



When adequate equipment isn't on the shelf

Dr Peadar Devlin

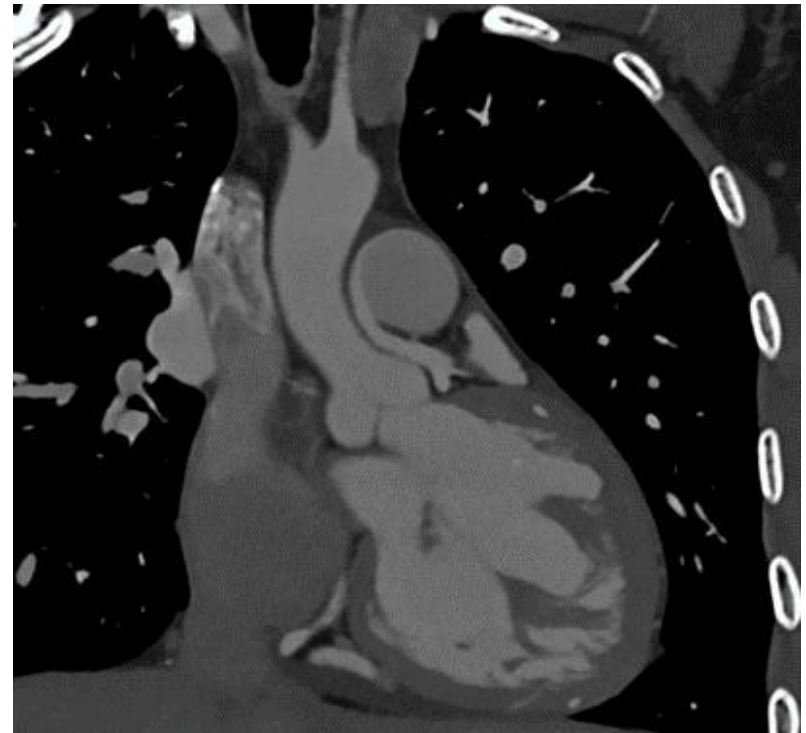
