Revascularización en paciente con Bypass previo

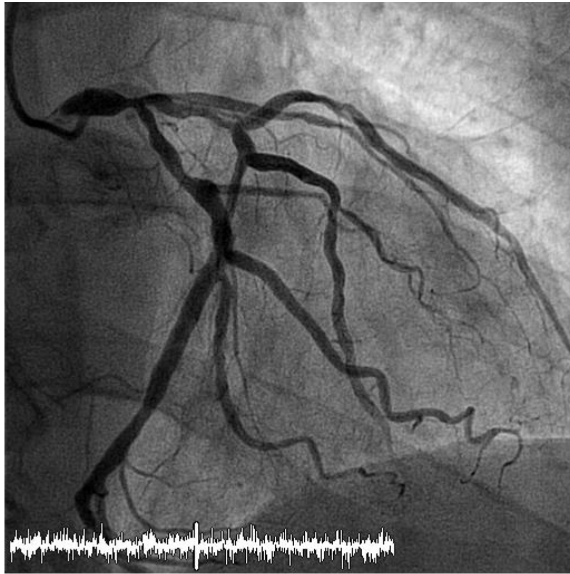
Dra Fina Mauri

HC

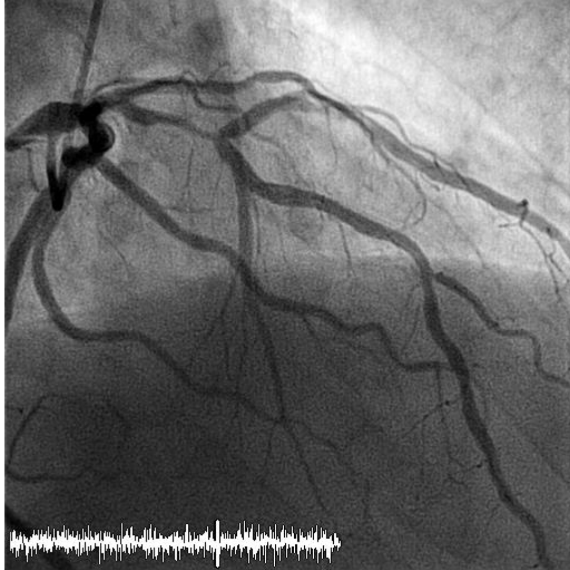
- Paciente de 82 años con pnemoconiosis que en 2011 se le realizó un KT por angina estable , que mostro enfermedad de TC , DA y CF .

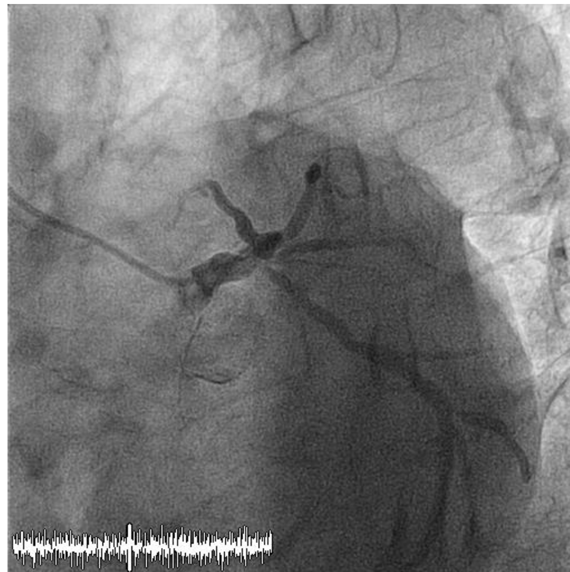
- Su clínico indicó cirugía y se le realizó By pass con mamaria a DA y safena a CF . Asintomatico hasta 3 meses antes del actual ingreso . Angina progresiva

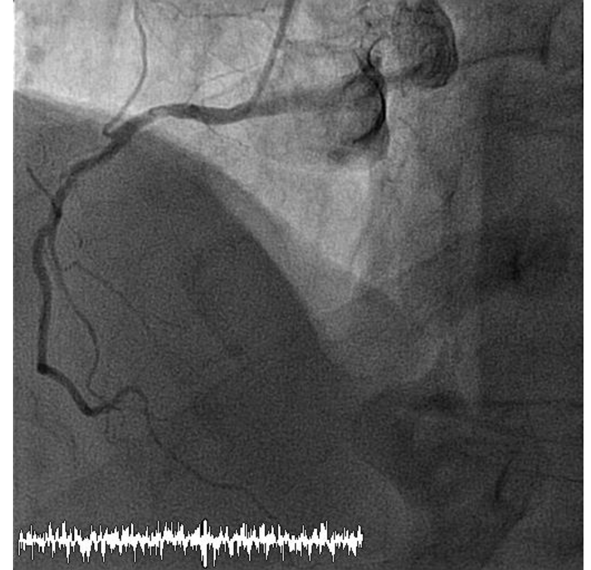
- Remitido para cateterismo sin pruebas de isquemia previas



