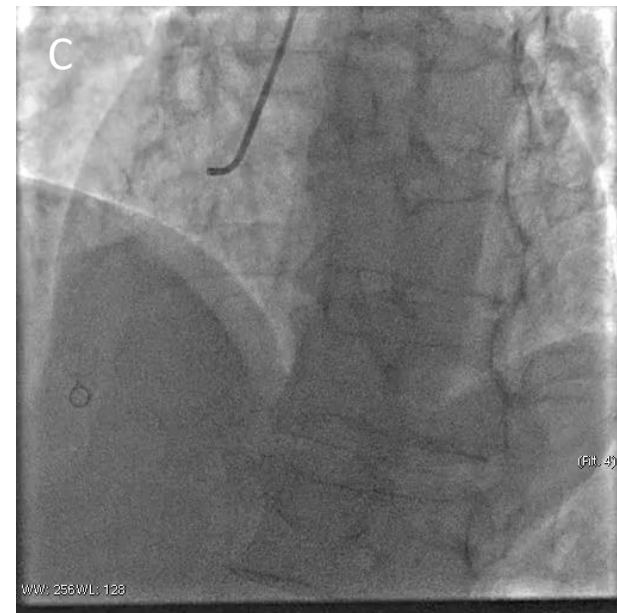
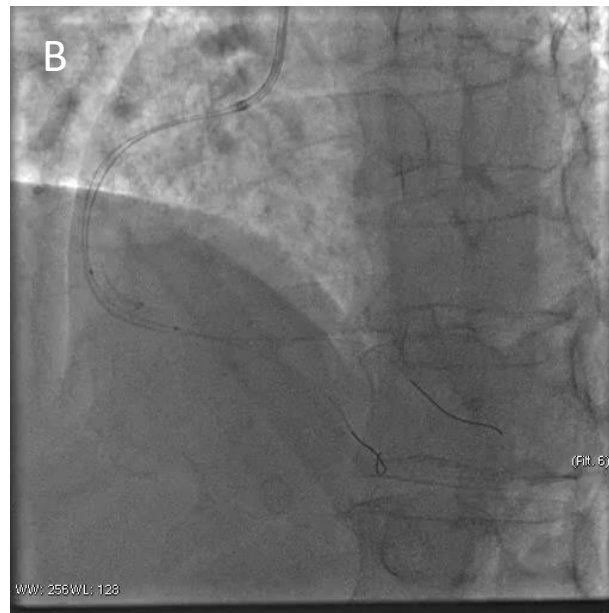
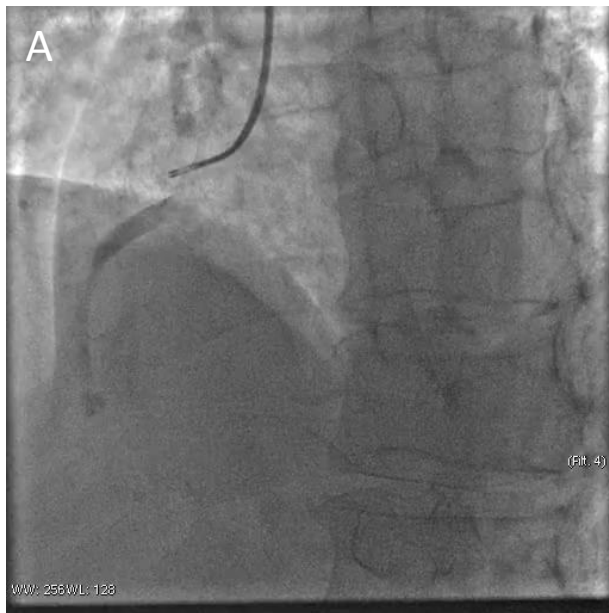




