

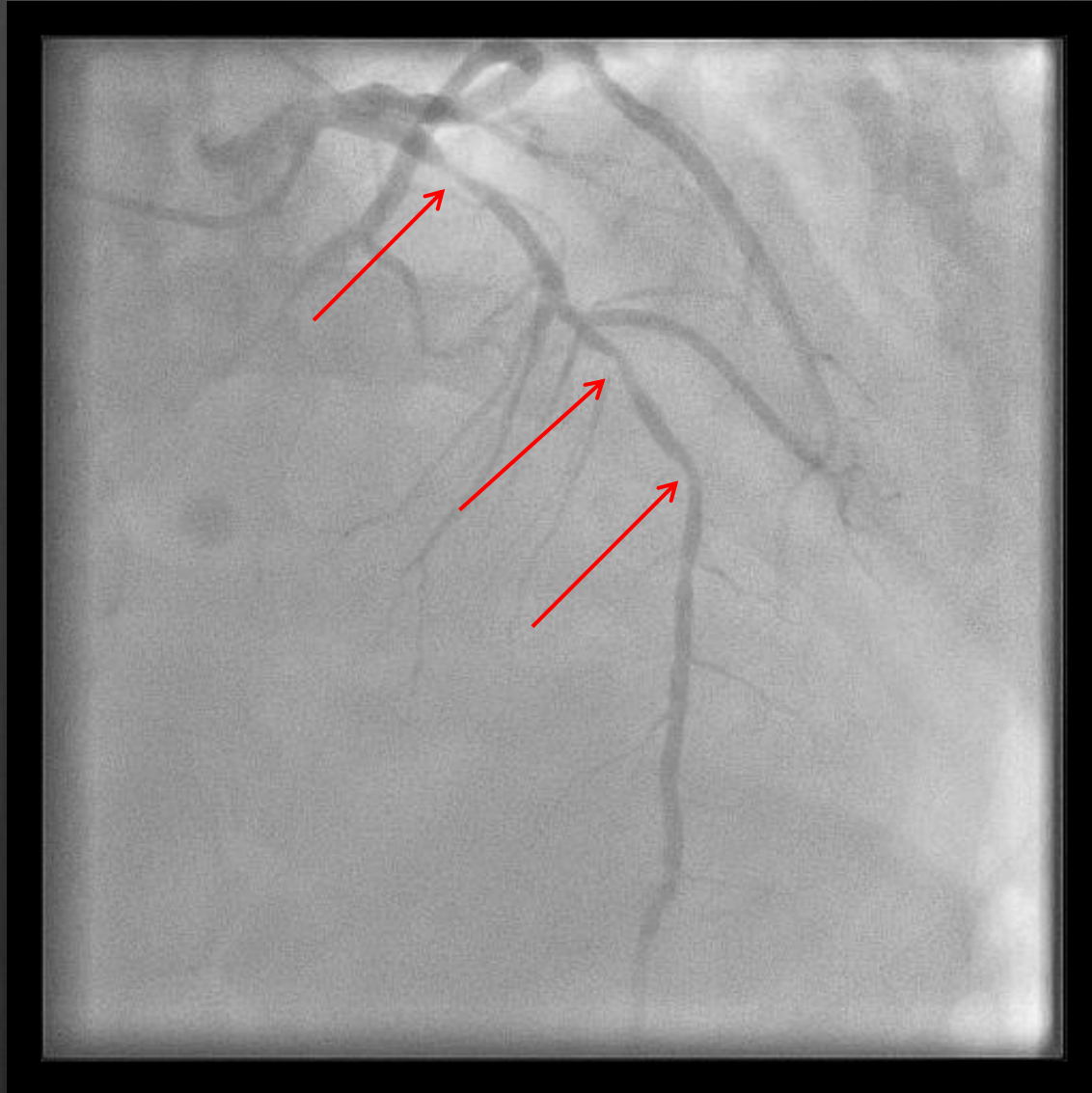
Clinical case - Sweden



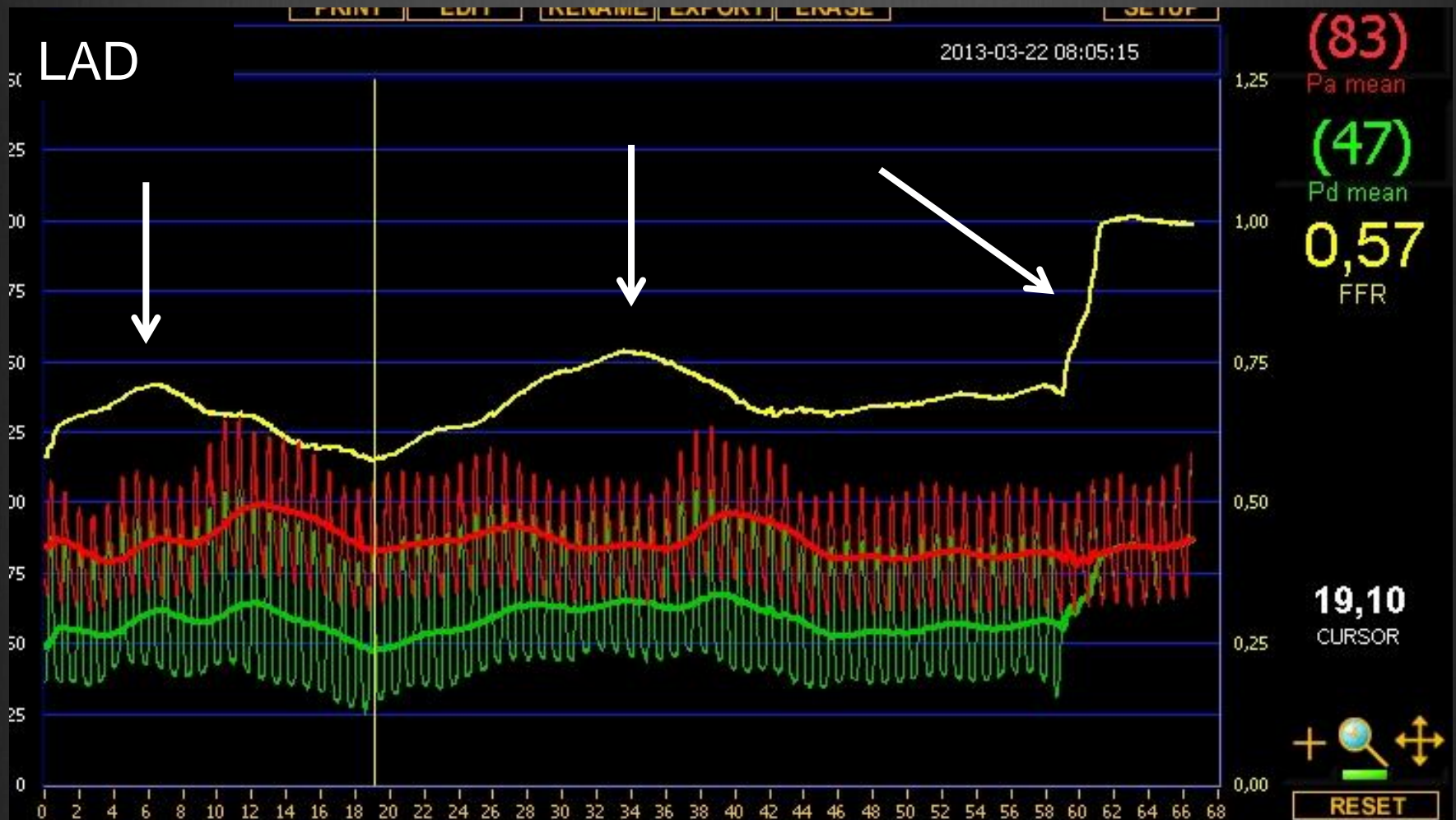
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59 y.o. Male with angina CCS 3 and a
perfusion study showing an apical
reversible perfusion defect.

