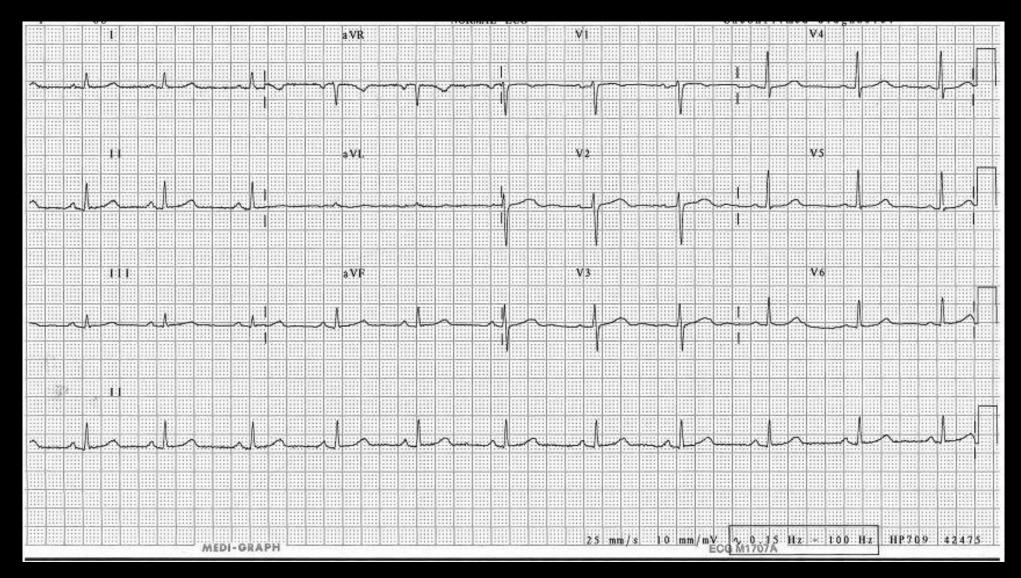
Lee Sang-Hyun MD. Cardiovascular center Pusan National University Yangsan Hospital

47-years-old female

• Sx.

- Effort related chest pain for 10 years
- New onset resting chest pain for 1 month
- P.Hx : none
- BMI : 21.5 (normal)
- Non-smoker
- Total cholesterol / LDL / TG / HDL : 240 / 160 / 163 / 50 (mg/dL)

Initial ECG



Assessment

Unstable AP

• Dyslipidemia

 \rightarrow Elective CAG

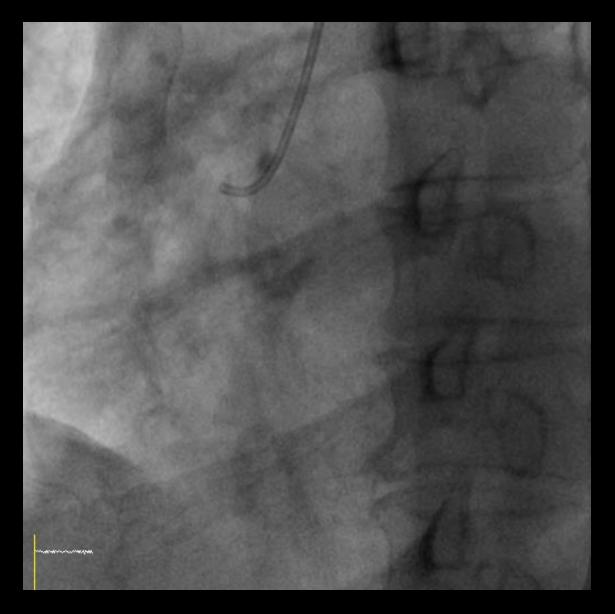
Coronary Angiography



Coronary Angiography



Coronary Angiography



Next Plan ?

Left main bifurcation lesion



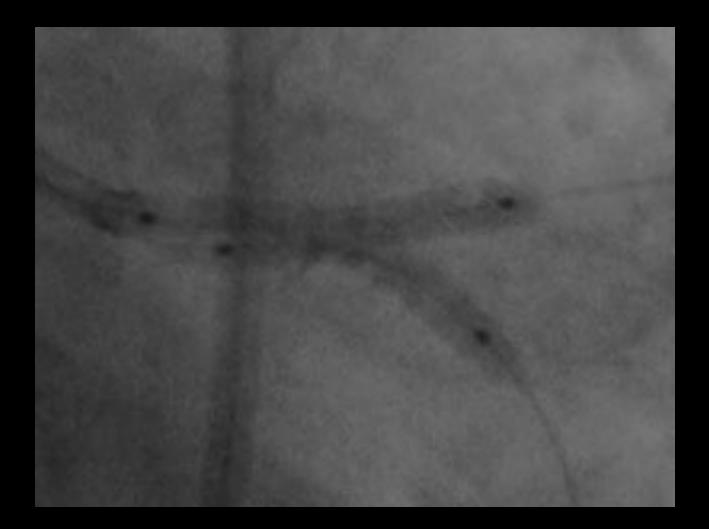
- a. Medical Tx.
- **b.** Percutaneous coronary intervention
- c. Call cardiac surgeon