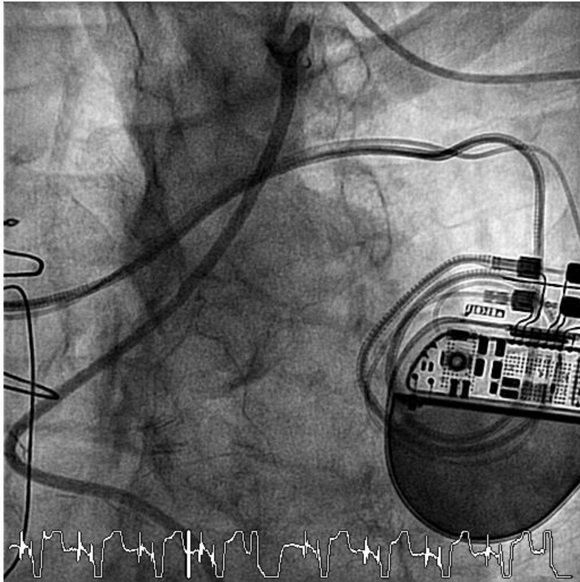
Cateterismo en 2011

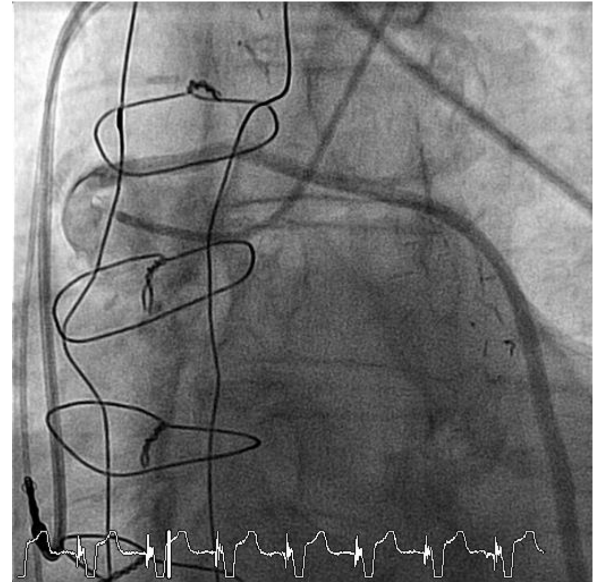


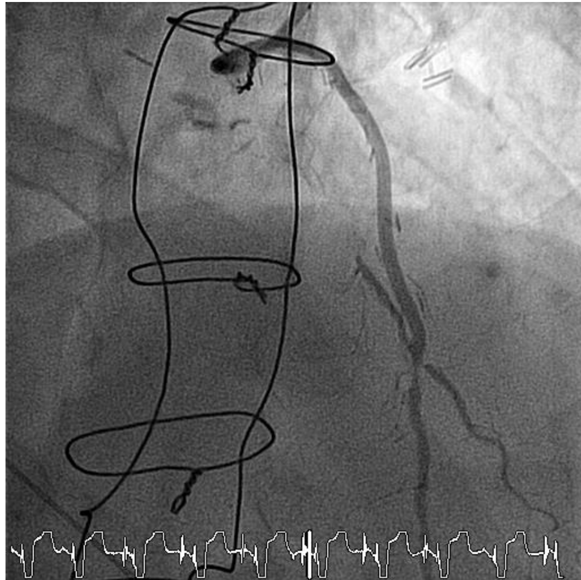


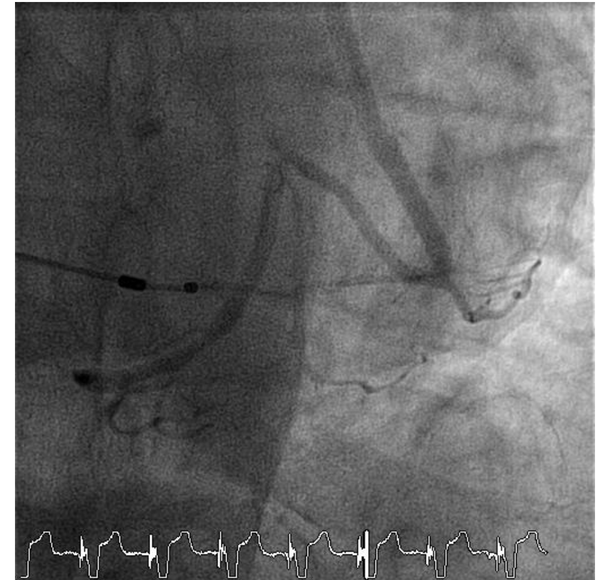


Cateterismo actual

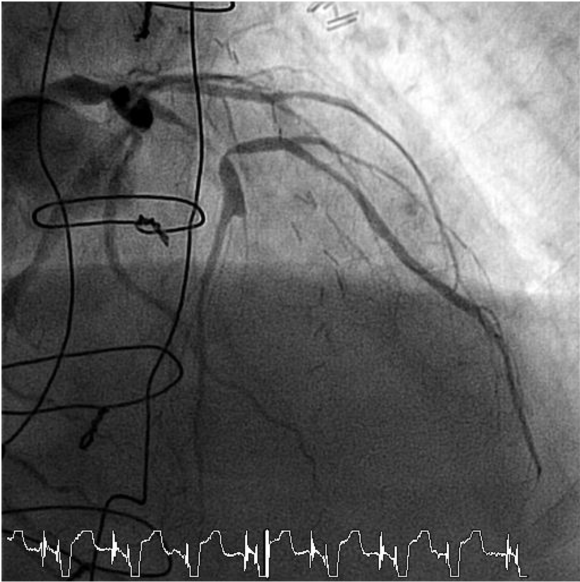