Dr Aileen Kearney

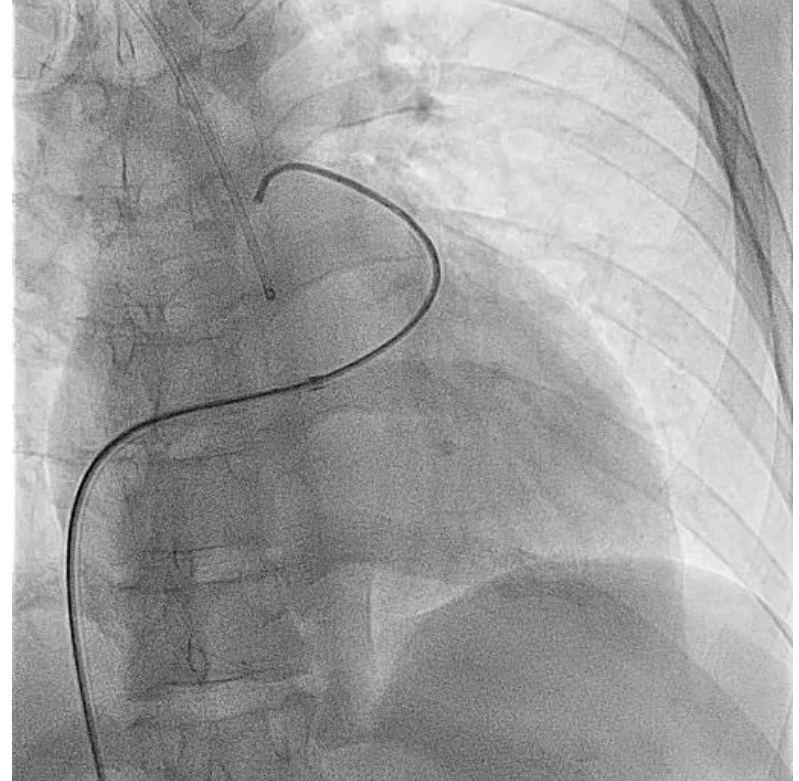
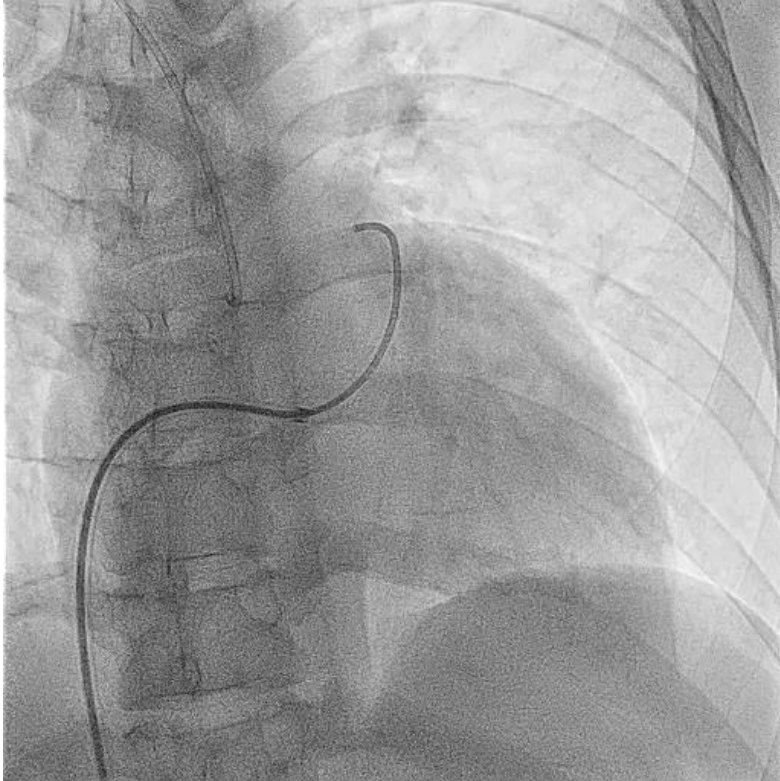
Dr Meadhbh Hogg

