

Le DK Crush sans chinoiserie

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L'INSTITUT
MUTUALISTE
MONTSOURIS

Disclosure

- ▶ Honorarium,
- ▶ IVUS and OCT education
 - Boston scientific
 - St jude medical

▶ Chinoiserie:

- **1.** Objet de luxe et de fantaisie, venu de Chine ou exécuté en Occident dans un goût s'inspirant de la Chine ; décor, œuvre d'art, motif de ce style.
- **2. Familier.** Subtilité excessive aboutissant souvent à des complications tracassières

陈

Chen

Les avis sur le DK Crush

C'est n'importe quoi!

Les stents sont pas fait pour être écrasés!

Tu te rends compte il y a 3 couches de stents

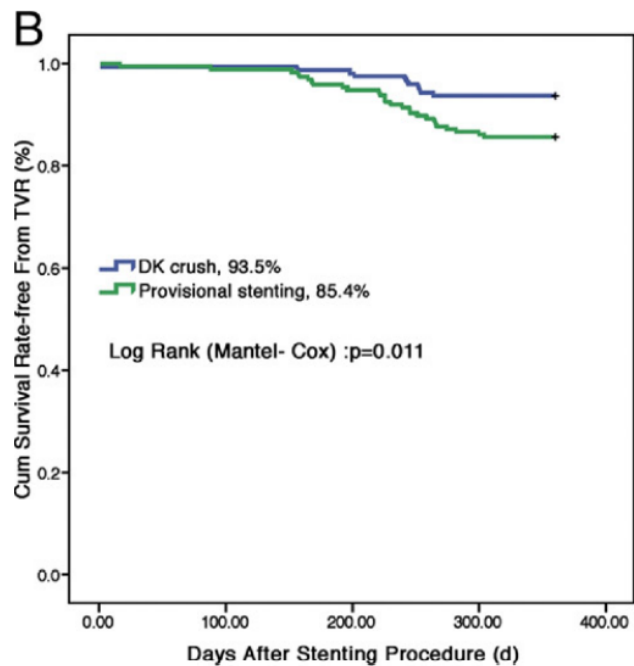
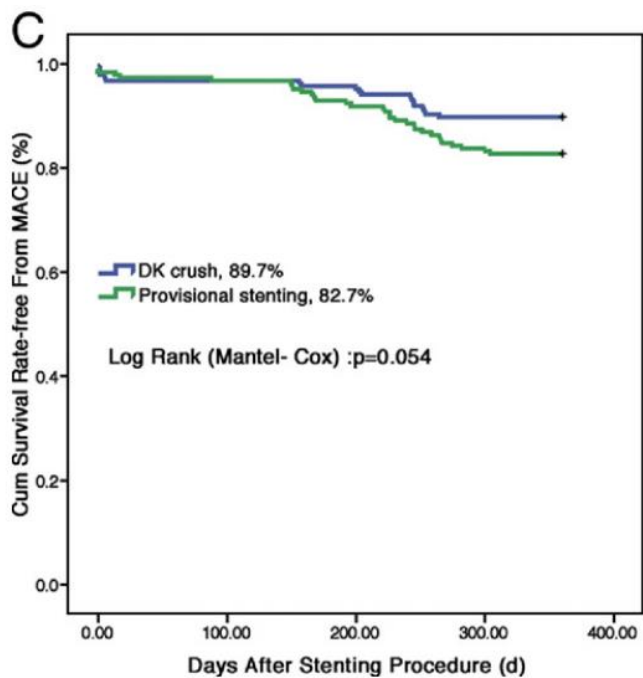
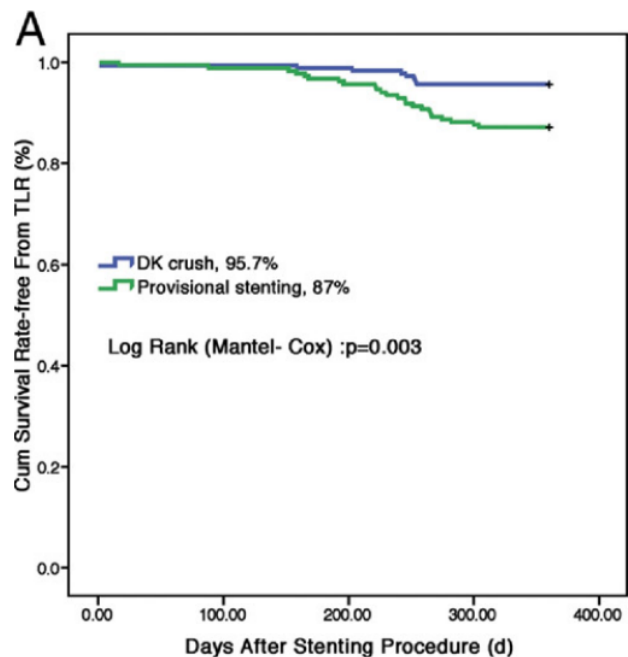
DK 2 C'était une étude monocentrique!