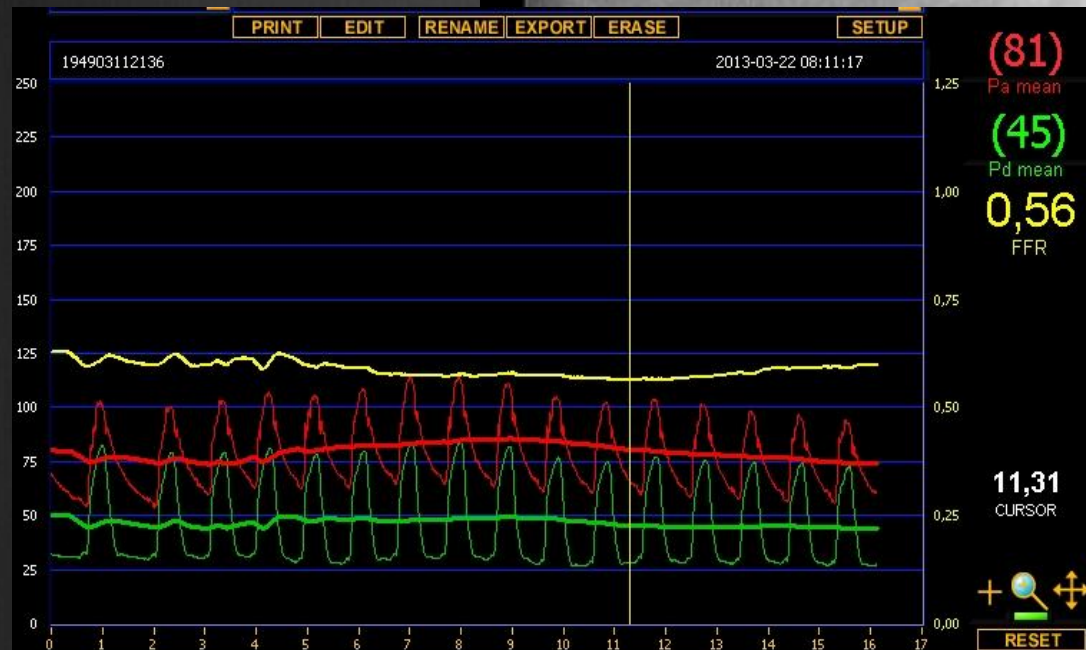
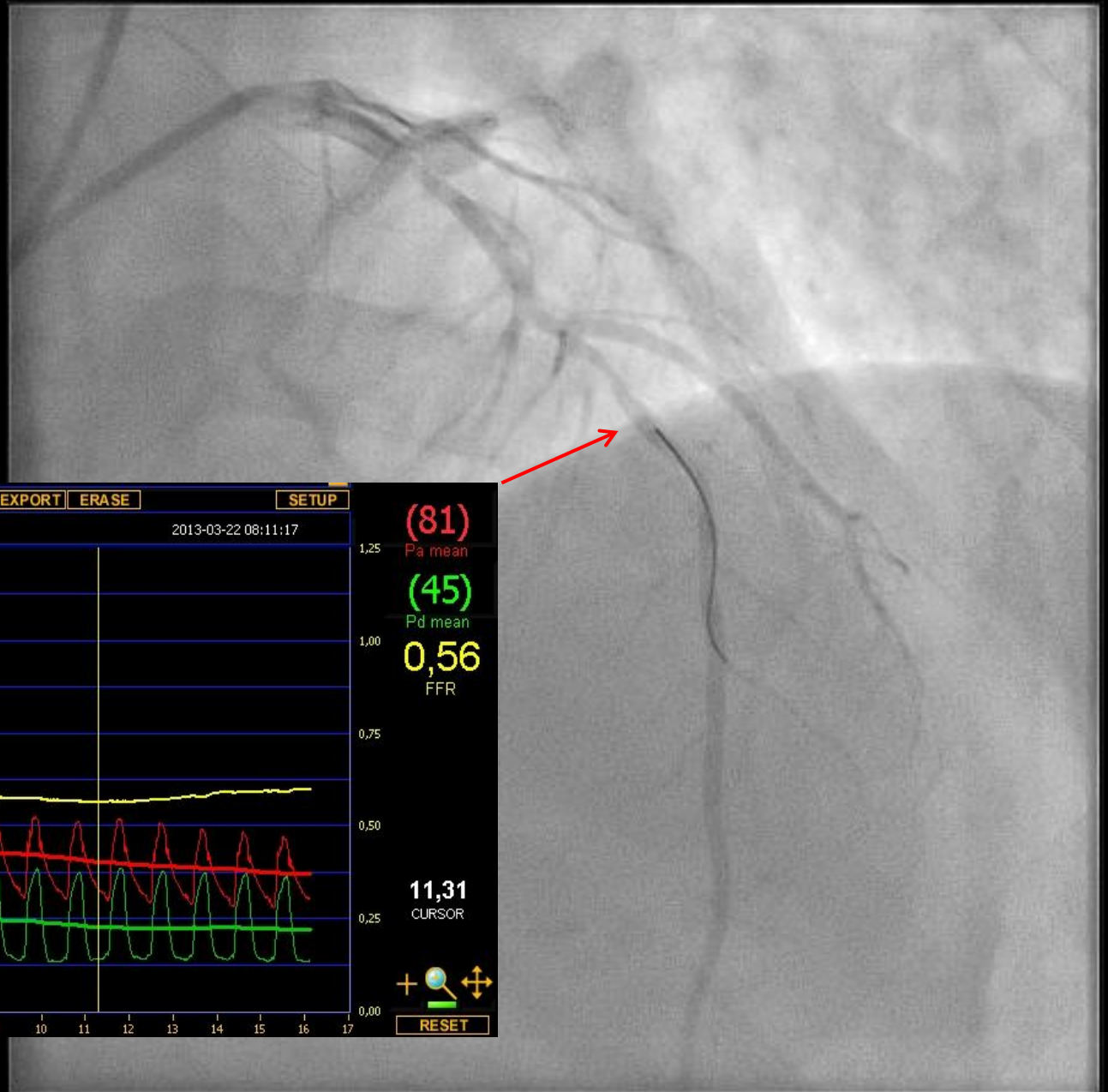
LAD