Dr Colum Owens

Out of Hospital Cardiac Arrest during sport

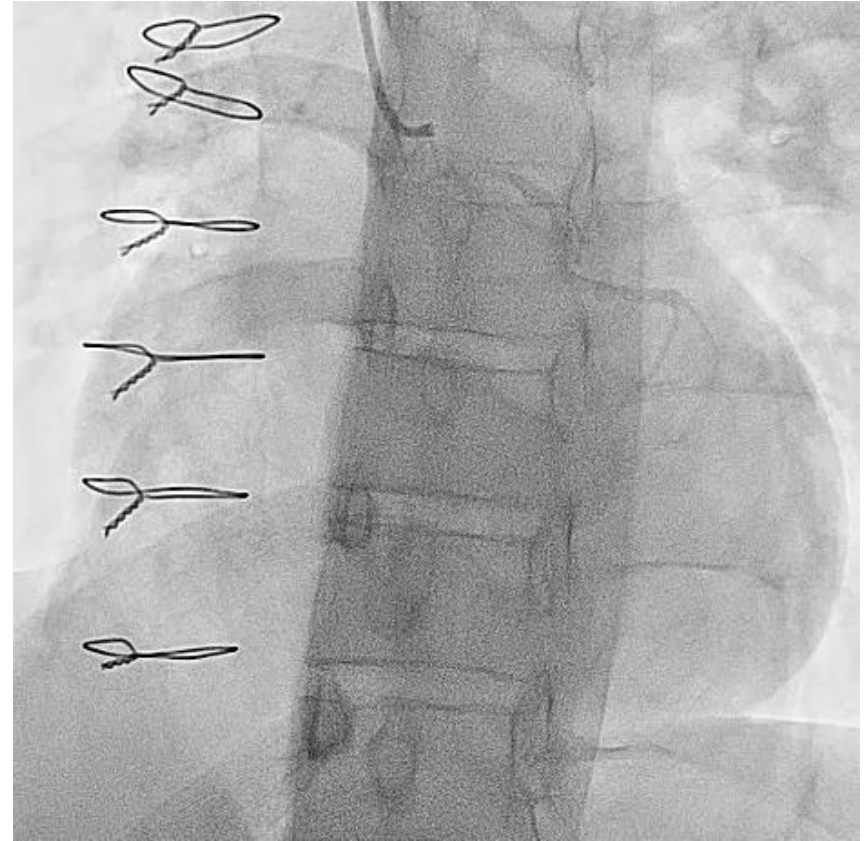
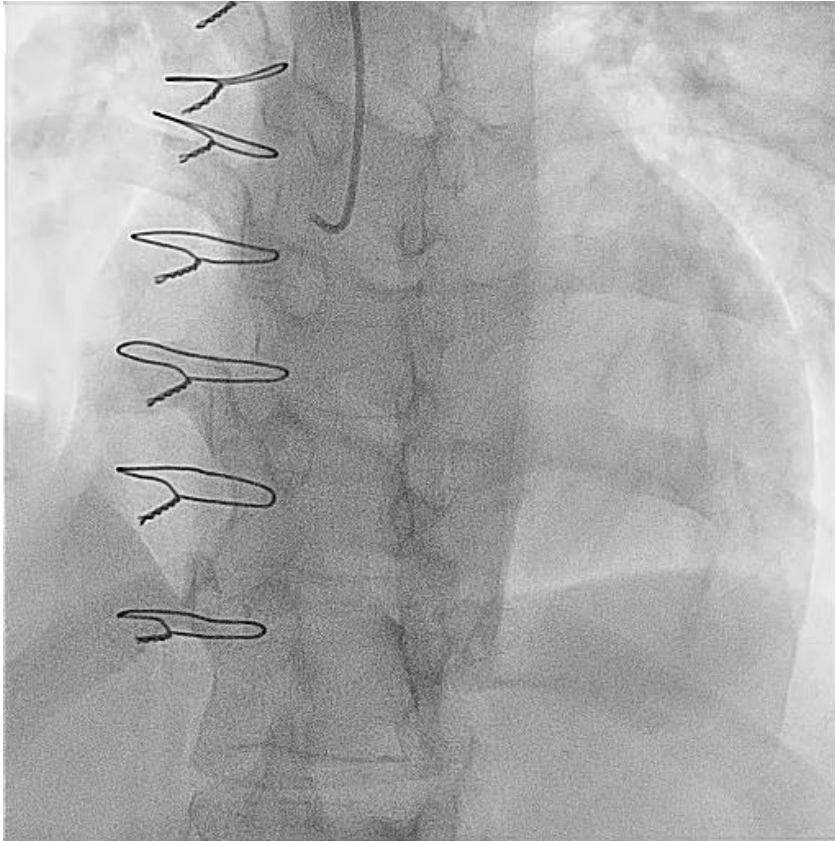
- 33M. No PMHx/ DHx/ FHx
- O/E: NAD
- ECG: NSR
- HsTnT 22-40-31 (<14Ng/L)
- TTE: Mild LV dysfunction / mild anterior hypokinesis
- Cardiac MR: mid-wall GAD
- Gated CT: anomalous origin of left main coronary artery from pulmonary artery (ALCAPA)



