



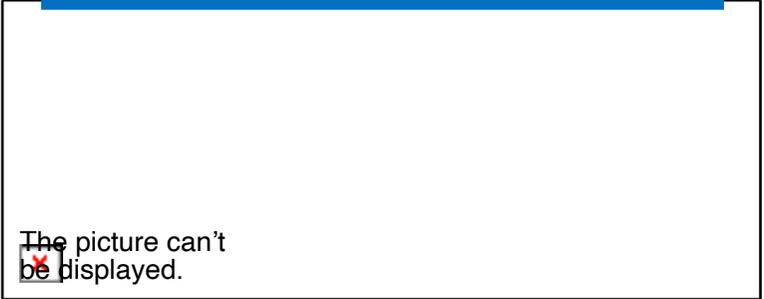
Provisional T stenting: Choices, pitfalls and troubleshooting

Remo Albiero, MD

Interventional Cardiology Unit – Sondrio Hospital - Sondrio (SO) - Italy

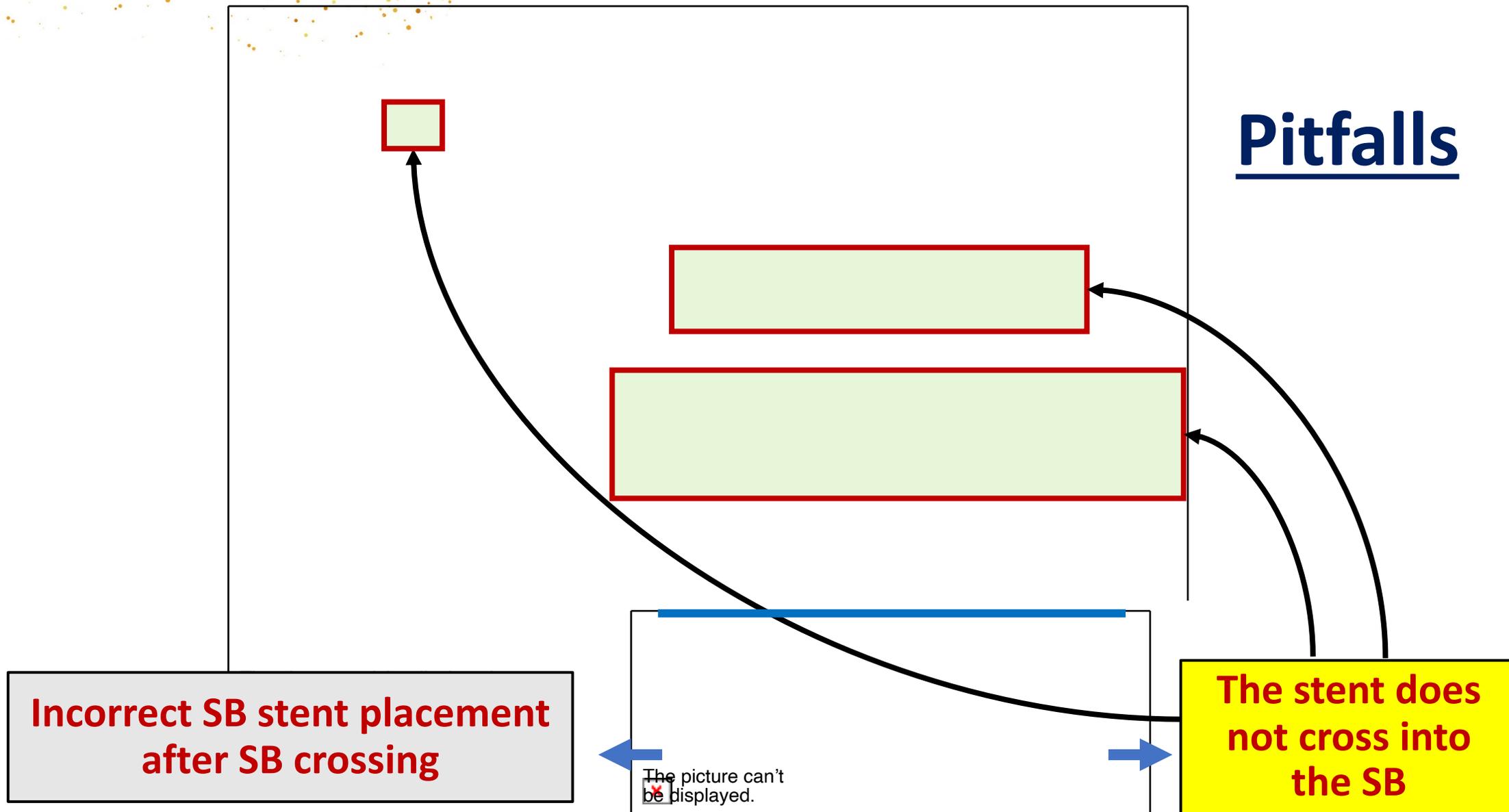
8 min

Provisional T stenting



Provisional T stenting

Pitfalls



Bail-out SB T Stenting

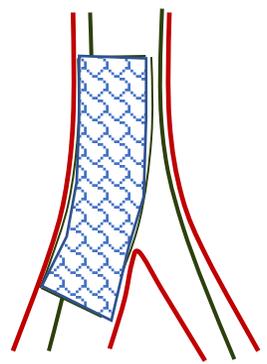
Non-Left Main

 The picture can't be displayed.