Pull-back recording – i.v. Adenosine



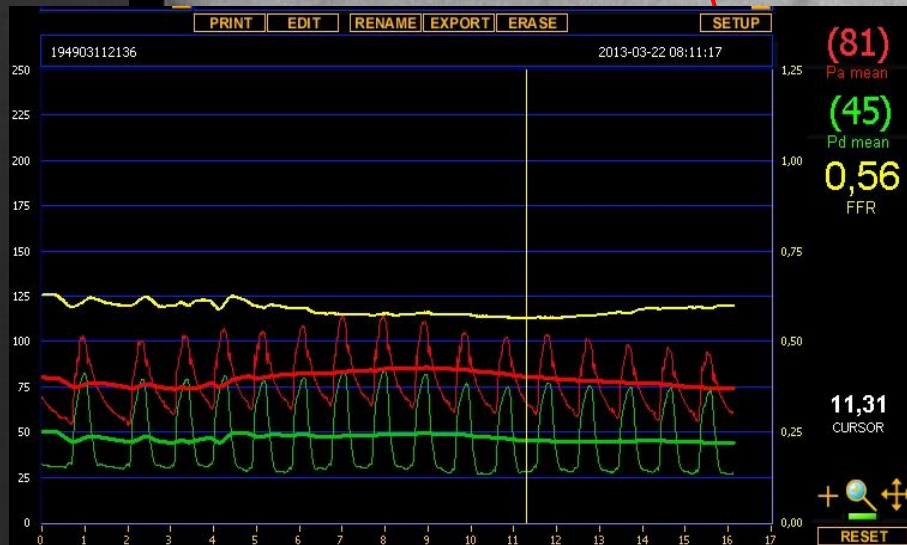
Pressure sensor
Between 2:nd
And 3:d stenosis