Management of pseudoaneurysm after complex PCI in SCAD

Clinical presentation and index PCI

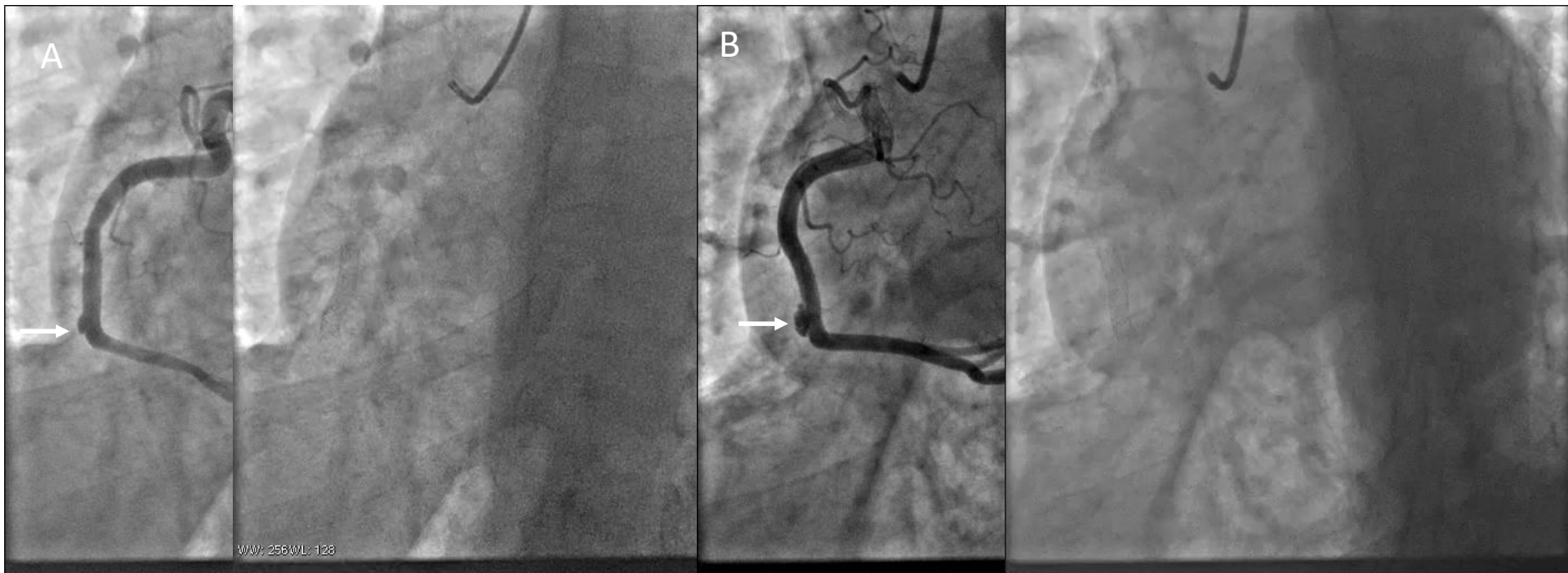
- 55 years old male, carpenter. Hypertension.
- 20 Aug 2019, 30 minutes after an intense isometric effort, prolonged chest pain
- ECG: infero-postero-lateral STEMI. Urgent Coronary angiography



A: Huge RCA dissected at mid-distal portion. Minimum distal flow. Ongoing chest pain and persistent ST elevation in inferior leads.

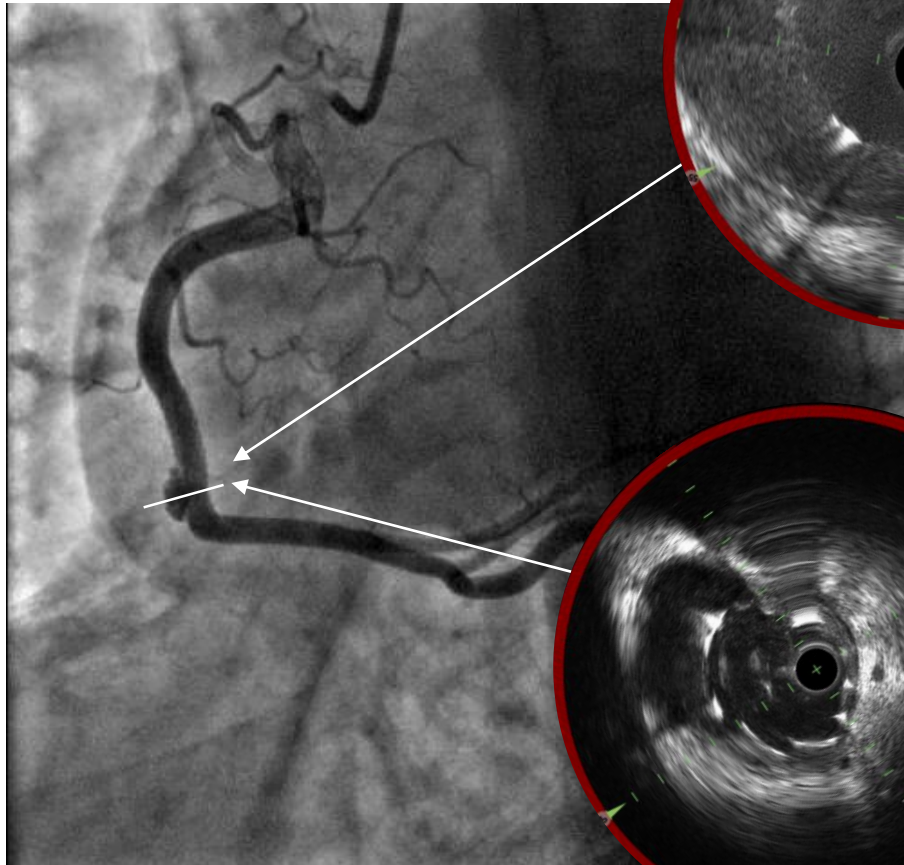
B: Single stent deployment (4.5 x 26 mm ZES eluting stent, arrow) at dissection entry point, and distal ballooning.