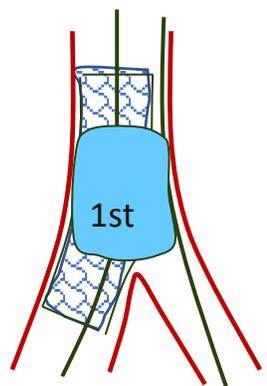
- T can be selected observing a favourable deformation of the stent in relation to the SB orifice
- informed by careful imaging with stent boost enhancement

 The picture can't be displayed.

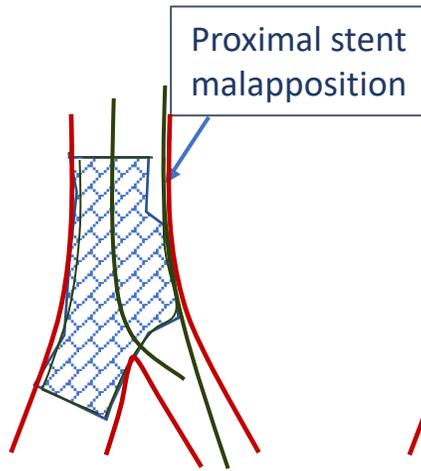
Provisional non-LM Stenting: Pitfalls & Troubleshooting (2/2)



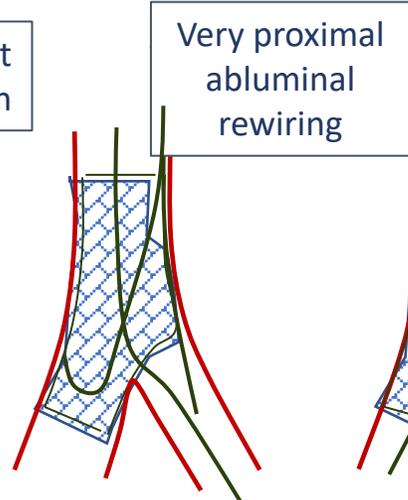
MV Stenting
(sized according to distal MV diameter)



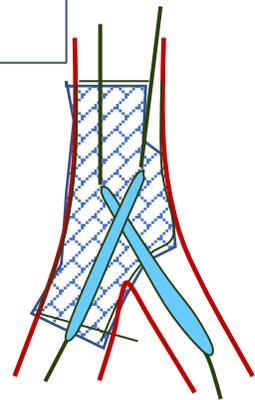
1st POT incomplete



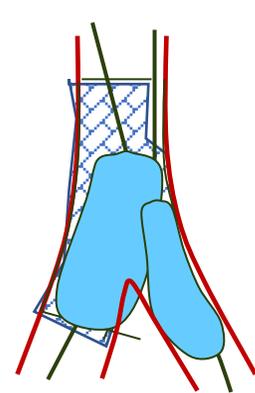
Pullback SB re-wiring through the distal strut