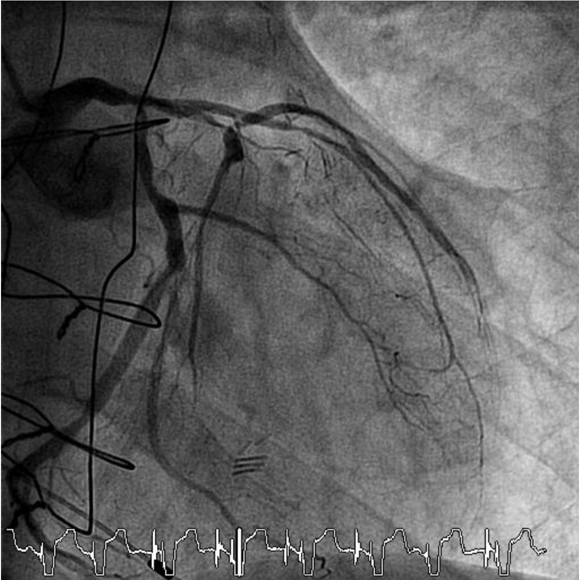


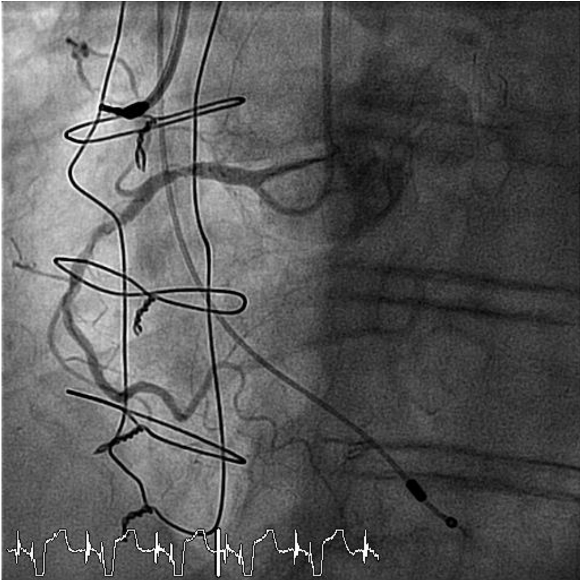


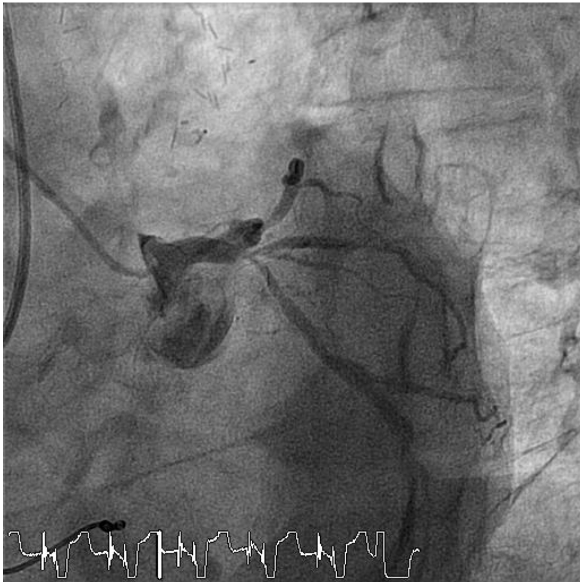


Cateterismo actual









Estrategia terapéutica

- ¿Trataría la anastomosis de la Da ?
- ¿ Trataría la Diagonal ?

