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IMAGES IN CARDIOLOGY

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Sign of the times

A 53-year-old man presented with angina of effort in December 2001. The intermediate artery (INT) was stented with a 2.75×15 mm long Penta stent, the diagonal artery (DG1) with a 2.5×15 mm long Carbestent, and the occluded obtuse marginal branch of the circumflex (OMCX) with a 2.75×18 mm long Penta stent. Two months later, the distal circumflex bifurcation lesion was stented with a 2.5×18 mm long Pixel and a 2.0×18 mm long Pixel stent in T-stenting fashion (LCX-BF). In November 2002, the right coronary artery (RCA) was treated with a series of three overlapping stents: a 3.5×33 mm long Zeta proximally, a 3.5×33 mm long Zeta in the mid-third, and a 3.5×18 mm long Zeta more distally. In October 2004, a 2.75×28 mm Cypher Select stent was placed to a severe stenosis in the mid-third of the OMCX and in June 2005 after an

intracoronary ultrasound study, a 3.0×23 mm Cypher Select was placed in the proximal left anterior descending artery (LAD). Panels A and B show the 10 implanted stents in the left lateral and right anterior oblique projections respectively.

Occurrence of so many lesions in this man was almost certainly related to his hypercholesterolaemia and his intolerance of all lipid lowering agents because of myalgia and myositis. It is unusual to see so many stents in multiple coronary arteries and their branches in a single individual, but for interventionists it is perhaps a “sign of the times”.

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