DK 3 Comparé à la culotte que personne ne fait

DK 5 C'était une étude multicentrique randomisée
mais L'étude est biaisée, les opérateurs ne savaient
pas faire le provisional stenting dans le bras
contrôle!

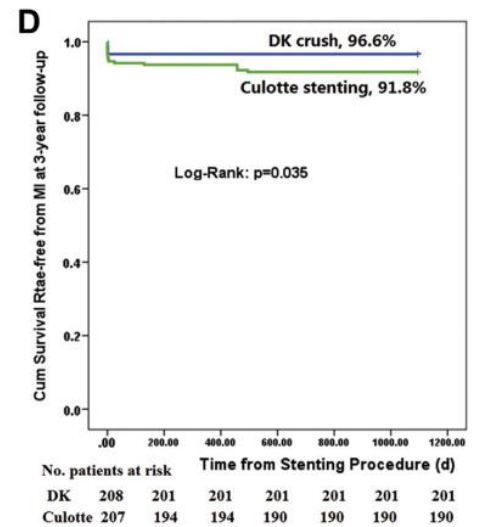
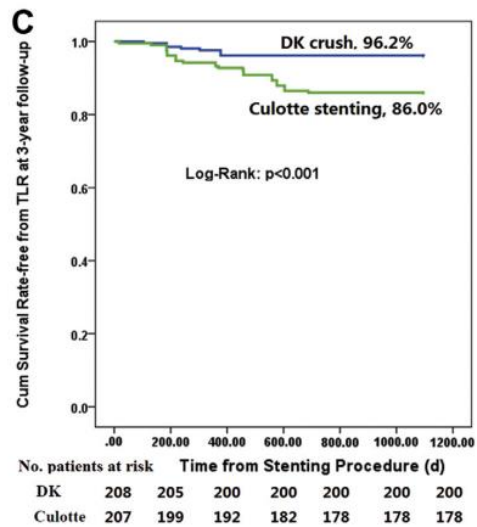
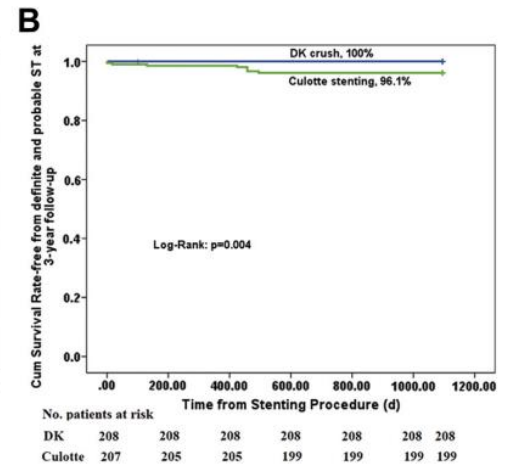
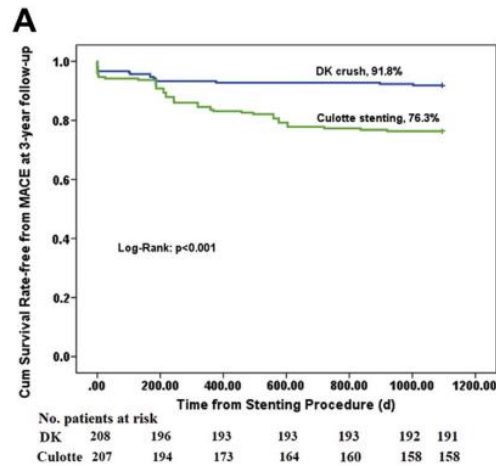
DK Crush 2