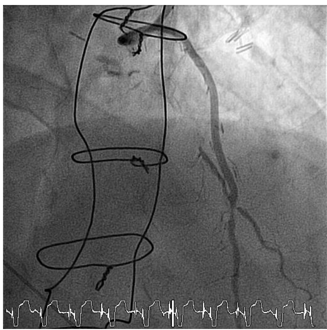
Repeat revascularization

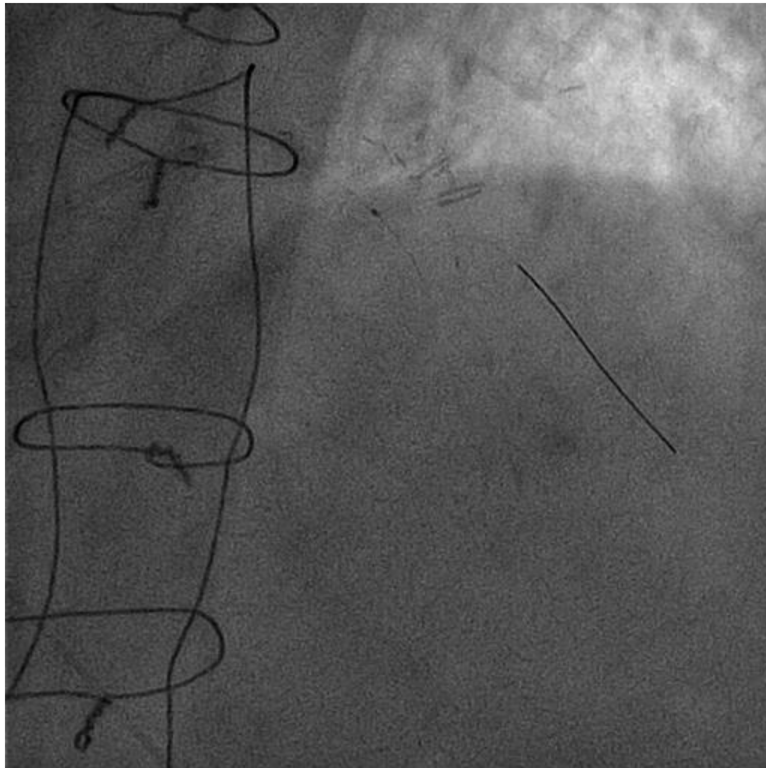
Recommendations	Class[a]	LoE[b]	Ref[c]
Early post-operative ischaemia and graft failure			
Coronary angiography is recommended for patients with: • symptoms of ischaemia and/or abnormal biomarkers suggestive of perioperative myocardial infarction • ischaemic ECG changes indicating large area of risk • new significant wall motion abnormalities • haemodynamic instability.	I	C	
It is recommended to make the decision on redo CABG or PCI by *ad hoc* consultation in the Heart Team and based on feasibility of revascularization, area at risk, comorbidities and clinical status.	I	C	
PCI should be considered over re-operation in patients with early ischaemia after CABG if technically feasible.	IIa	C	
If PCI is performed, revascularization of the native vessels or IMA grafts rather than occluded or heavily diseased SVGs should be considered.	IIa	C	
Disease progression and late graft failure			
Repeat revascularization is indicated in patients with severe symptoms or extensive ischaemia despite medical therapy if technically feasible.	I	B	54,143
PCI should be considered as a first choice if technically feasible, rather than re-do CABG.	IIa	C	
PCI of the bypassed native artery should be the preferred approach, if technically feasible.	IIa	C	
IMA, if available, is the conduit of choice for re-do CABG.	I	B	481
Re-do CABG should be considered for patients without a patent IMA graft to the LAD.	IIa	B	481
Re-do CABG may be considered in patients with lesions and anatomy not suitable for revascularization by PCI.	IIb	C	
PCI may be considered in patients with patent IMA graft if technically feasible.	IIb	C	
DES are recommended for PCI of SVGs.	I	A	489–495
Distal protection devices are recommended for PCI of SVG lesions if technically feasible.	I	B	484,485
Restenosis			
Repeat PCI is recommended, if technically feasible.	I	C	
DES are recommended for the treatment of in-stent re-stenosis (within BMS or DES).	I	A	501,502,508 511,524
Drug-coated balloons are recommended for the treatment of in-stent restenosis (within BMS or DES).	I	A	507– 511,524
IVUS and/or OCT should be considered to detect stent-related mechanical problems.	IIa	C	
Stent thrombosis			
Emergency PCI is recommended to restore stent and vessel patency and myocardial reperfusion.	I	C	
DAPT with use of potent $P2Y_{12}$ inhibitors (prasugrel or ticagrelor) is recommended over clopidogrel	I	C	
Adjunctive thrombus aspiration and high-pressure balloon dilation should be considered.	IIa	C	
IVUS and/or OCT should be considered to detect stent-related mechanical problems.	IIa	C	
Hybrid procedures			
Hybrid procedure, defined as consecutive or combined surgical and percutaneous revascularization may be considered in specific patient subsets at experienced centres.	IIb	C	