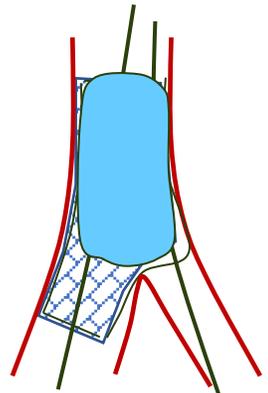
Remove the jailed wired



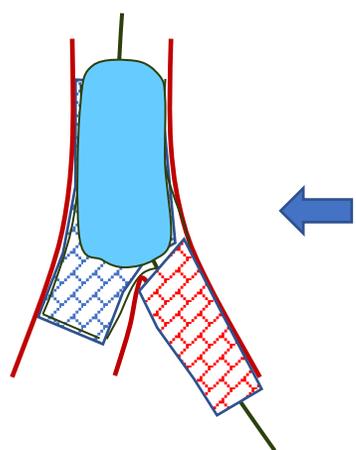
MB balloon crosses



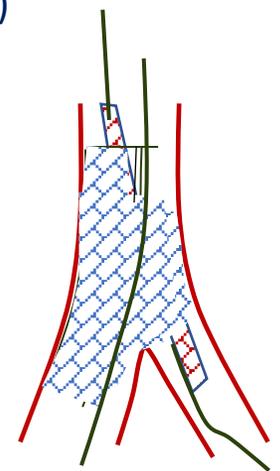
Kissing Balloon



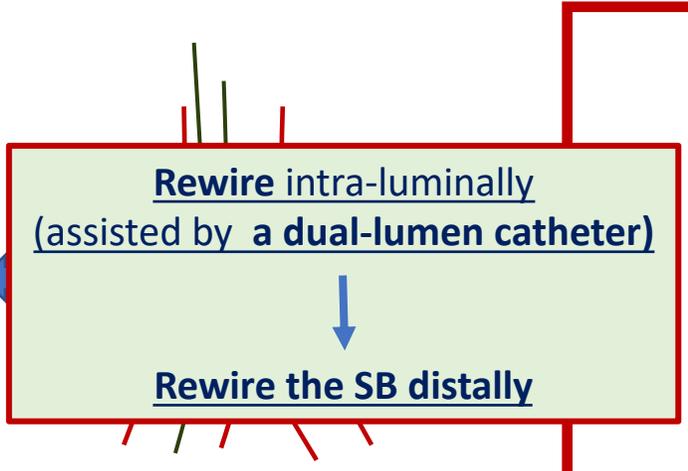
Re-POT



Final Re-POT on SB wire

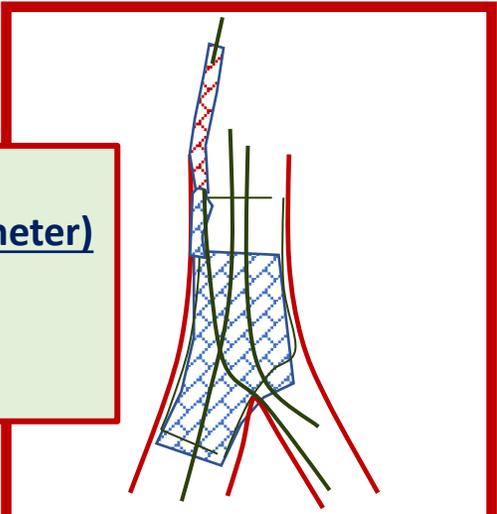


SB T stent

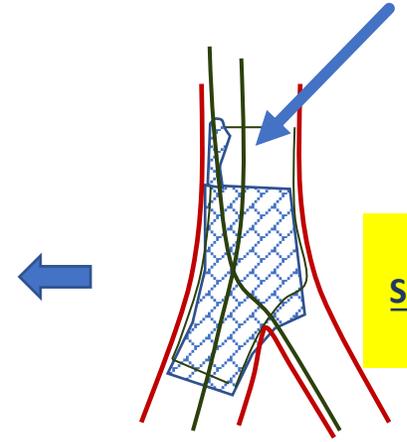


SB ballooning

Rewire intra-luminally (assisted by a dual-lumen catheter)
↓
Rewire the SB distally



SB Stent will not cross

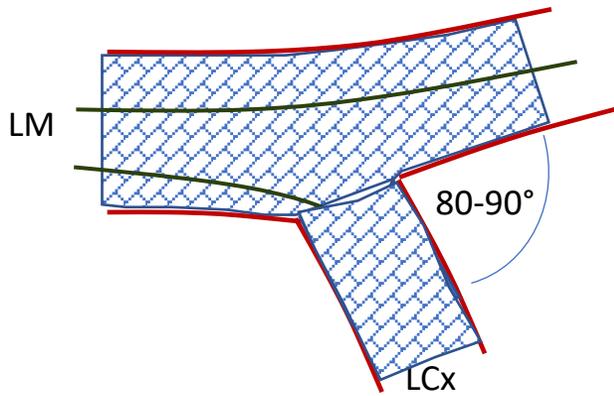


Bailout SB stenting required

- Proximal stent crushed by rePOT
- SB wire jailed inside the crushed very proximal MV stent segment

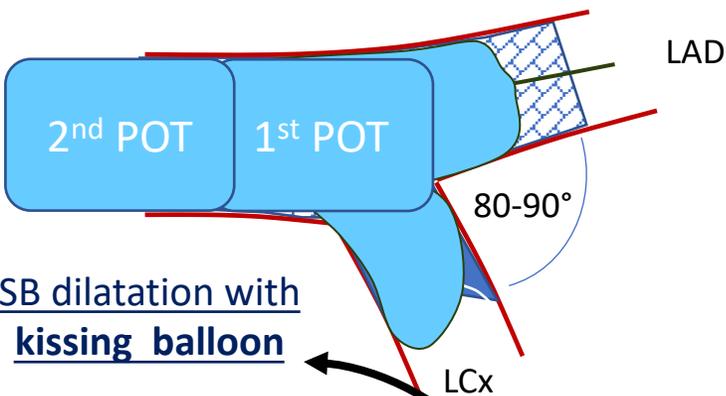
Bail-out SB T Stenting

Left Main



- T is frequently selected observing a favourable 80-90° LAD-LCx angle
- **Proximal vs Distal rewiring difficult to evaluated by imaging**