Pressure sensor
between 1:st and
2:nd stenosis

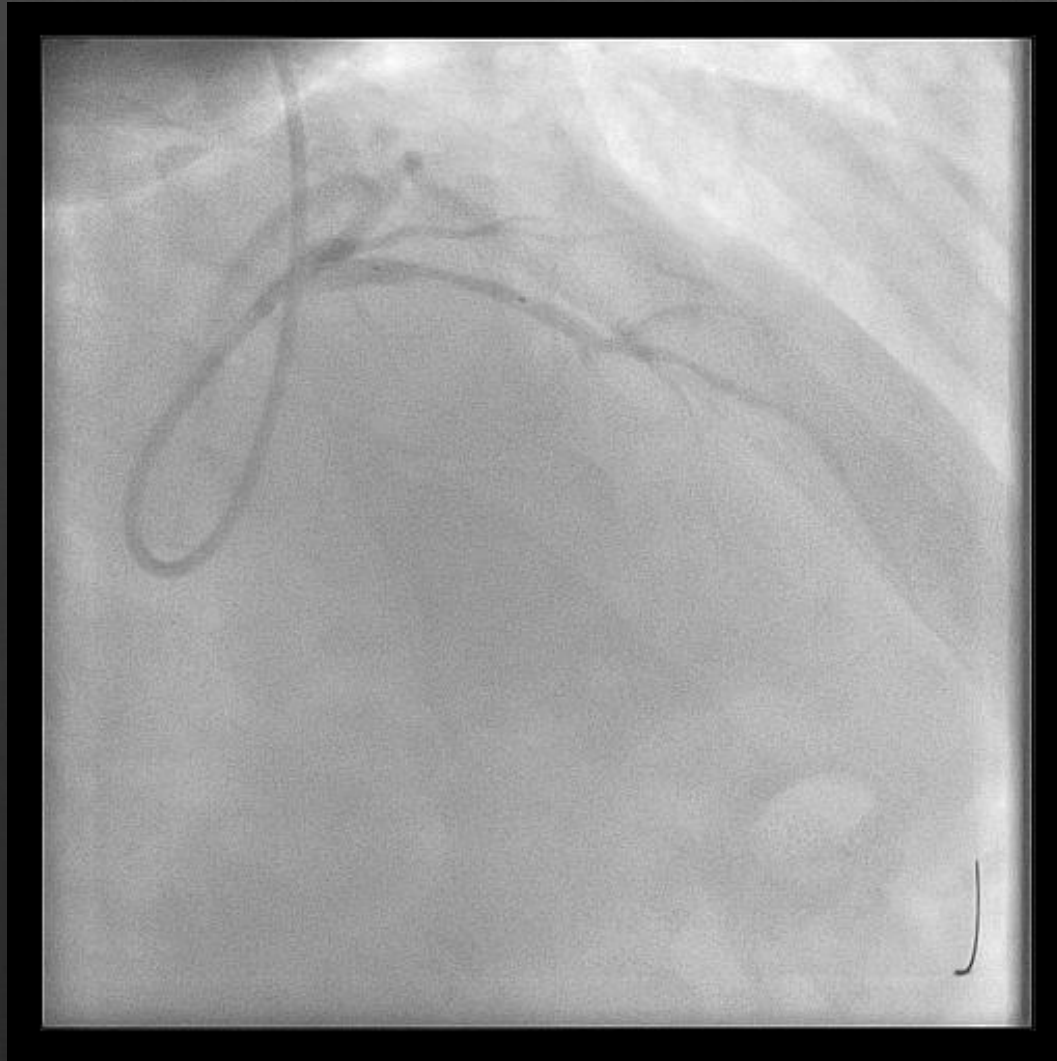