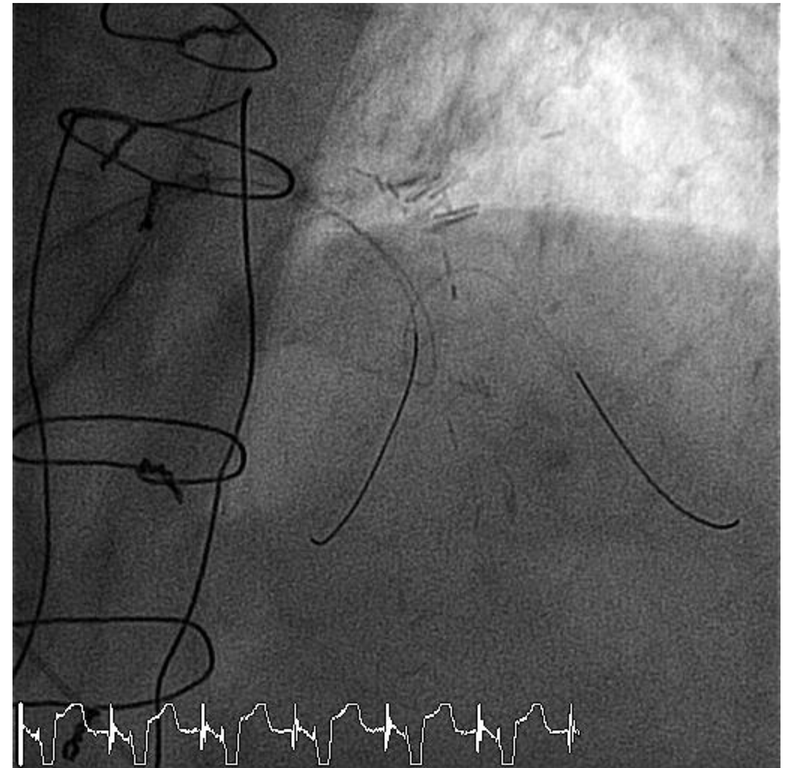
No aplicable en este caso

Decidimos tratar la diagonal

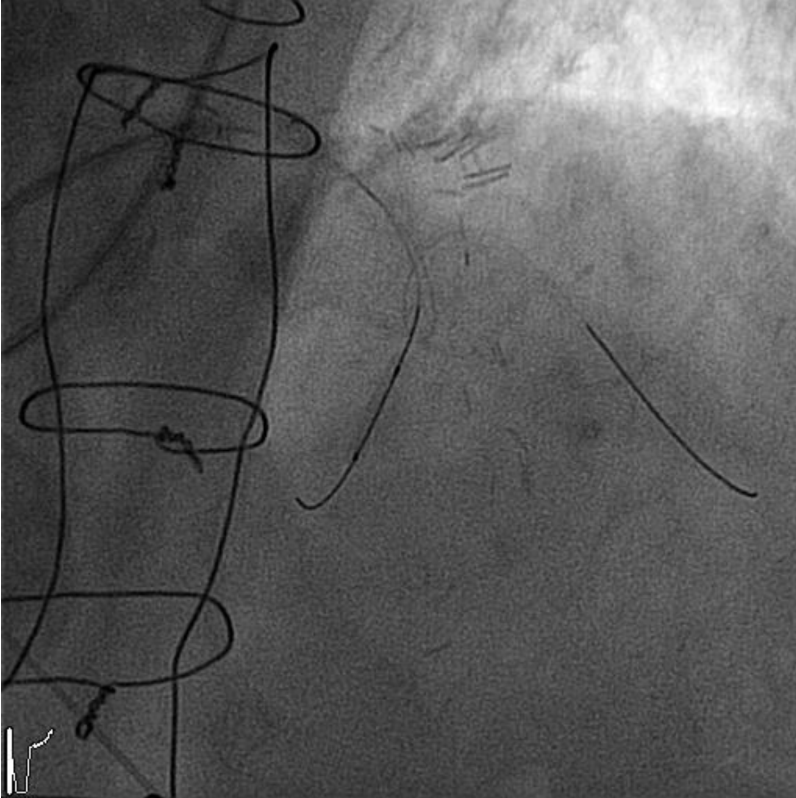
(Lesión ostial severa en un gran vaso)