Provisional LM T Stenting: Pitfalls and Troubleshooting (1/2)

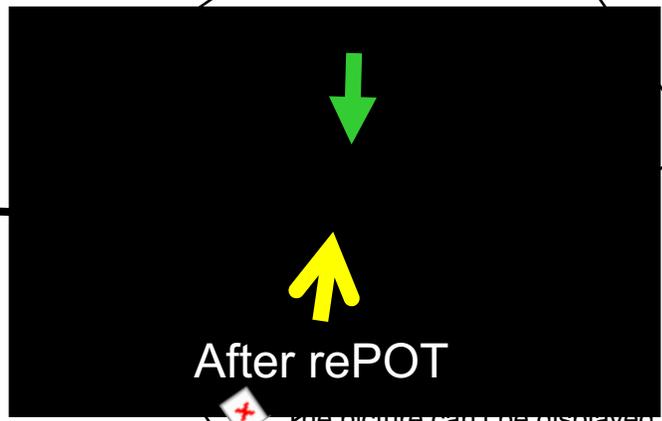
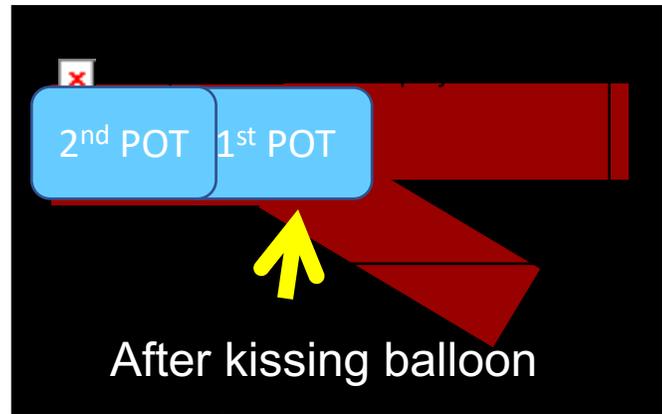
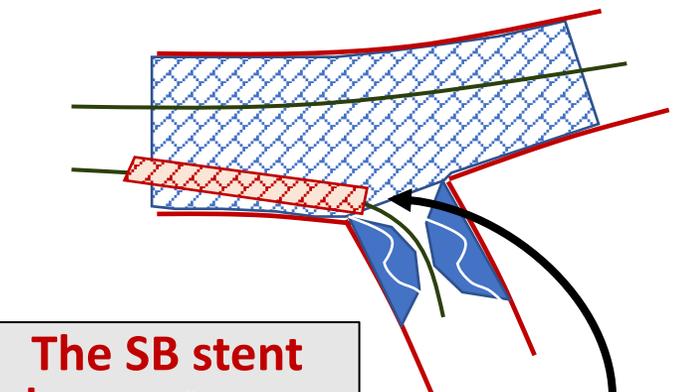