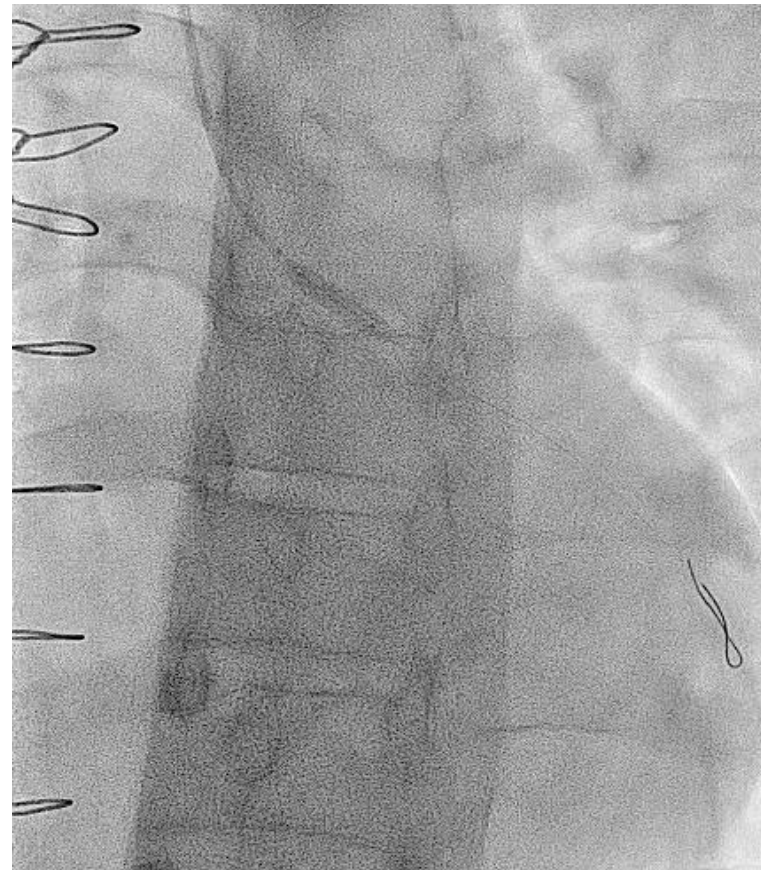
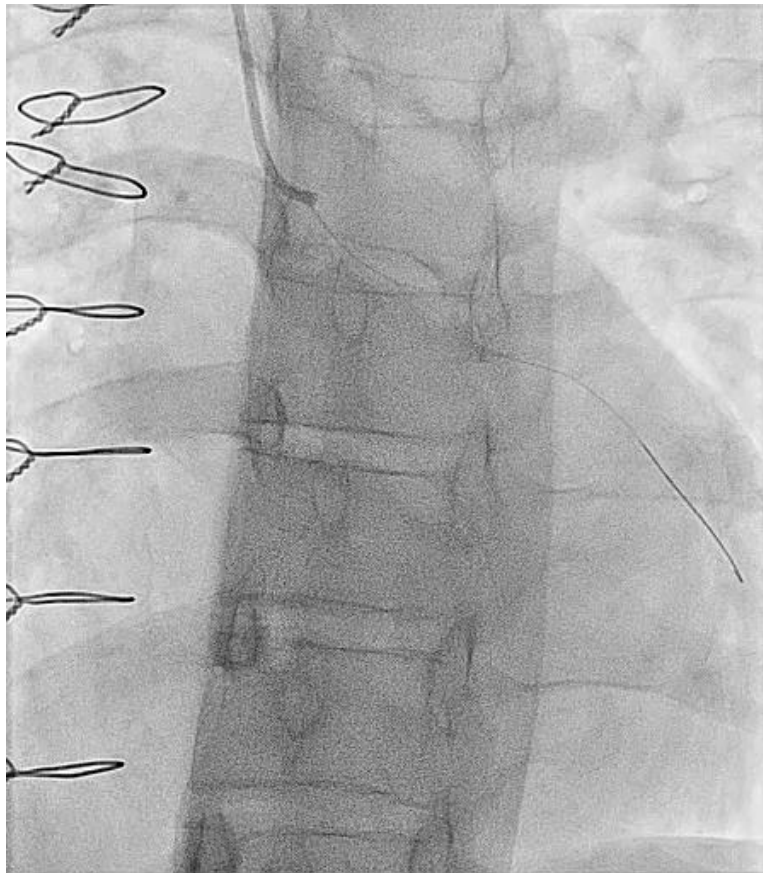


- Following MDT, patient underwent successful surgical re-implantation of LMCA to lateral border of aorta
- But...
Subsequent Coronary CT could not identify patent flow in the graft