2X180 pts
Bifurcations
Rdm 7 centres
asiatiques
Vs provisionnal



DK Crush 3:

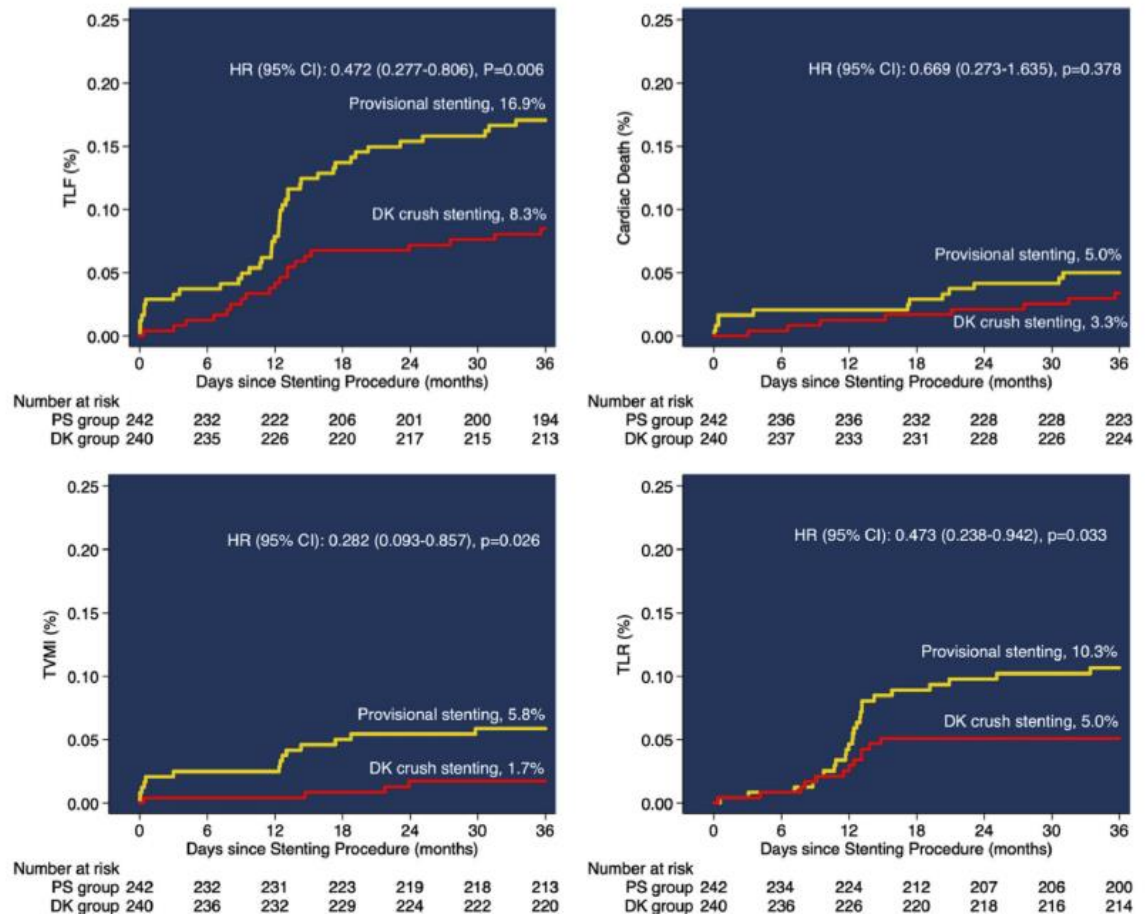
2X 200 pts
Rdm
Stenose distale du tronc
Vs Culotte