SB dilatation with kissing balloon

followed by rePOT

SB result after ballooning not acceptable

Bailout SB T stenting



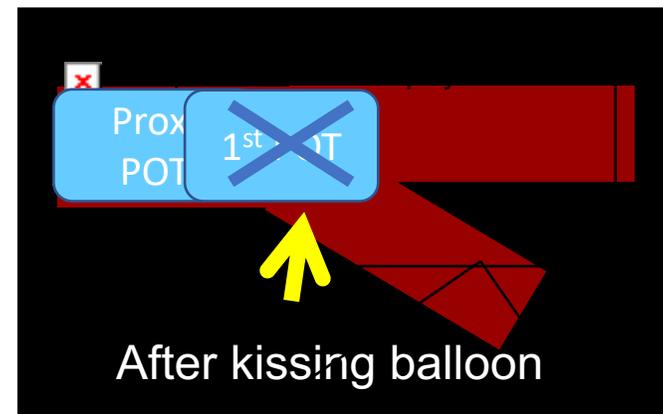
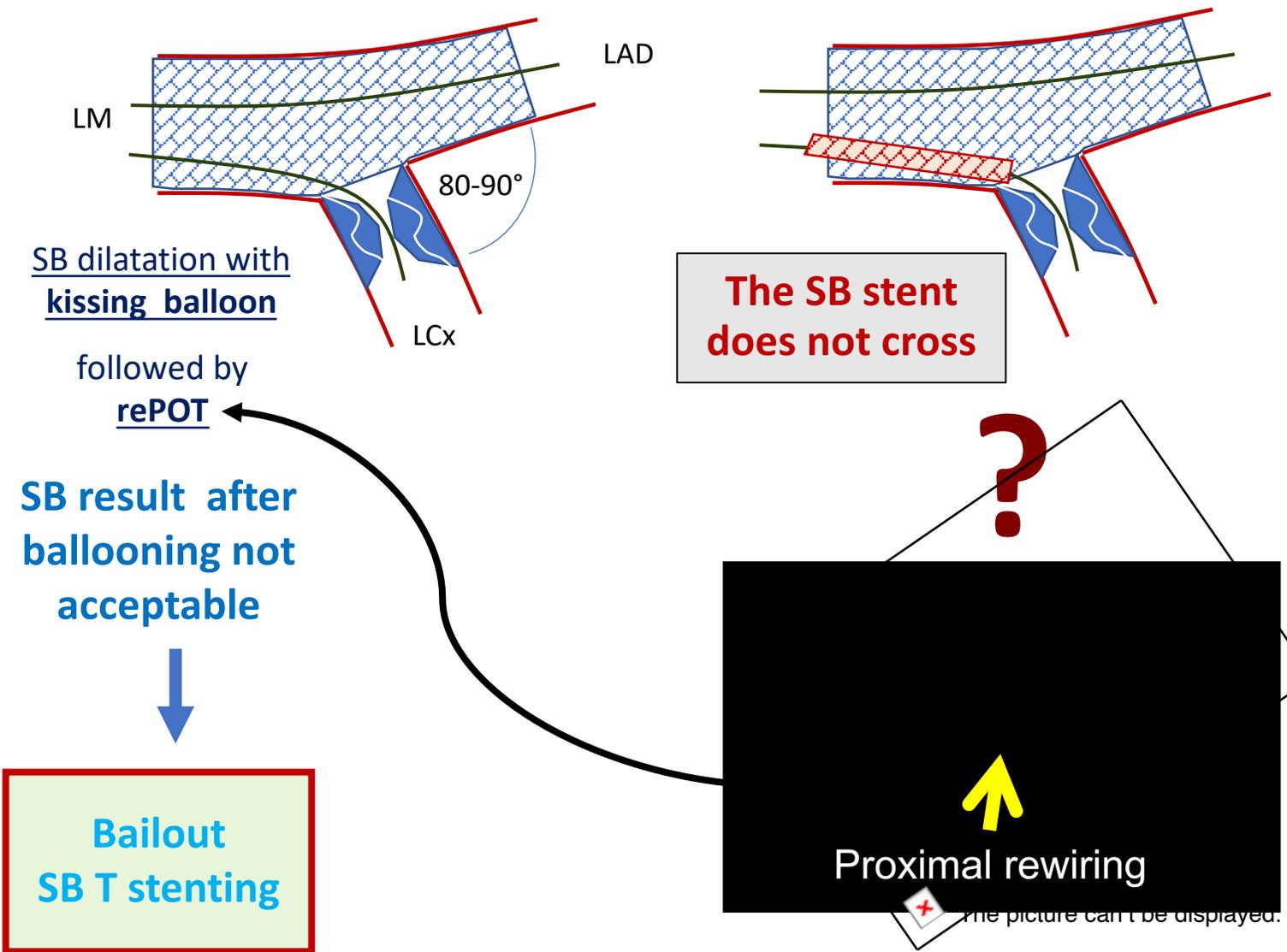
SB balloon re-dilatation and/or kissing balloon

Bailout SB T stenting

Provisional LM T Stenting

Pitfalls:

