

中文題目：在ST節段上升心肌梗塞經由冠連導管成功置放支架於先天變異的右冠狀動脈

英文題目：Successful stent deployment via a GuideLiner catheter for an anomalous RCA in STEMI

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Abstract:

A 72 year-old female presented with dyspnea and desaturation at midnight on Dec 15, 2011. Intubation was arranged immediately at ER and then 12-lead EKG revealed ST segment elevation over II,III,aVF,V5, and V6. Under the impression of STEMI, primary percutaneous coronary intervention (PCI) was arranged. There was no significant stenosis in LAD and LCX but an anomalous RCA with 90% stenosis in the middle part was found. Initially, there was no Amplatz Left (AL) or Multipurpose guiding catheter which is suitable for the engagement of anomalous coronary arteries at our Cath Lab. We tried engaging with a 6Fr Judkins left (JL) guiding catheter and pre-dilated with a Sprinter balloon (1.5x12 mm) and then a Marverick balloon (3.0 x 20 mm). However, it was very difficult to pass a stent (Driver 3.0x24mm).

Under an anchoring balloon assistance, a Guideliner Catheter was inserted to the proximal RCA smoothly and the Driver stent was implanted successfully in the middle RCA. Final Angiogram revealed a satisfied result in the RCA.

Conclusions:

1. Anomalous coronary arteries are challenging in the management of STEMI.
2. Stent deployment via a GuideLiner catheter for an anomalous RCA in STEMI is feasible.
3. A Guideliner Catheter is safe as an alternative choice in the engagement of anomalous coronary arteries if no Amp Amplatz left or multipurpose catheters available.