DK Crush 5

- ▶ 2X240 pts
- ▶ Rdm
- ▶ Multicentrique
- ▶ Stenose TC distal
- ▶ Vs provisionnal
- ▶ Suivi 3 ans

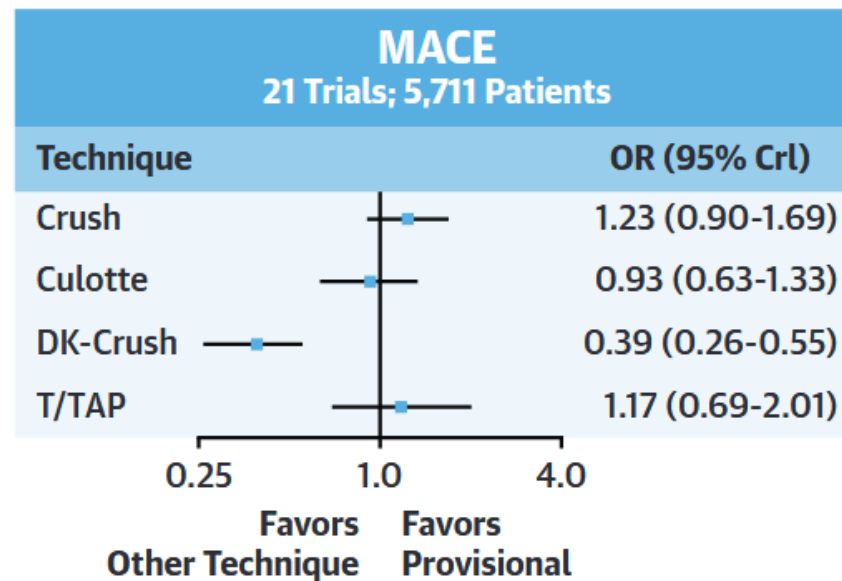
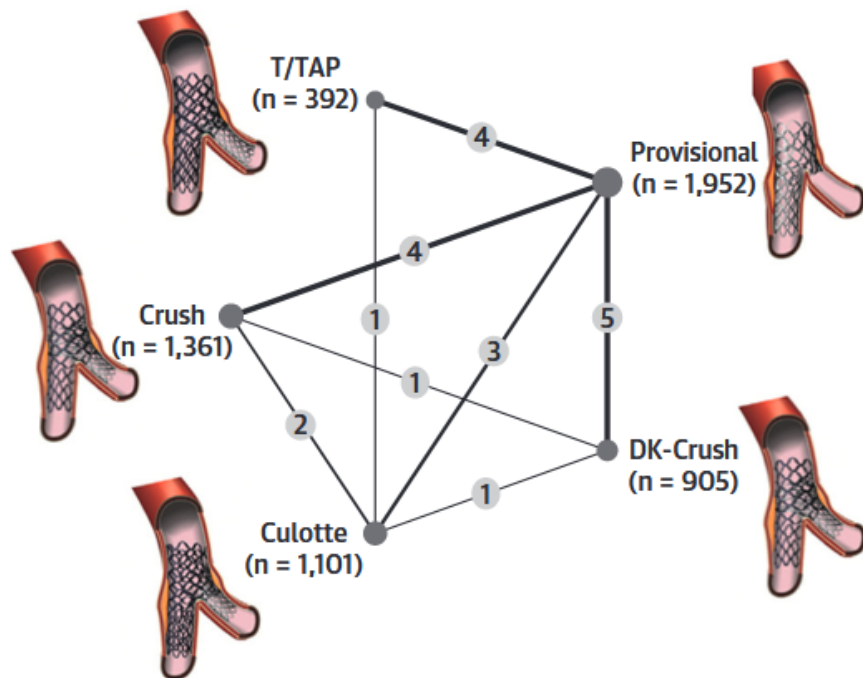
FIGURE 2 Survival Rate Free From Clinical Events at 3-Year Follow-Up