- Proximal rewiring
- rePOT



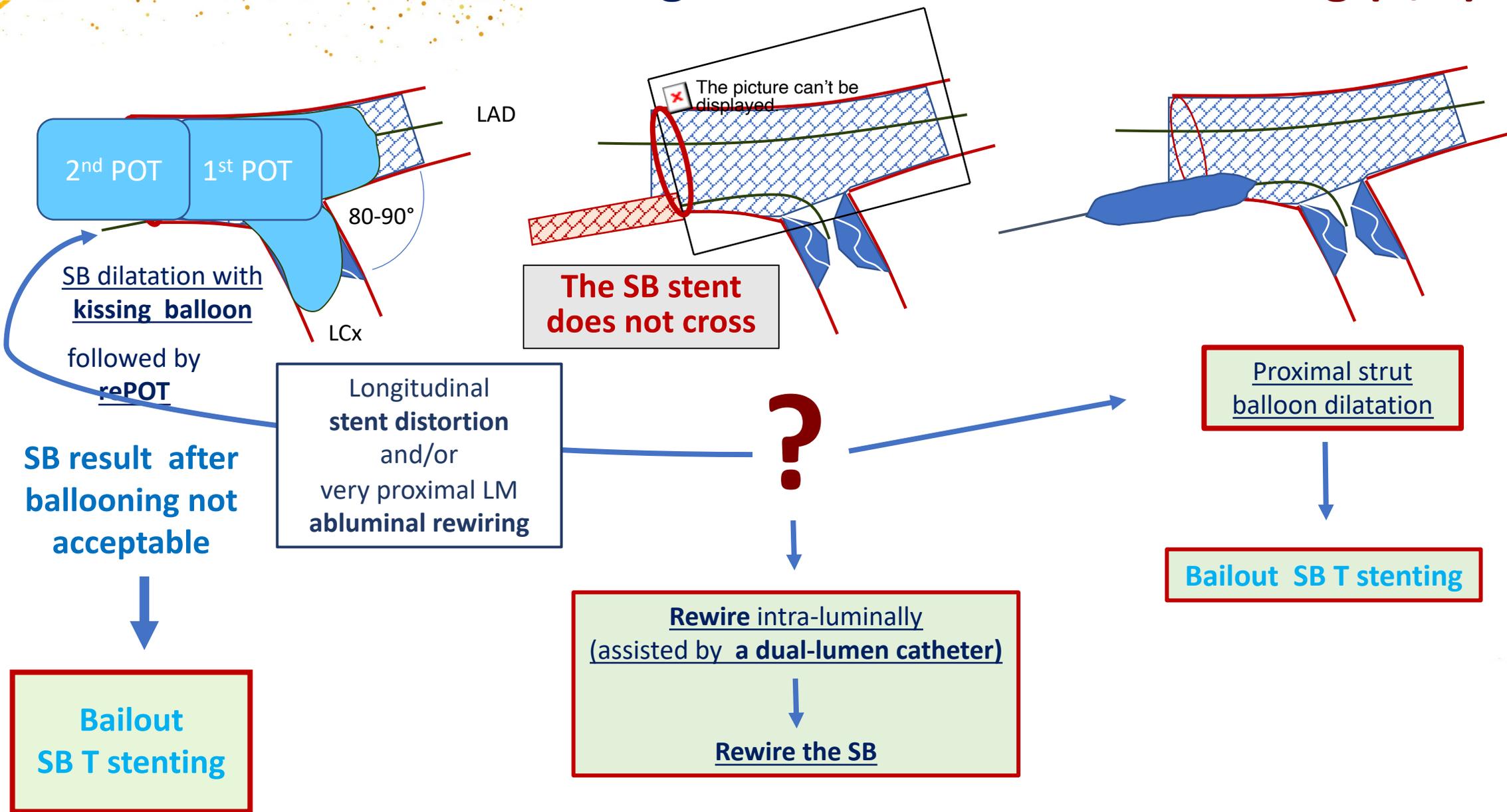
Only a proximal rePOT

is safer

The picture can't be displayed.

The picture can't be displayed.

Provisional LM T Stenting: Pitfalls and Troubleshooting (2/2)