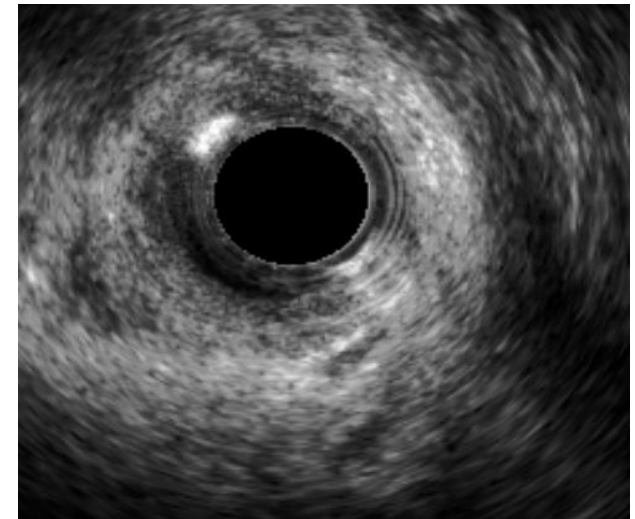
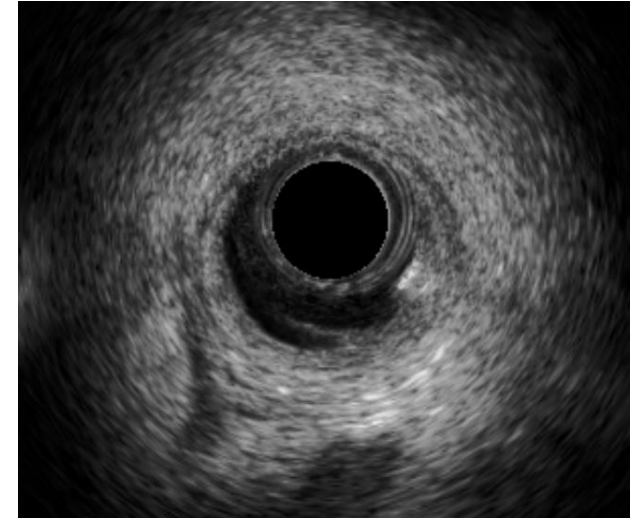
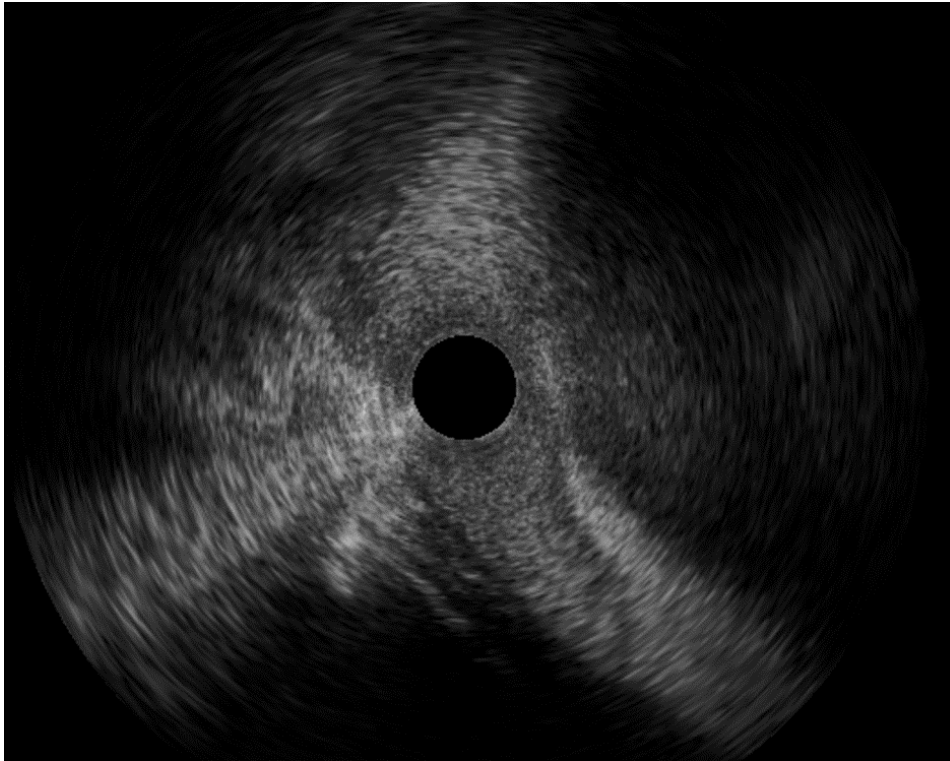
Post-operative Angiogram