PCI : two stenting with crushing tech



- Femoral (8Fr)
- G/C : **EBU 3.0** (side hole)
- Wire
 - BMW[®] (LAD)
 - Runthrough [®] (LCx)
- Stent
 - Cypher [®] 3.5*23mm (LAD)
 - Cypher ®
 - 2.75*18mm (LCx)

PCI : Final Kissing balloon



PCI : Final CAG

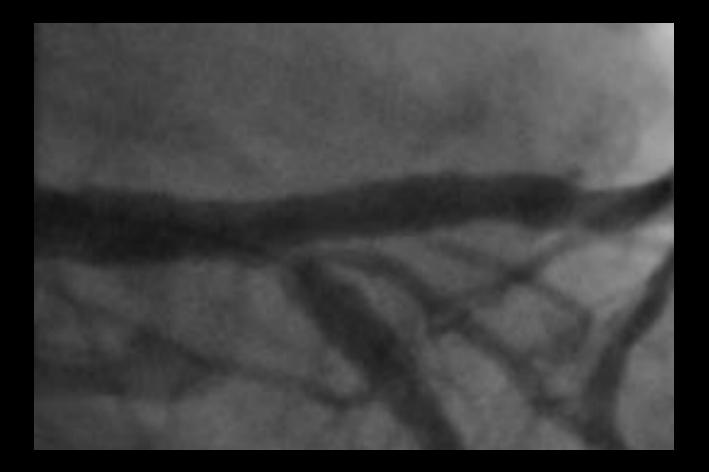


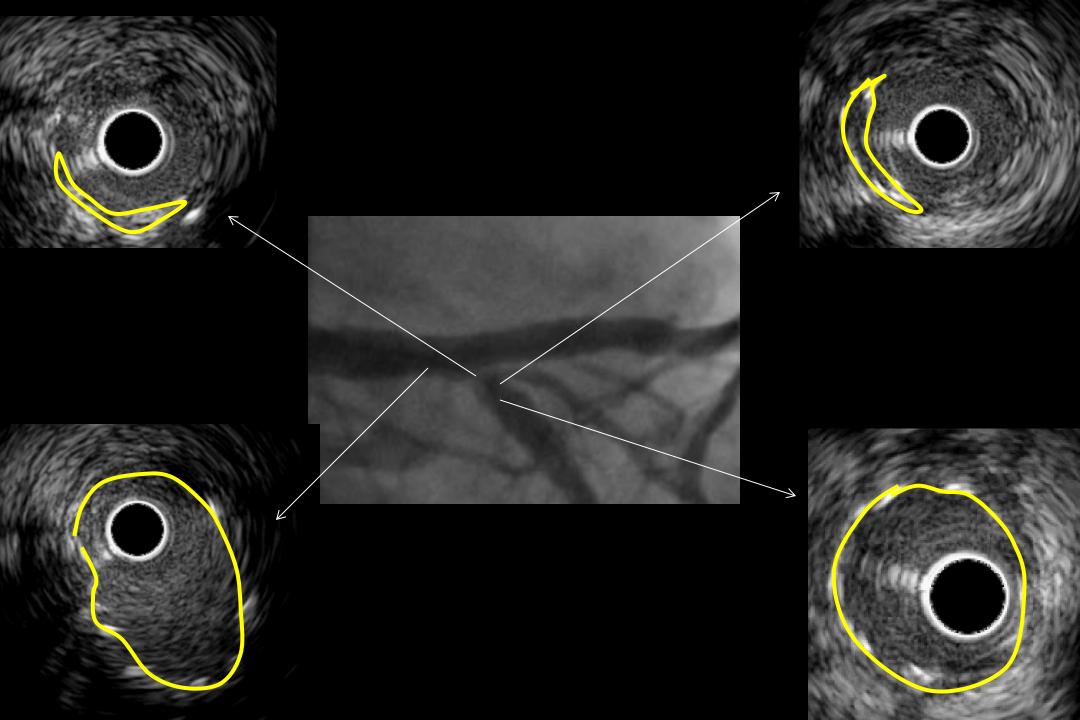


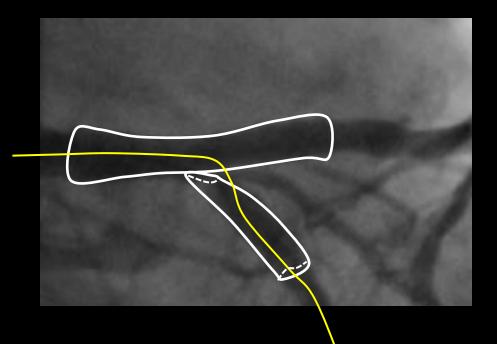
We were.....