Apparent gradient in distal lesions



$$0,65 - 0,56 = 0,09$$

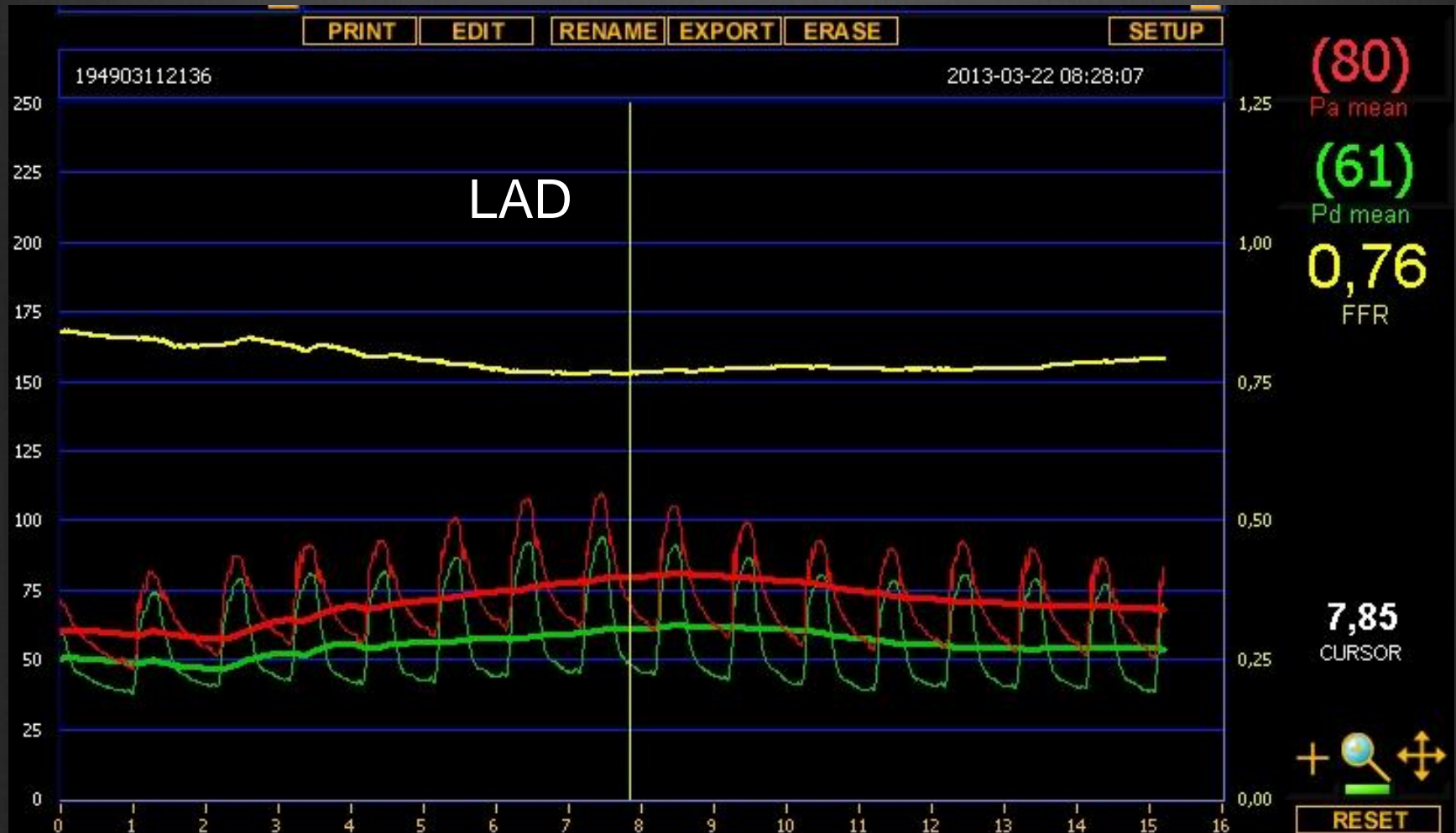
