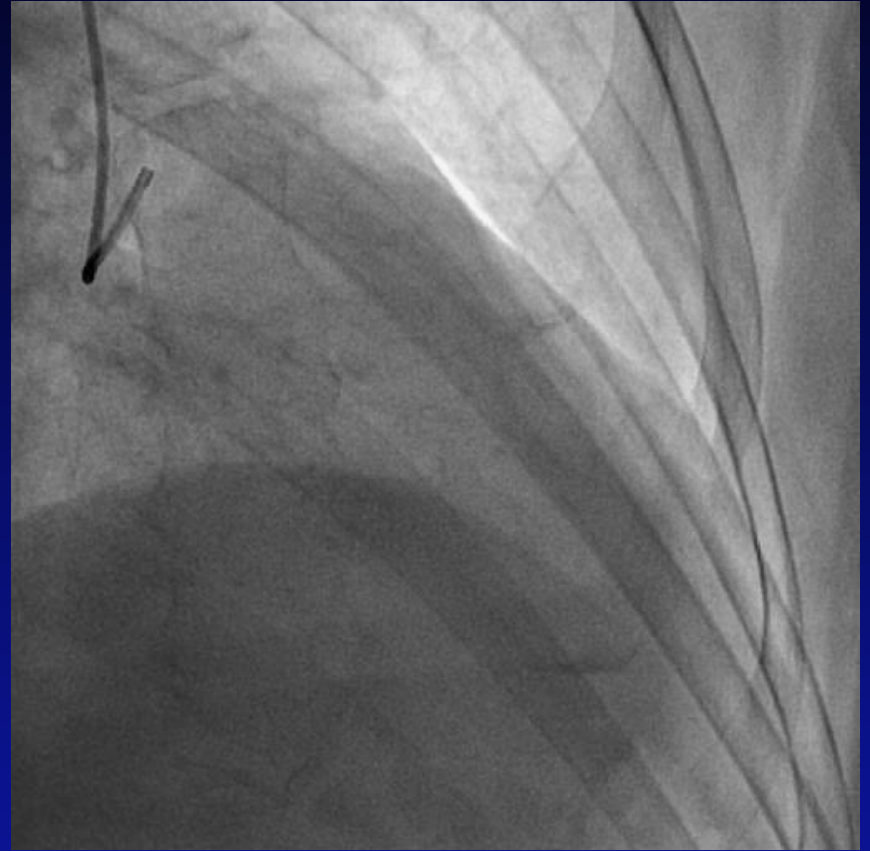
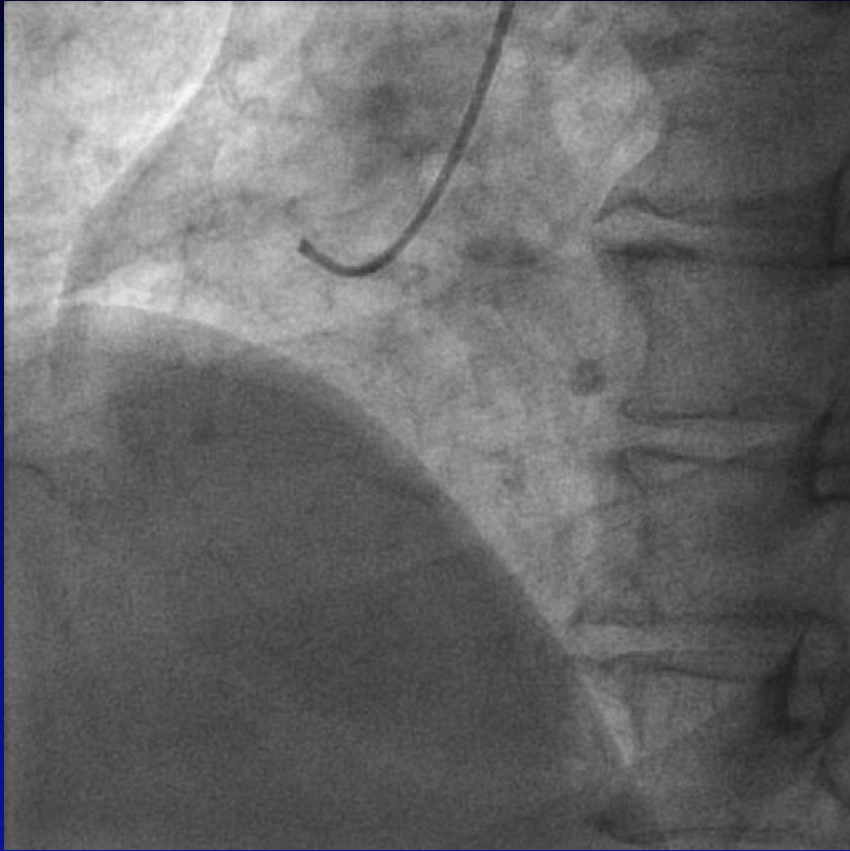