Provisional T stenting

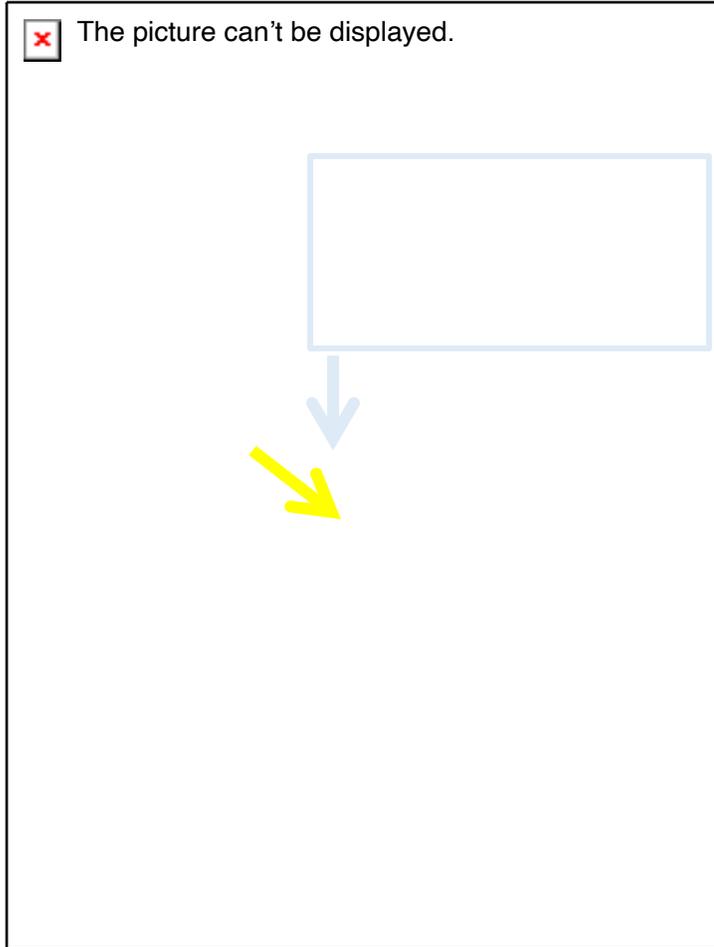
Pitfalls

**Incorrect SB stent placement
after SB crossing**

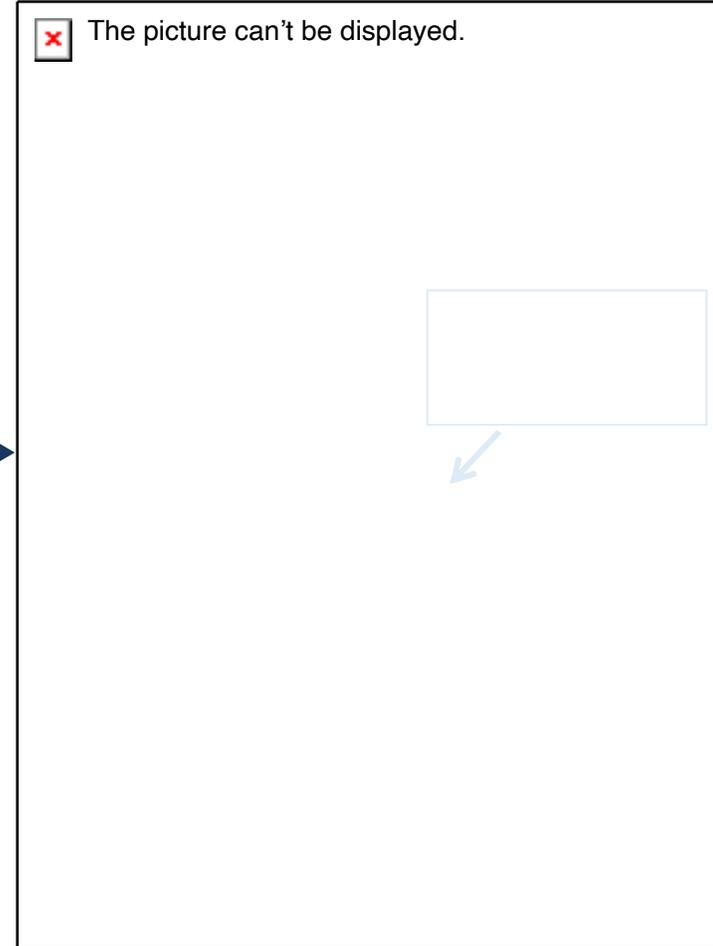
The picture can't
be displayed.

Incorrect stent placement during T

Too distal stent deployment site with failure to cover the ostium



Another stent implantation on the SB ostium according to **TAP**



Bifurcation Lesion Preparation

Traditional Balloon



Scoring or Cutting Balloons

Atherectomy Catheters

OPN NC - Super High RBP (35atm) PTCA Balloon



The picture can't be displayed.

- Twin layer balloon construction with virtually zero dog - boning effect
- Super high pressure PTCA balloon (RBP 35atm)
- Provides success rates where other balloons fail

Intravascular Lithotripsy (IVL)



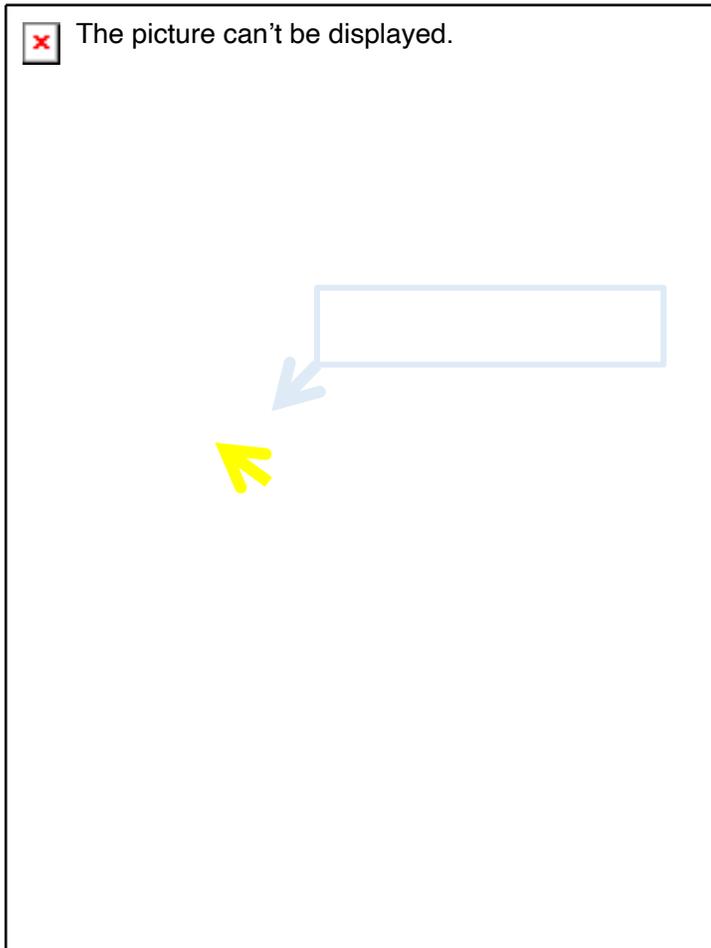
The picture can't be displayed.



The picture can't be displayed.