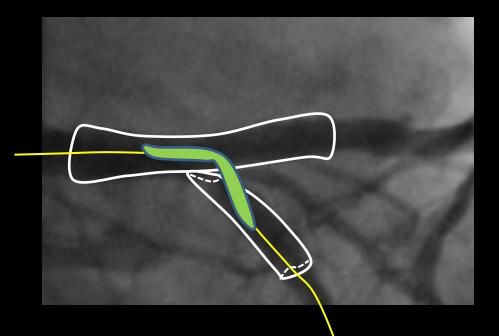


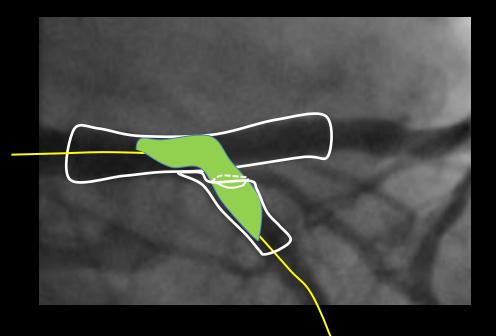
Panic !!



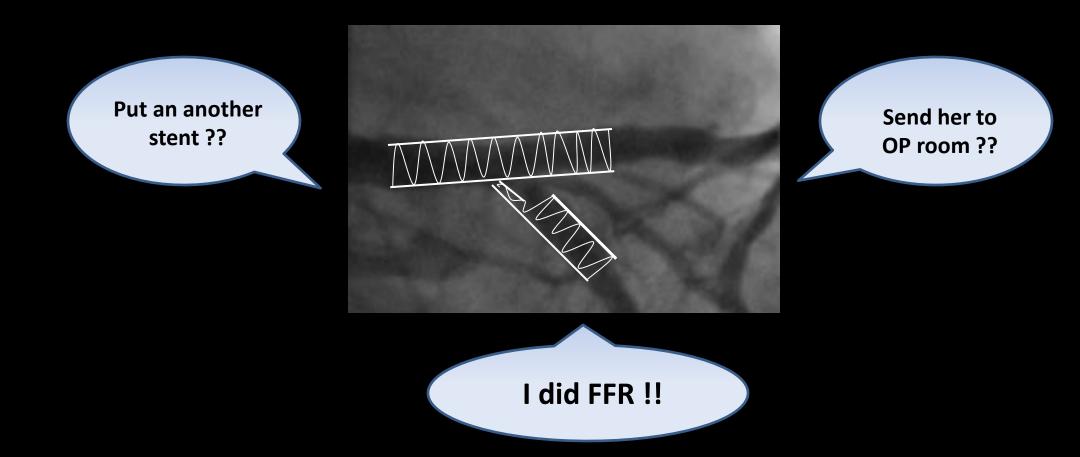






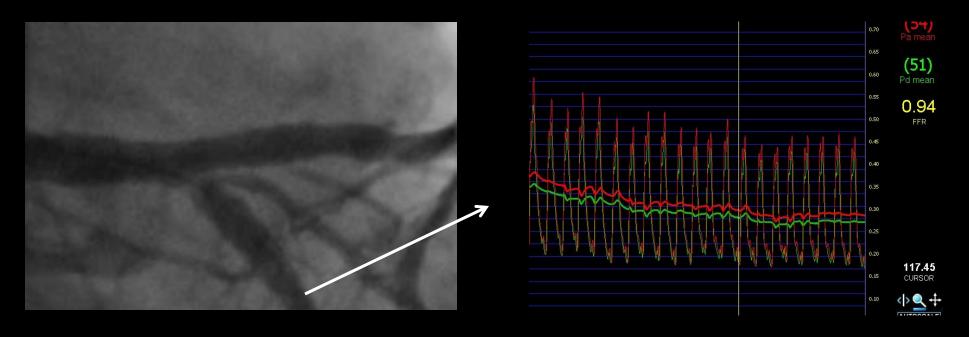


What would do in this case?





Simply leave it alone!!!



0.94

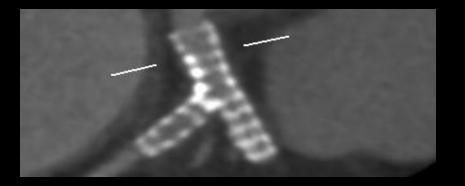
No event up-to 5 yr F/U

1 yr F/U CAG, same FFR value (0.94)



No event up-to 5 yr F/U

3 yr FU of CT with adenosine stress perfusion





Adenosine stress perfusion : negative

Summary

 In complex cases with a special situation in which you don't know what to do, FFR may give you a valuable information for guiding the procedure



Thank you for your attention