# Medical Treatment

- Aspirin
- Beta blocker
- Angiotensin receptor blocker
- Statin
- Metformin

**Postprandial chest pain - sustained**

# CAG

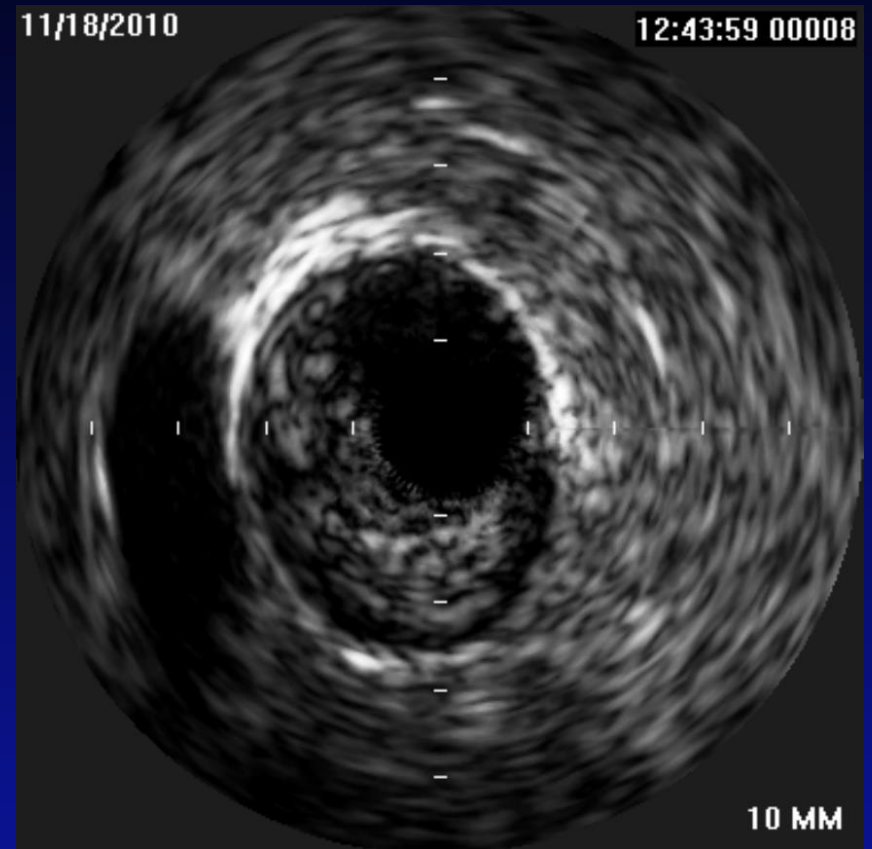
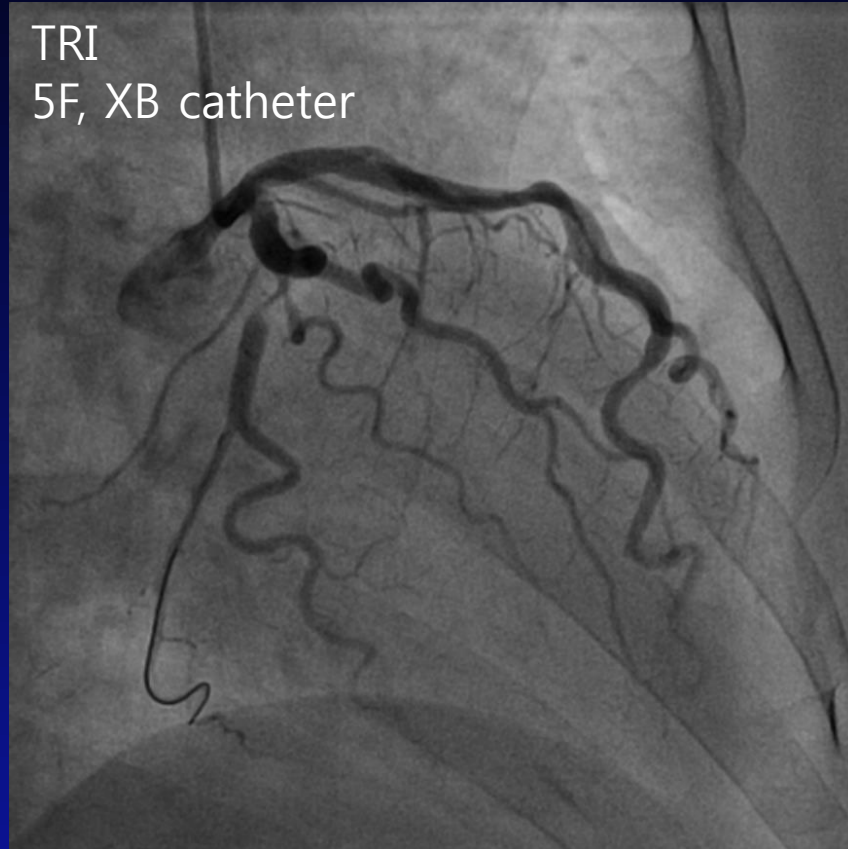


