Images in Cardiology

OCT during left main bifurcation PCI

G. Sengottuvelu b,*, Ravindran Rajendran a

a Associate Consultant Cardiologist, Apollo Hospitals, Chennai 06, India
b Senior Consultant Cardiologist, Apollo Hospitals, Chennai 06, India

ARTICLE INFO

Article history:
Received 11 June 2014
Accepted 11 August 2014
Available online 6 September 2014

Keywords:
Bifurcation PCI
OCT
TAP technique

80 years old male was admitted with recent history of acute coronary syndrome. Coronary angiogram showed minimal distal left main disease with significant ostial left anterior descending artery (LAD) lesion (Fig. 1A & Video 1). Optical coherence tomogram (OCT) guided percutaneous intervention (PCI) to Left main and LAD was planned using Provisional T stenting strategy. OCT evaluation showed minimal disease in distal left main (E). Ostial LAD showed thin cap fibro-atheroma with multiple calcified plaques (Fig. 1B, C & D). There was no significant calcium requiring de-bulking. Left circumflex artery (LCX) ostium showed minimal disease. After predilatation and stenting of LAD lesion, there was significant plaque shift into the LCX (Fig. 1F & Video 2). Hence it was converted to two stent strategy and bifurcation stenting of LAD/LCX was done using T and protrusion technique (Fig. 1G, H & Video 3). Post stenting, left main bifurcation was assessed by OCT which showed good apposition of the stents in both LAD and LCX (Fig. 1I). Compared to IVUS OCT with lower penetration has limitations in large vessels like the left main, but its higher resolution helped in identifying a clear landing...
zone in the left main and a TCFA involving ostial LAD which predicted the plaque shift.

Supplementary data related to this article can be found at http://dx.doi.org/10.1016/j.ihj.2014.08.009.

**Conflicts of interest**

All authors have none to declare.