PS was associated with significant increase of target lesion failure (TLF), target vessel myocardial infarction (TVMI), and target lesion revascularization (TLR) compared with the DK crush stent. There was no statistical difference in cardiac death. CI = confidence interval; HR = hazard ratio; other abbreviations as in Figure 2.

Meta analyse

CENTRAL ILLUSTRATION Network Plot and Forest Plot for the Primary Outcome of Interest



Di Gioia, G. et al. *J Am Coll Cardiol Interv.* 2020;13(12):1432-44.

(Left) Network plot. The widths of **connecting lines** between different treatment nodes reflect the number of studies available for each comparison. The size of each **circle** reflects the number of patients randomized to each treatment node. (Right) Forest plot and relative treatment effects for the primary outcome of interest. Treatment effects are reported as odds ratios (ORs) with 95% credibility intervals (CrIs) compared with the provisional strategy, used as a reference. An OR >1 favors the provisional strategy, while an OR <1 favors the other technique. DK-crush = double-kissing crush; MACE = major adverse cardiovascular events; T/TAP = T stenting/T and protrusion.

Meta Analyse

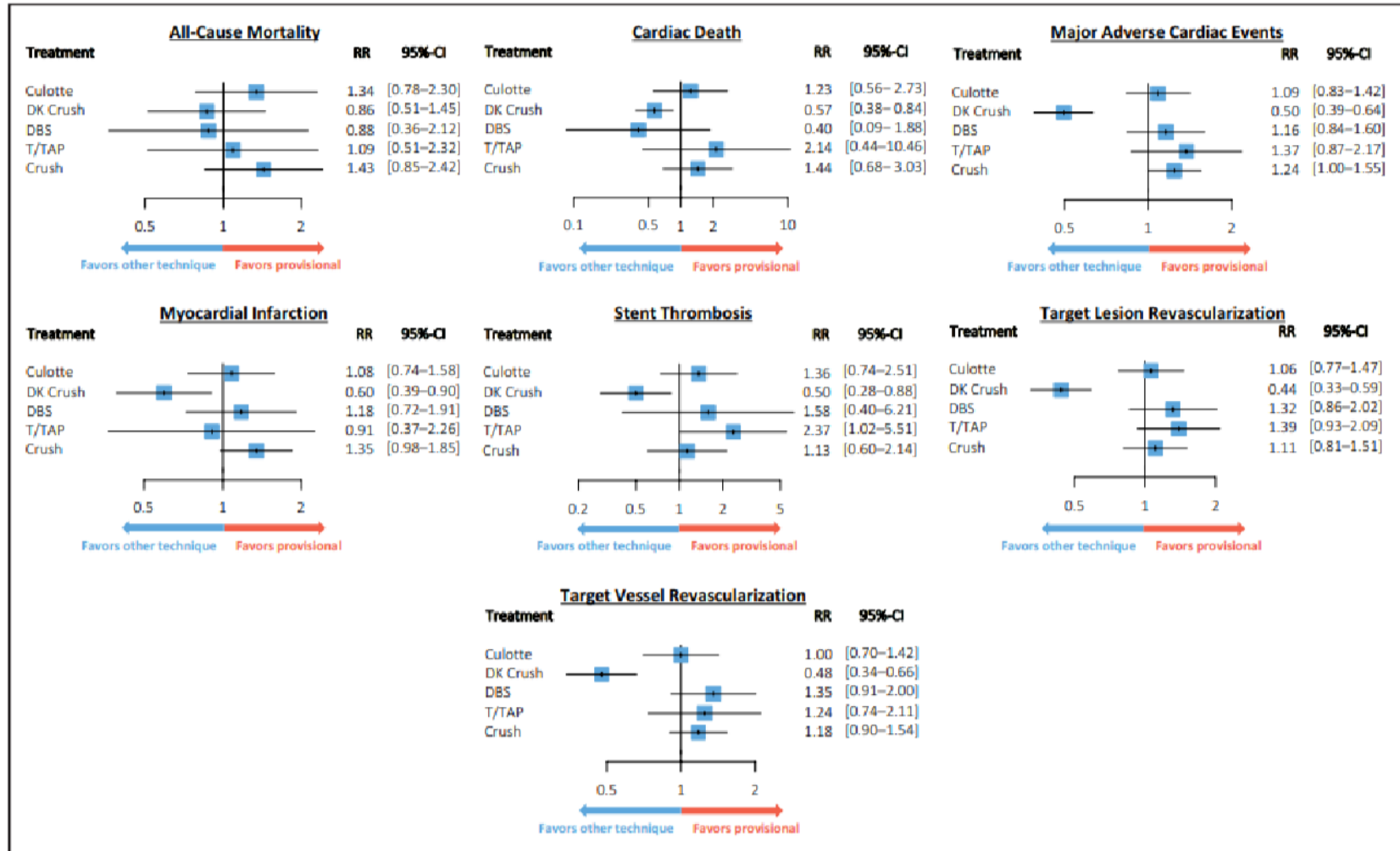


Figure 3. Network meta-analysis of bifurcation techniques with provisional stenting as reference.