# CAG





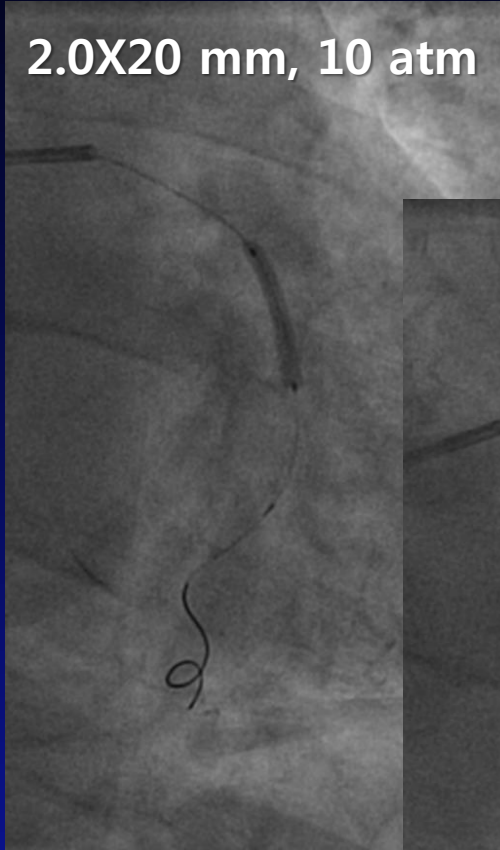
# PTCA



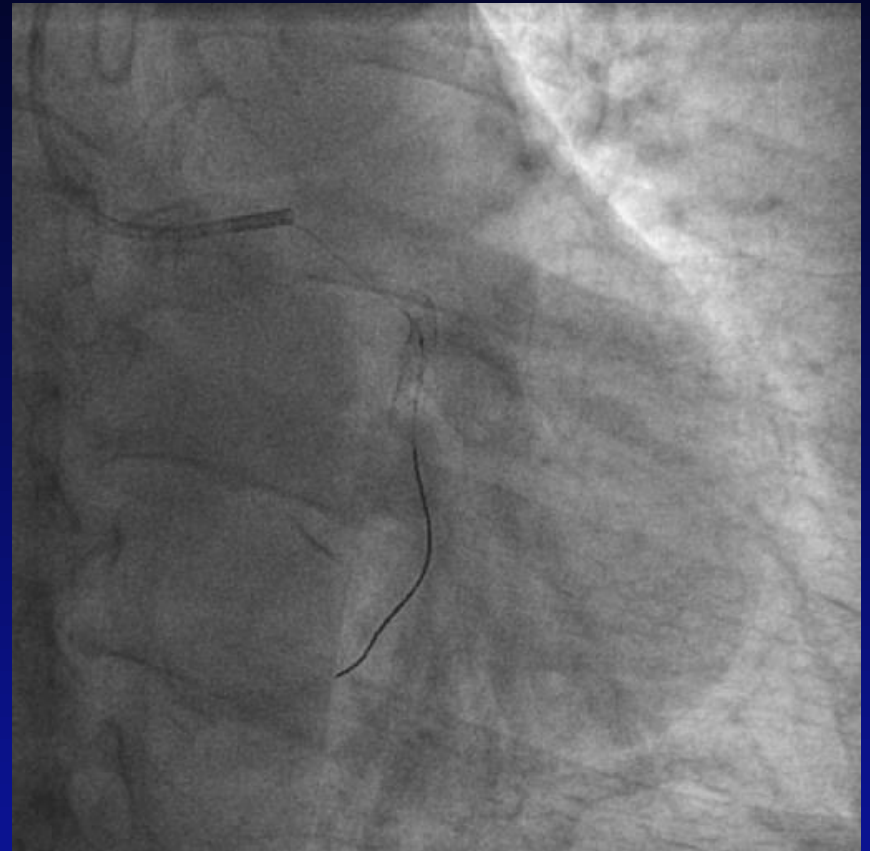
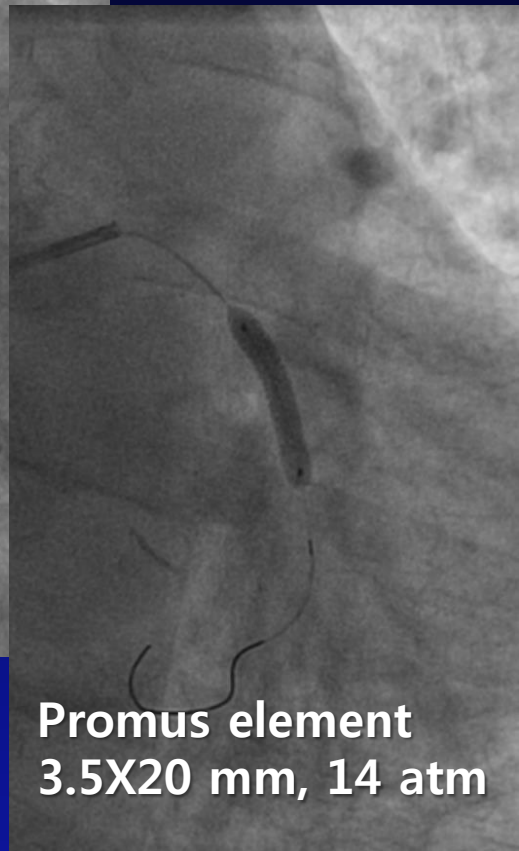