Prox stent



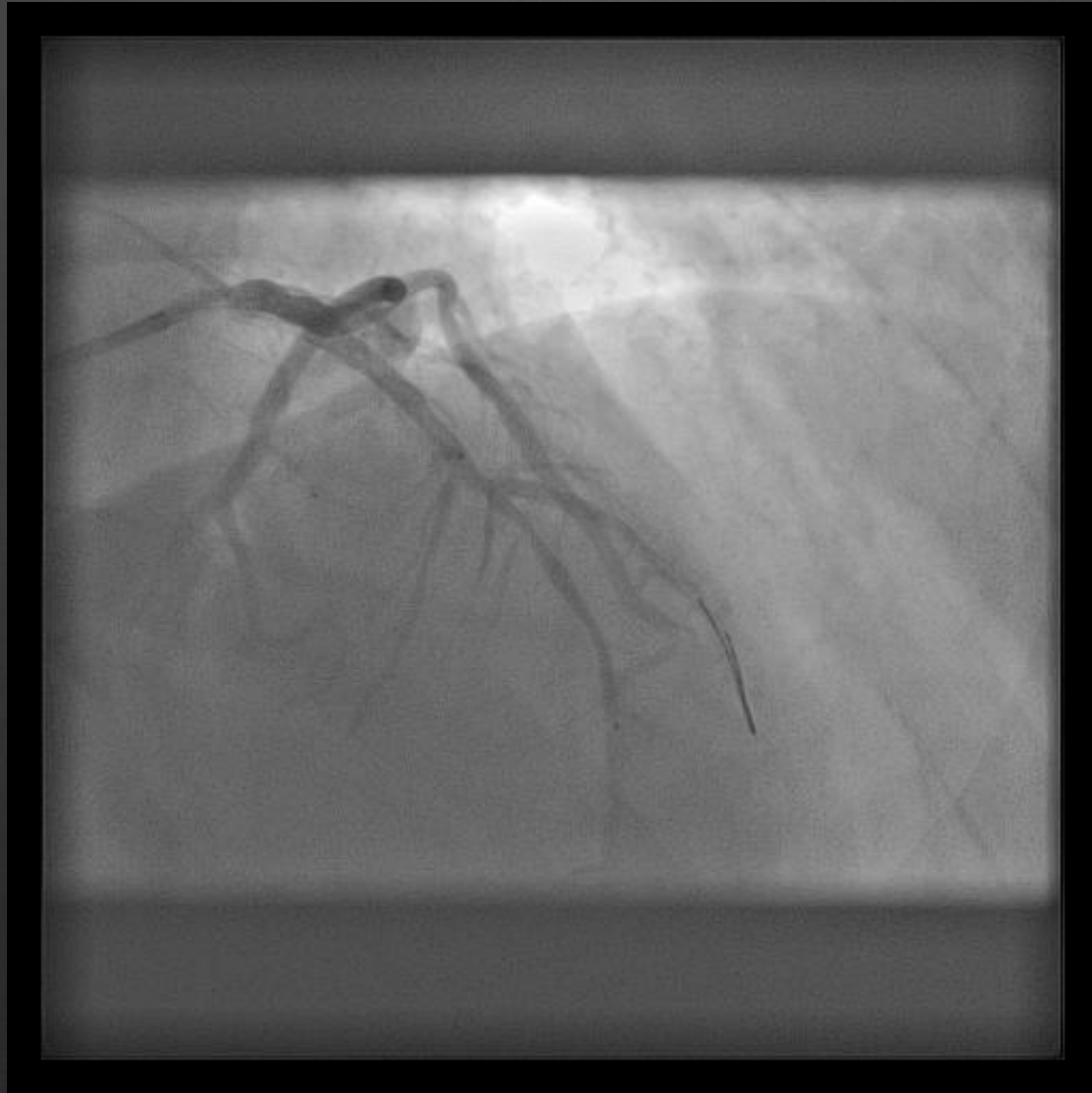
Pressure sensor in distal LAD after prox. stent