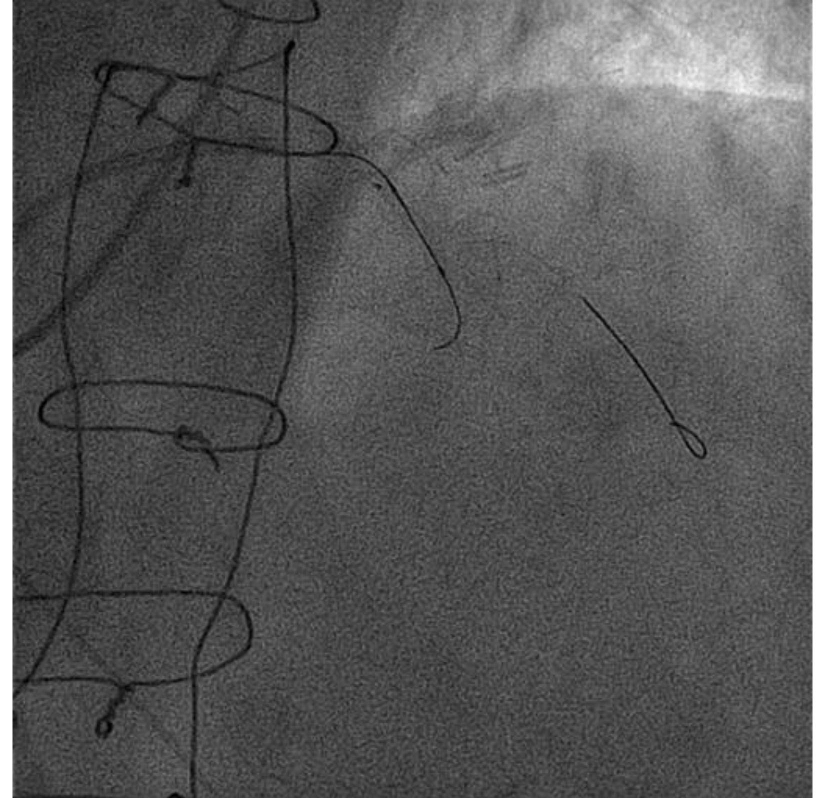




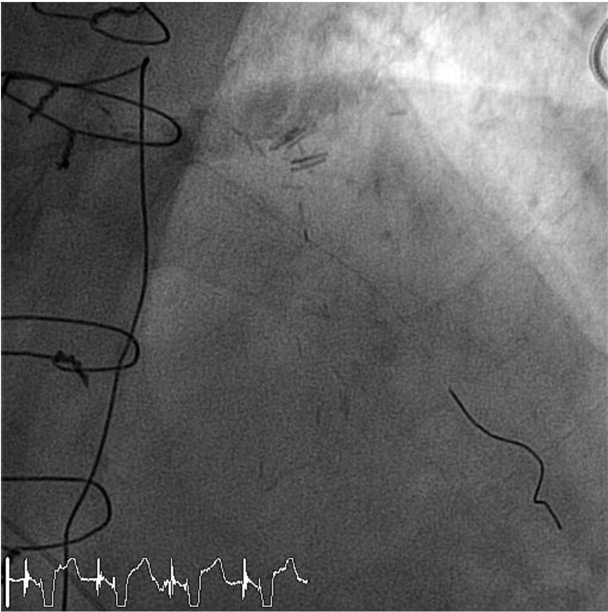
Fuimos a la coronaria nativa
Utilizamos un Microcatéter para acceder a la diagonal