# PTCA with stent

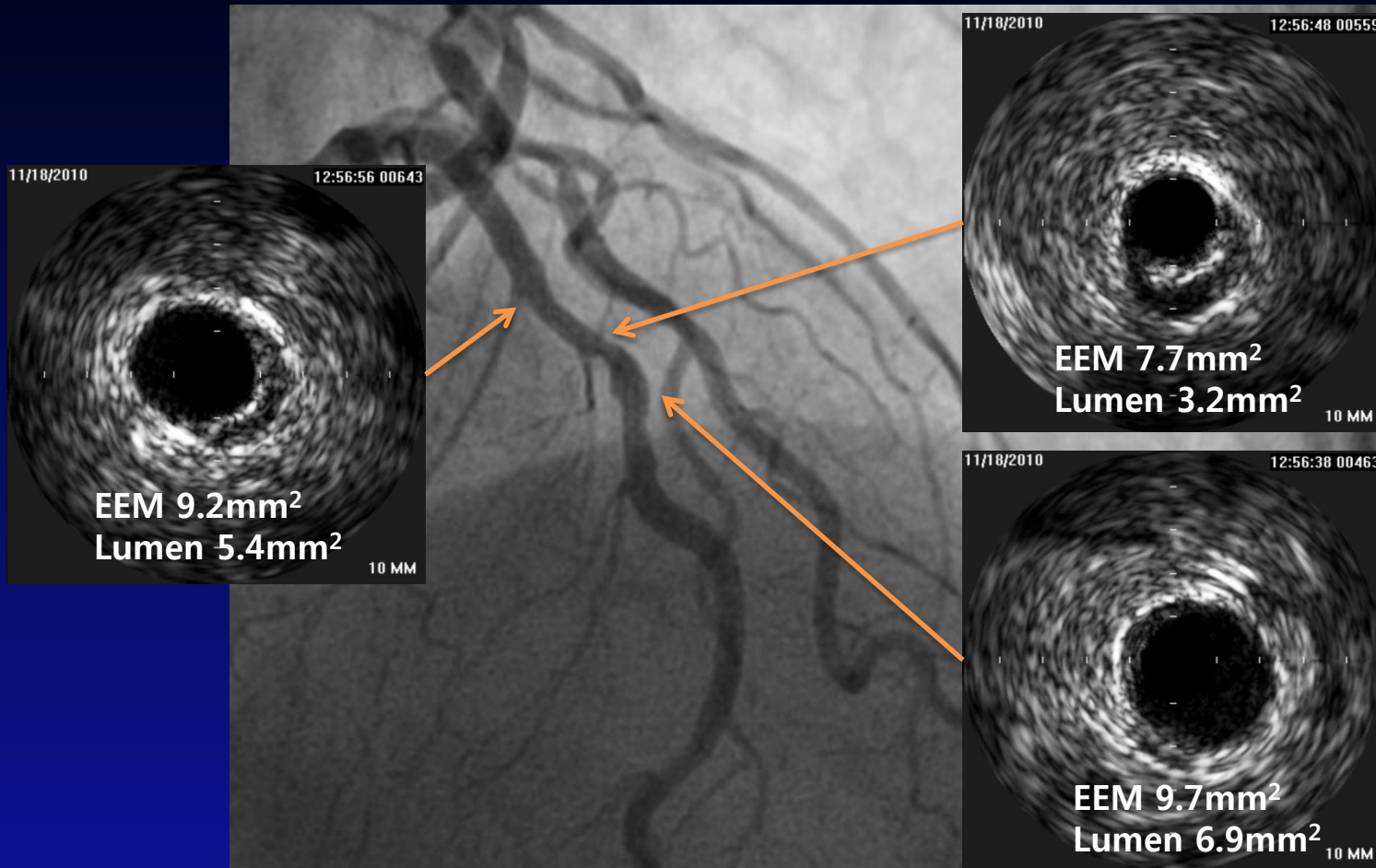
2.0X20 mm, 10 atm



Promus element  
3.5X20 mm, 14 atm



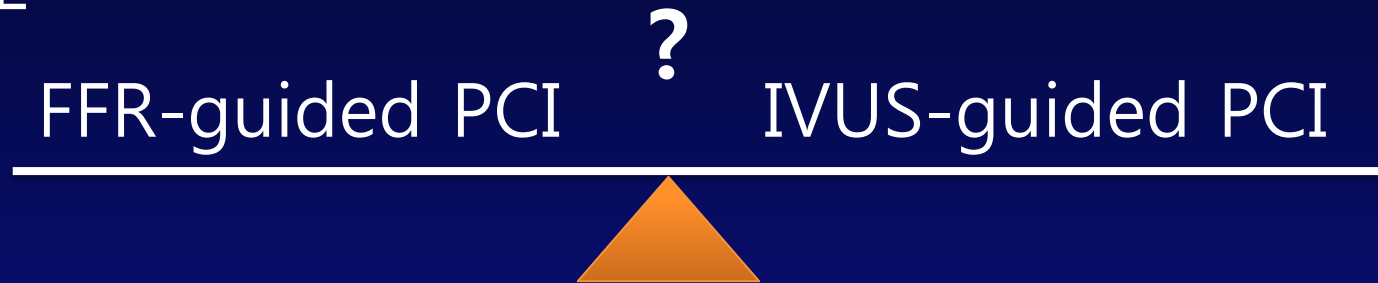
# IVUS at LAD



Remodeling Index = 0.81  
Area Stenosis = 48%

# Summary

- Fractional Flow Reserve (FFR) – stenting of ischemic lesion
- FAME



- Negative remodeling – calcified plaque in patients with stable angina

Thank You For Your Attention!

# IVUS - backup





# Need for Subsequent Revascularization

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- At a median 4.6 year follow-up, **21.1%** of the PCI patients required an additional revascularization, compared to **32.6%** of the OMT group who required a 1<sup>st</sup> revascularization
- 77 patients in the PCI group and 81 patients in the OMT group required subsequent CABG surgery
- Median time to subsequent revascularization was **10.0** mo in the PCI group and **10.8** mo in the OMT group