Pressure sensor between remaining 2 lesions



Second stent + n.c. balloon



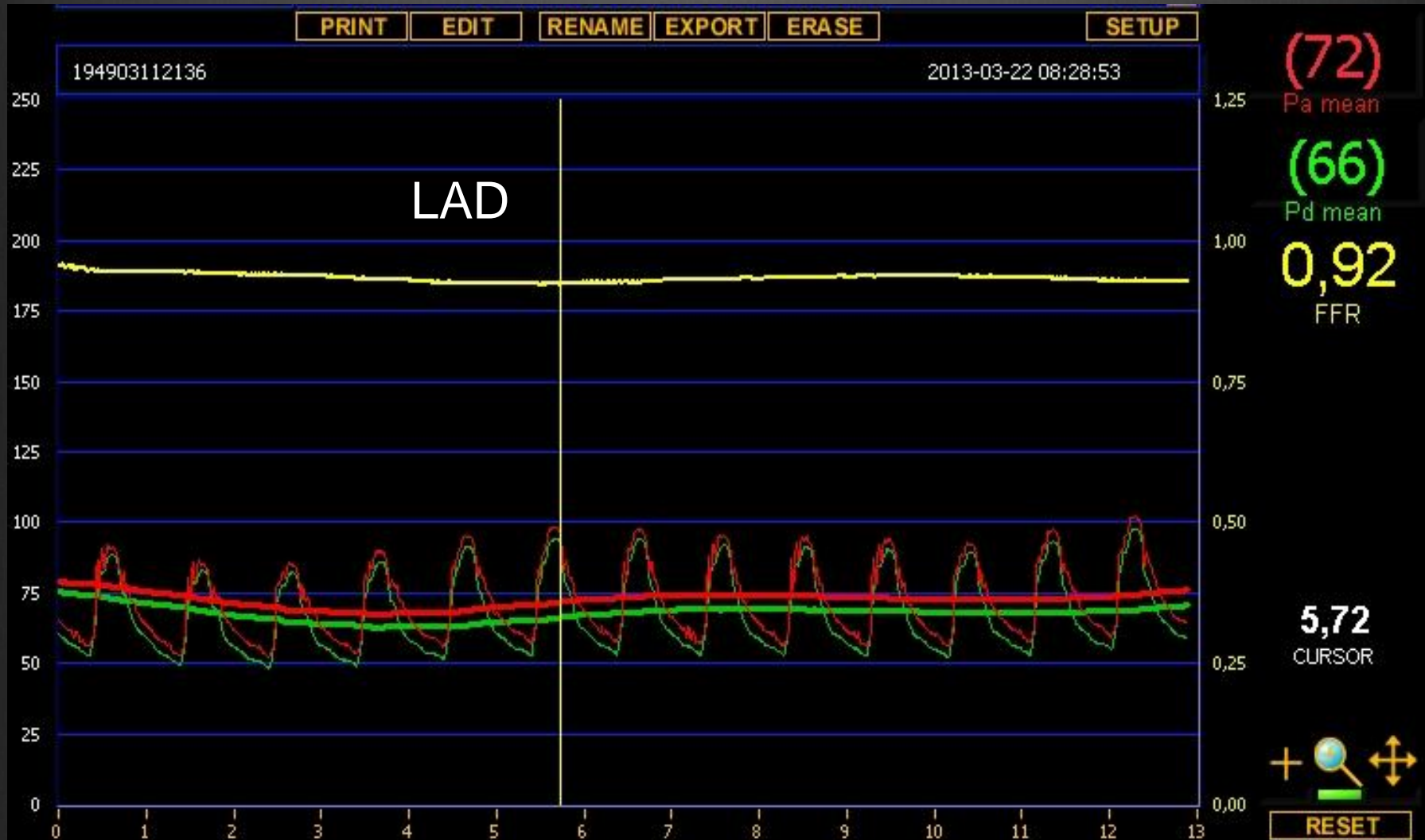
Final angiographic result



Pressure sensor in distal LAD after 2 stents



Pressure sensor between stents



Summary

- ⦿ Non-invasive testing did *not* provide enough information to guide intervention
- ⦿ First assessment: only prox. lesion significant
- ⦿ Dramatically increased gradient in distal stenoses after removal of the proximal one
- ⦿ Remaining gradient in stents and prox LAD