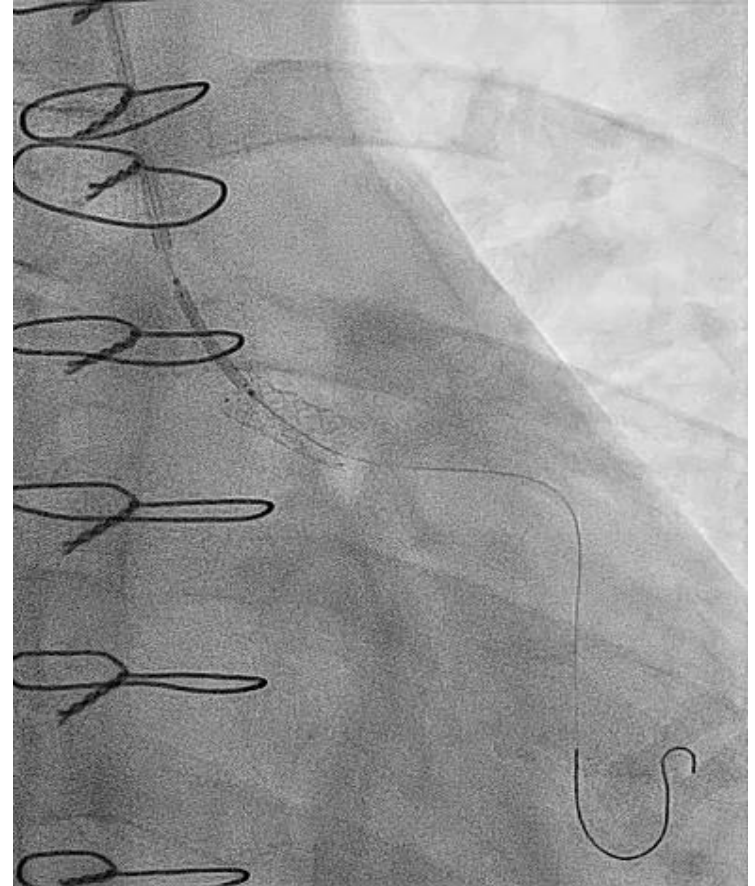
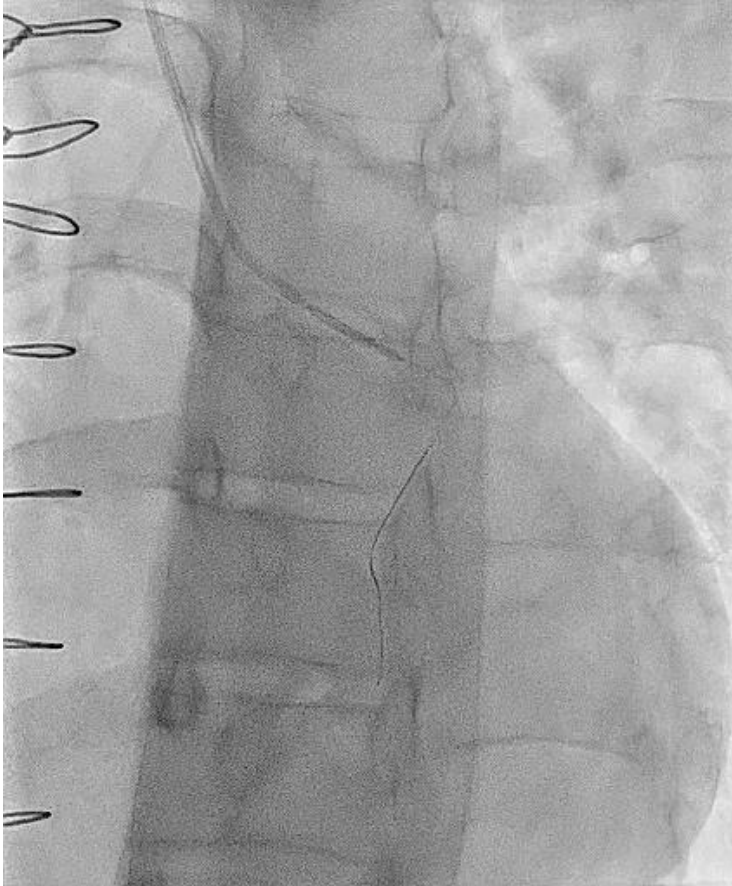
Surgeon asks us to go ahead and treat