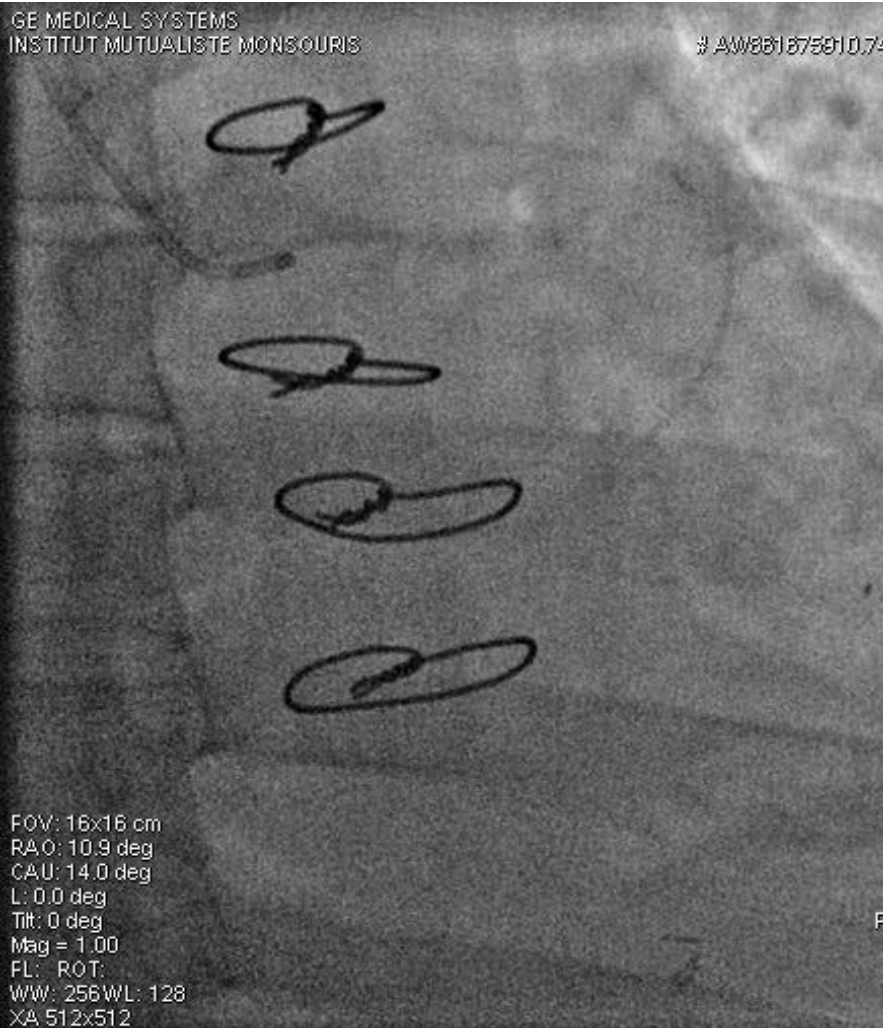
M.L

- ▶ 40 ans
- ▶ Type 2 Diabète, fumeur, Dyslipidémie
- ▶ Inferior STEMI admitted 48H after symptoms
- ▶ Angio: severe 3 vessels disease
- ▶ Referred for bypass:
 - LIMA –diag–LAD
 - RIMA (implanted in LIMA:Y technique) OM1–PDA