C: Final result



- A: Pre-discharge angiography, showing an extravasation (arrow) indicating a pseudoaneurism, at the level of SCAD entry point treated with DES.
- B: Elective 5 months angiography control, showing increased dimension of extravasation image.

IVUS-NIRS findings



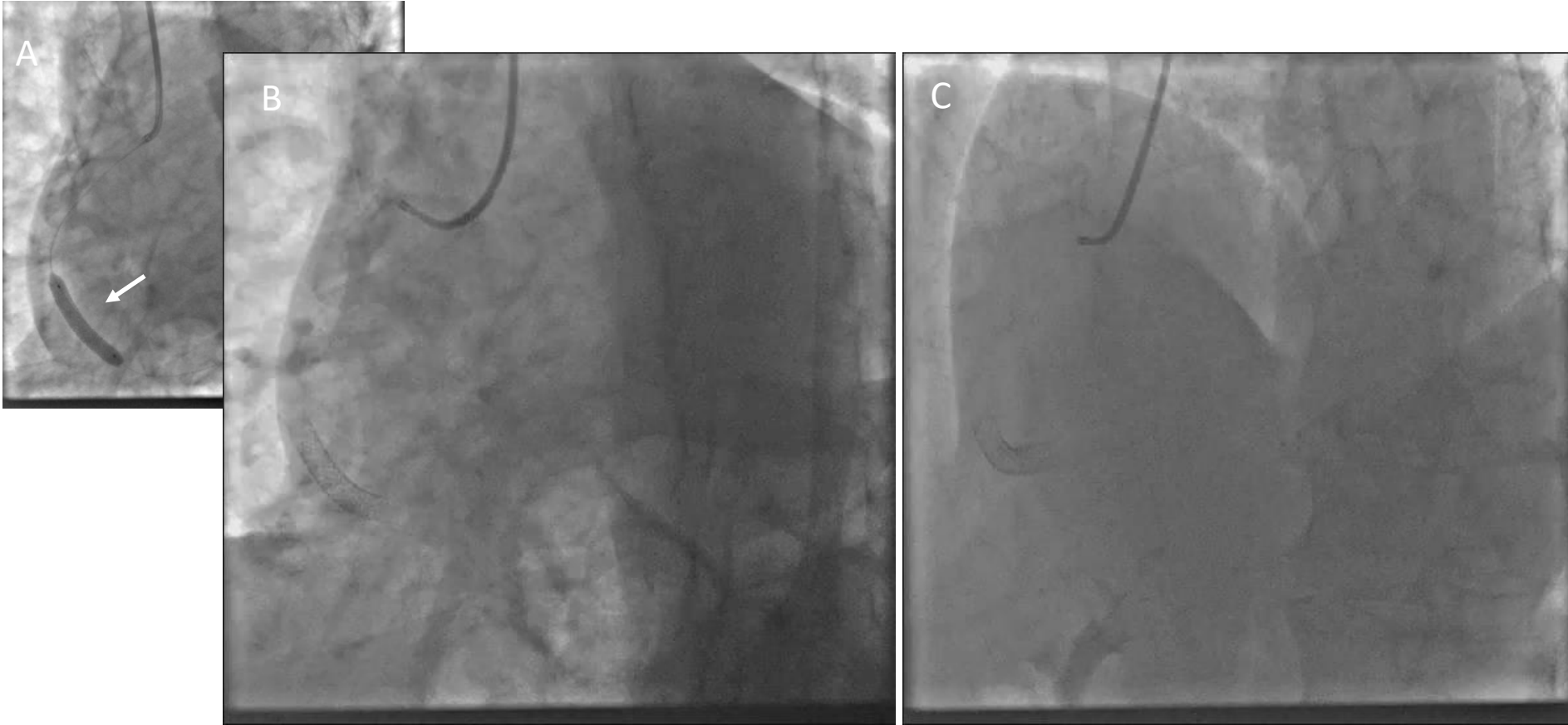
A. Automatic pullback showing huge pseudoaneurysm

B. Contrast medium injection during manual pullback

Red circles around IVUS frames show absence of lipid components within the vessel wall

- Wait and repeat angiography and IVUS few months later
- Fix the pseudoaneurism with coils deployment trough stent struts
- Cover the lesion with a covered stent

COVERD stent implantation



A: Papirus covered stent 5.0 x 26 mm implantation (arrow). Postdilatation with NC balloon
B-C: final angiographic result with complete sealing of the pseudoaneurism.

Six months follow-up



The patient was uneventful, with normal activity. No chest pain nor dyspnea

A, B: complete sealing of the pseudoaneurism, without any extravasation. Minimal intimal hyperplasia.

C. IVUS-NIRS scan at the covered stent level confirming the pseudoaneurism sealing.

- Coronary artery pseudoaneurysm may be a complication of SCAD even if the dissection entry point is treated with stenting.
- Excluding localized dilations of the vessel walls with covered stents, in large vessels, can be an effective and safe technique with optimal mid-term results and may prevent further expansion/rupture of the aneurism