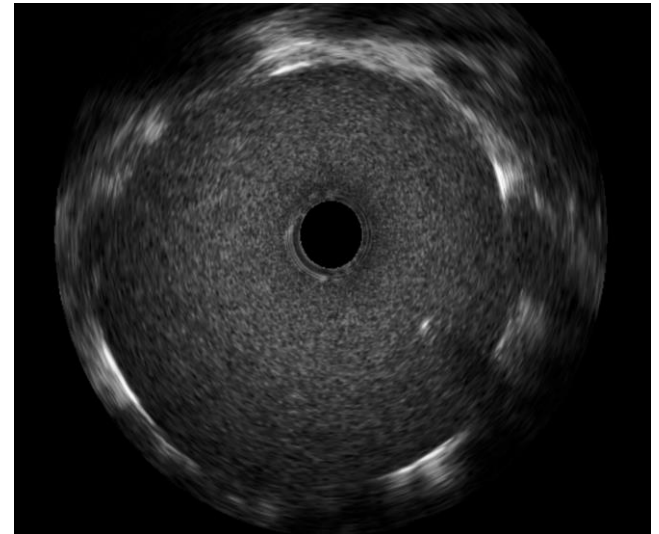
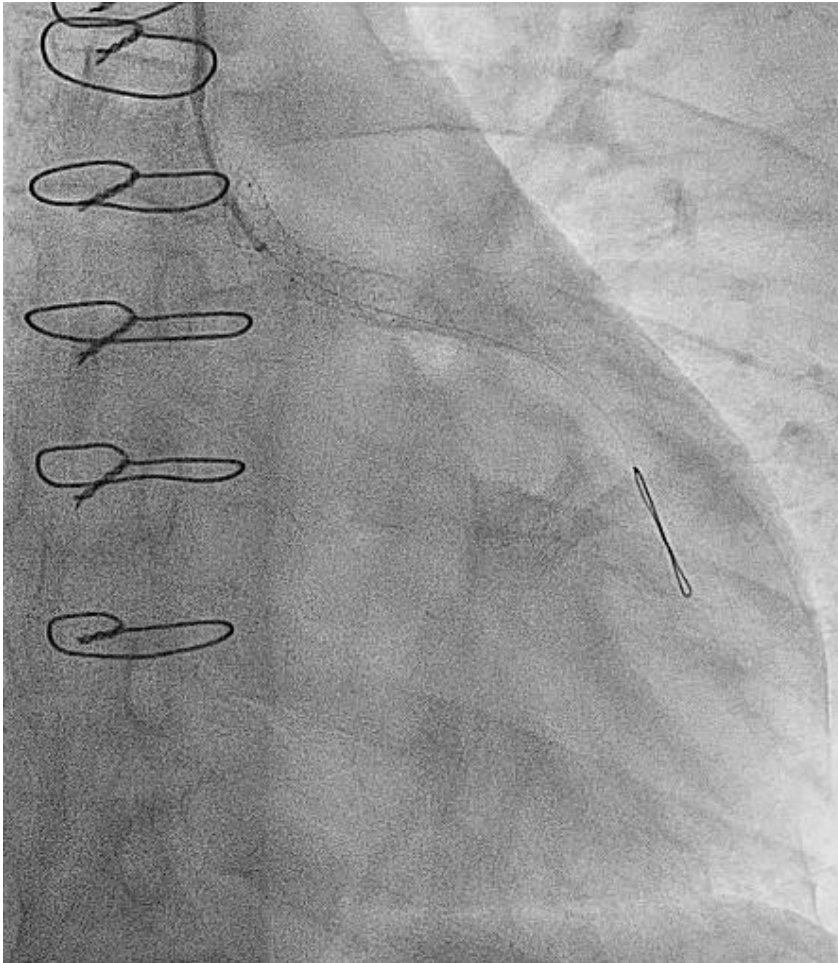
Occlusive haematoma causing occlusion of re-implanted left main coronary artery



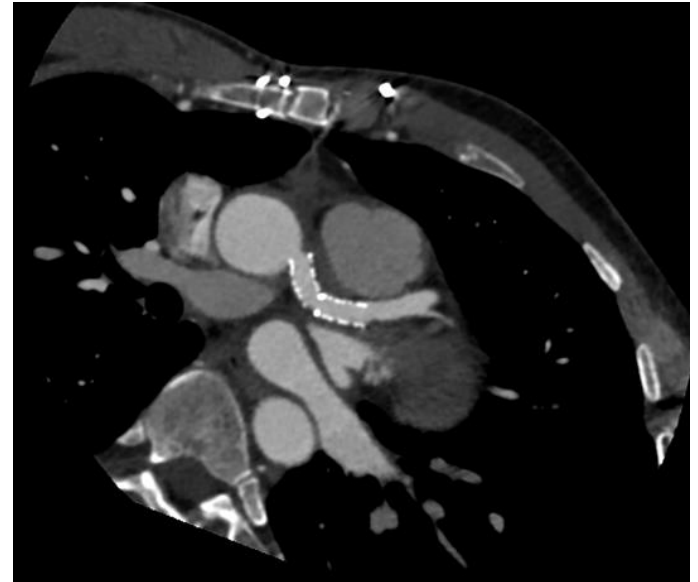
Two 7x17mm Renal BMS deployed



...And a beautiful result



- DAPT – ? lifelong
- ICD / Rehab
- No further arrhythmia
- Exercise tolerance test
- Gated CT



- *Merit in the procedure?*
- *Importance of intracoronary imaging*
- *Understand all the tools available to you*
- *And when adequate equipment isn't on the shelf.. Ask your friendly neighbors*