Incorrect stent placement during T

Accidentally **too long protrusion** inside the MV

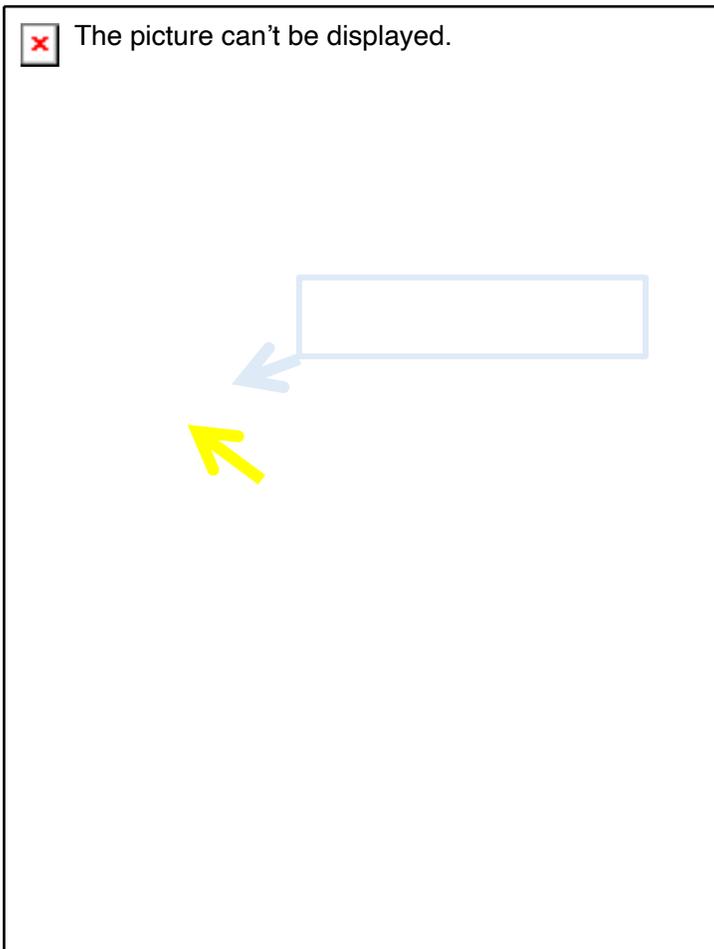


Conversion into an **“internal” crush**

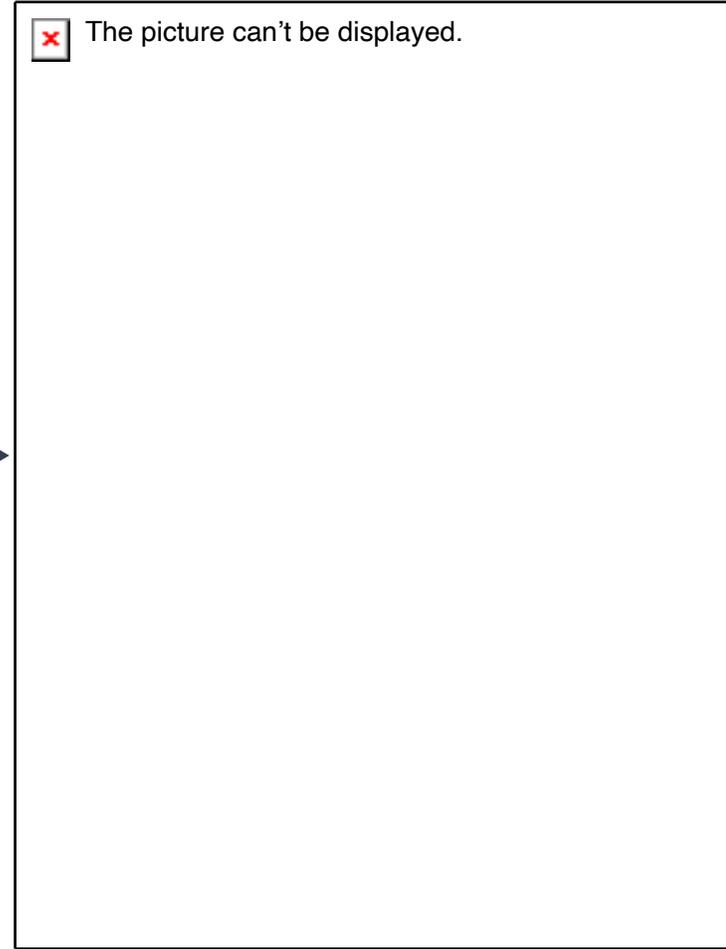


Incorrect stent placement during T

Accidentally **extremely long protrusion** inside the MV with SB stent reaching the proximal MV stent segment



Conversion into a **mini-culotte**





Excessive Cardiac motion ?

**Balloon inside the MV stent
inflated at 2-6 atm**

The picture can't be displayed.



Thank You