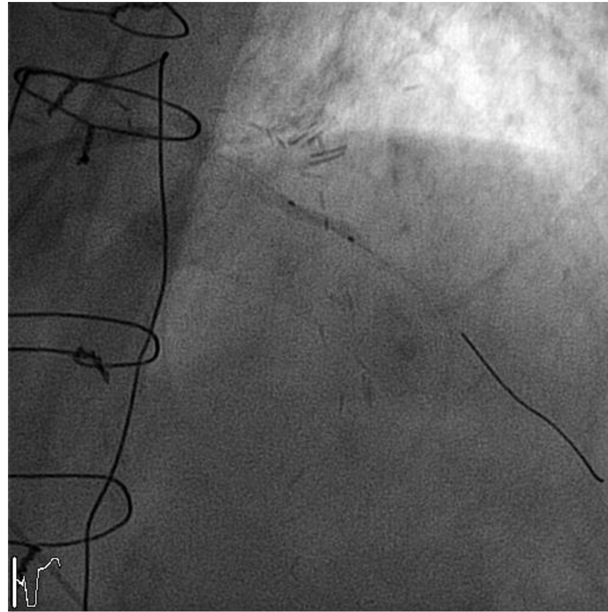


Anchoring para deshacer el bucle

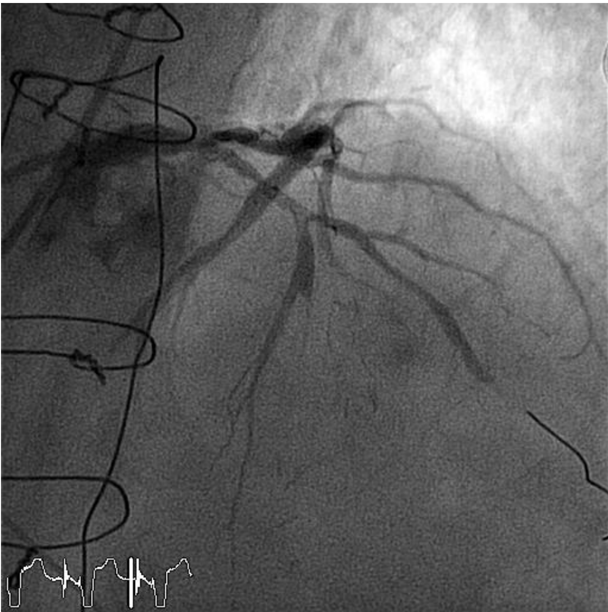


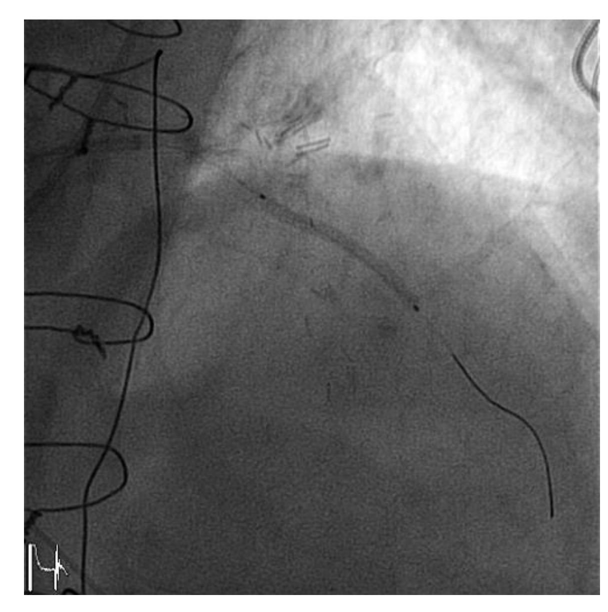
Dilatación de DA, y cambio en la configuración de placa



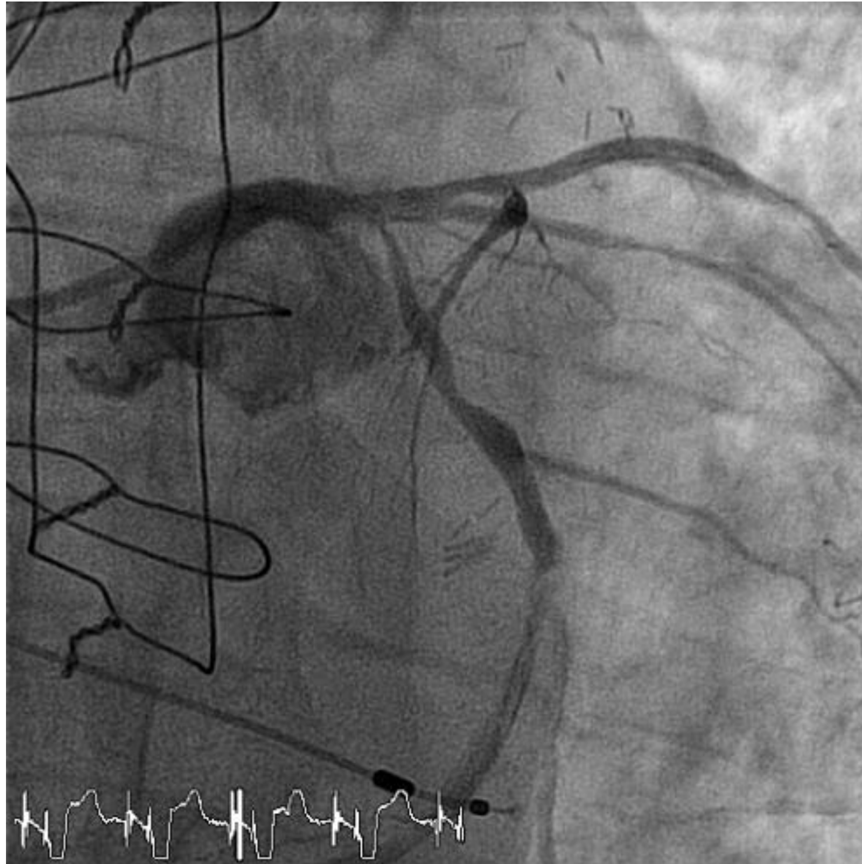


Balón Da/ Diagonal

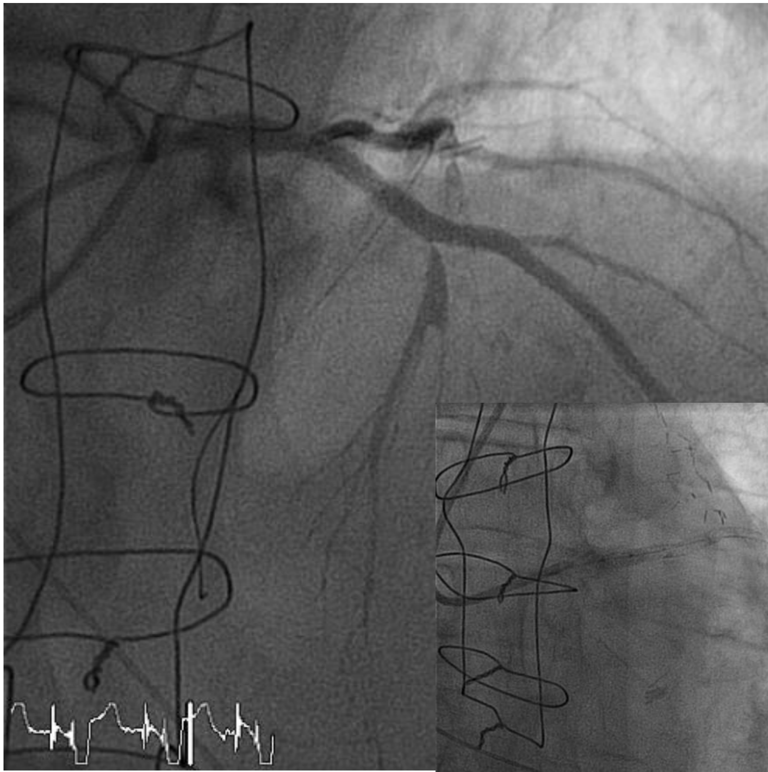


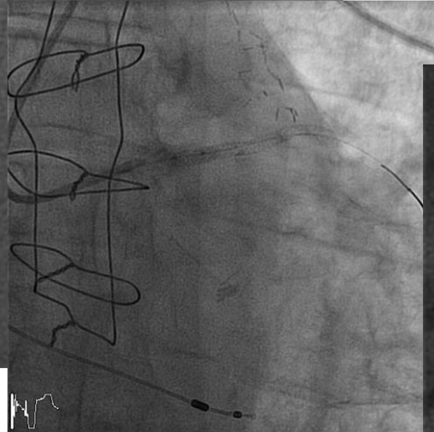


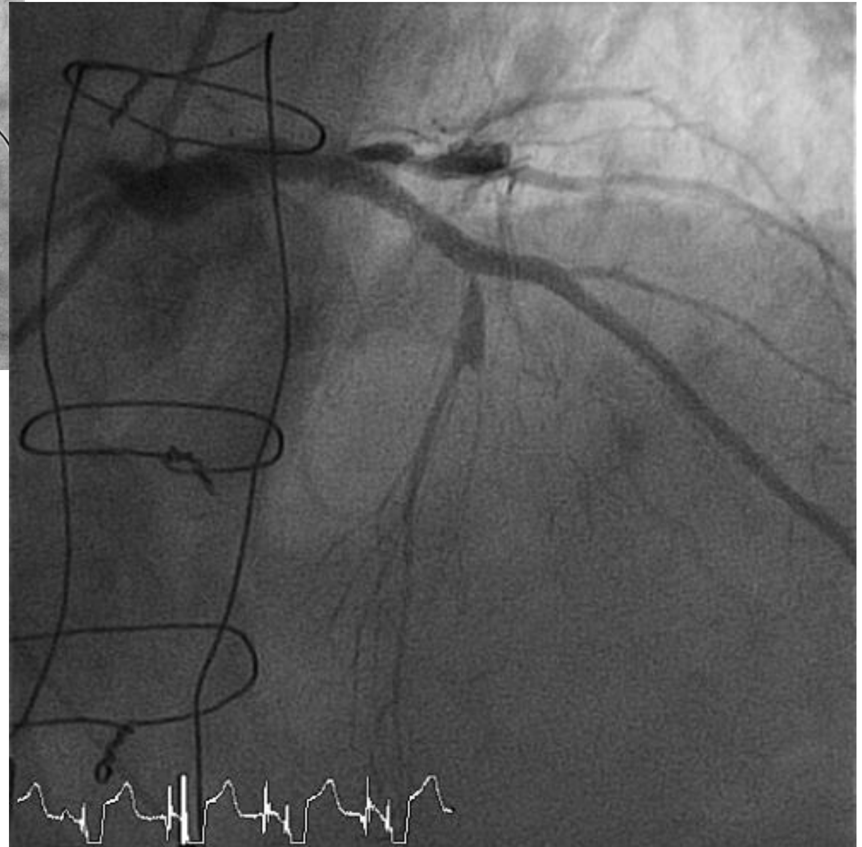
Stent Biofreedom
2,25/29 en Diagonal



Post stent en Diagonal







Stent en TC /Da 3 /29
Postdilatación 3,75 /8

Resultado final

El paciente mejoró clínicamente

¿Por qué este caso ?

- Los pacientes con revascularización quirúrgica previa siempre son un reto.
- En pacientes muy añosos, ¿debemos revascularizar para mejorar el pronóstico o sólo para mejorar los síntomas?
- Es un caso con trucos sencillos para tener buenos resultados