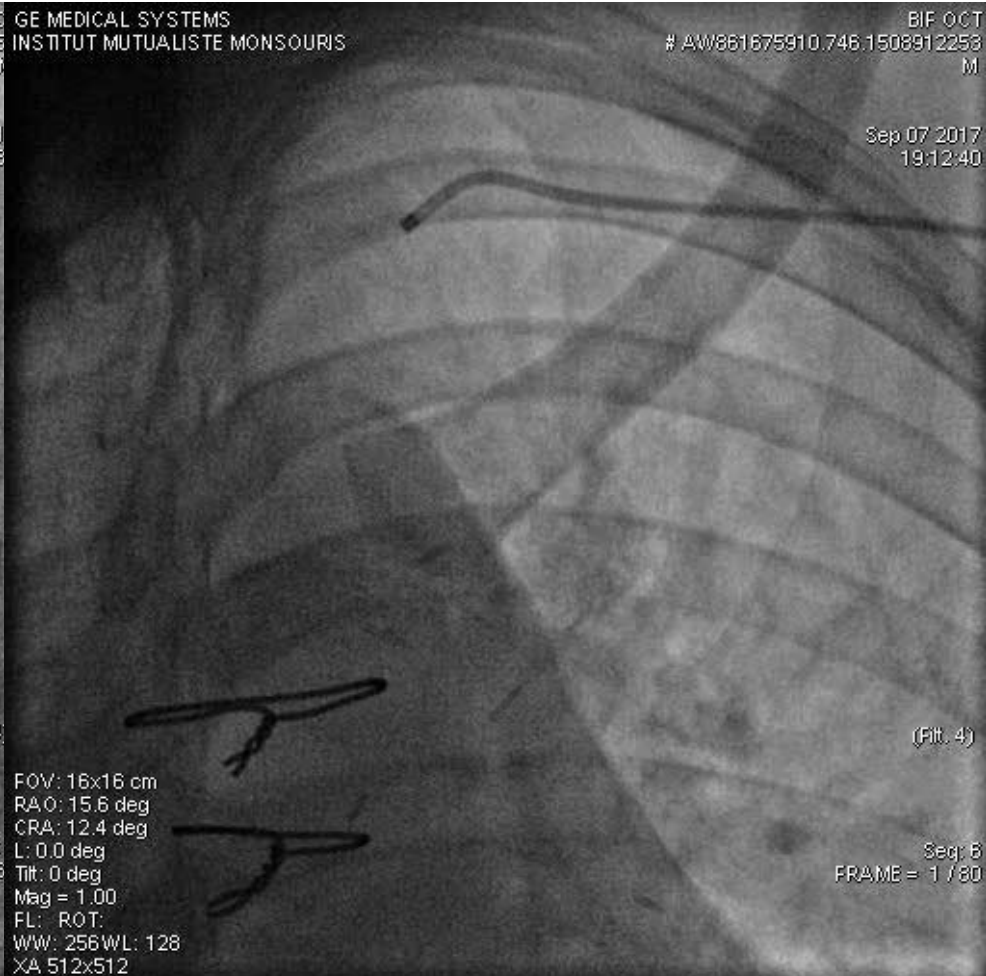
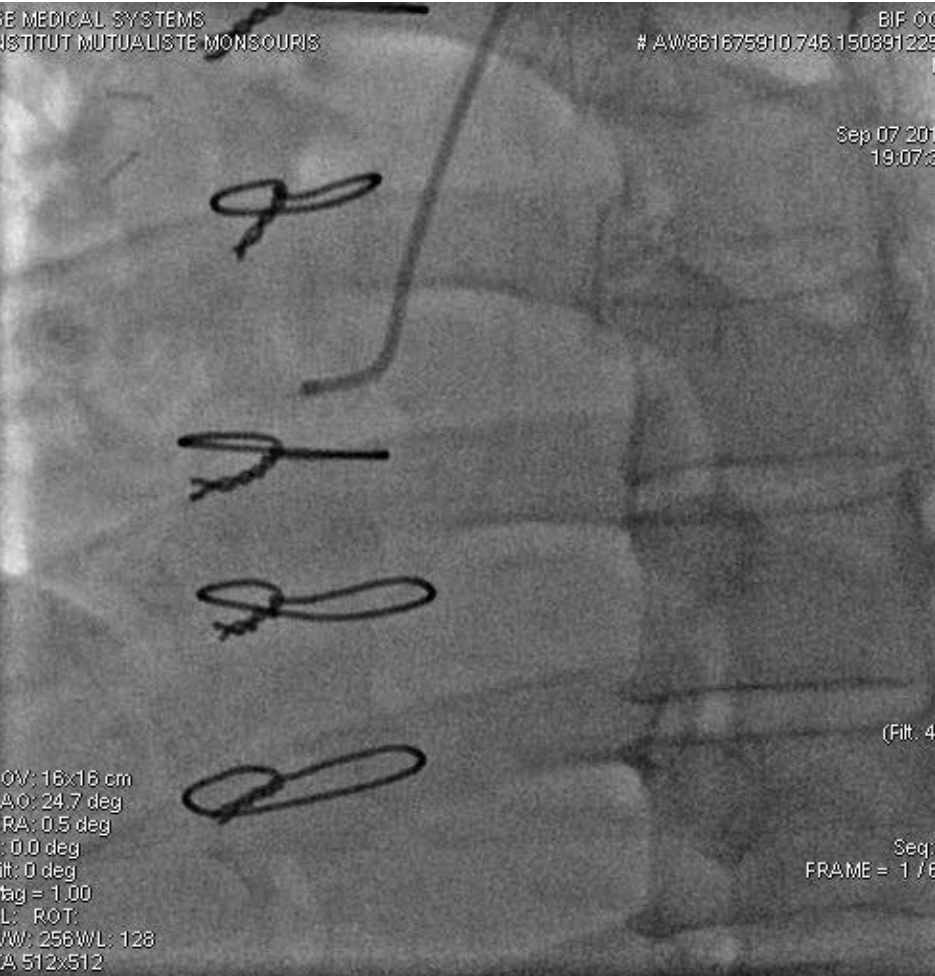
M. L.

- ▶ Day 3 post op
- ▶ Douleur thoracique
- ▶ ECG: ST-T elevation DII-DIII-aVF-V5-V6
- ▶ Regressif après sub lingual nitrates
- ▶ Troponine I: 3ng/ml
- ▶ coro

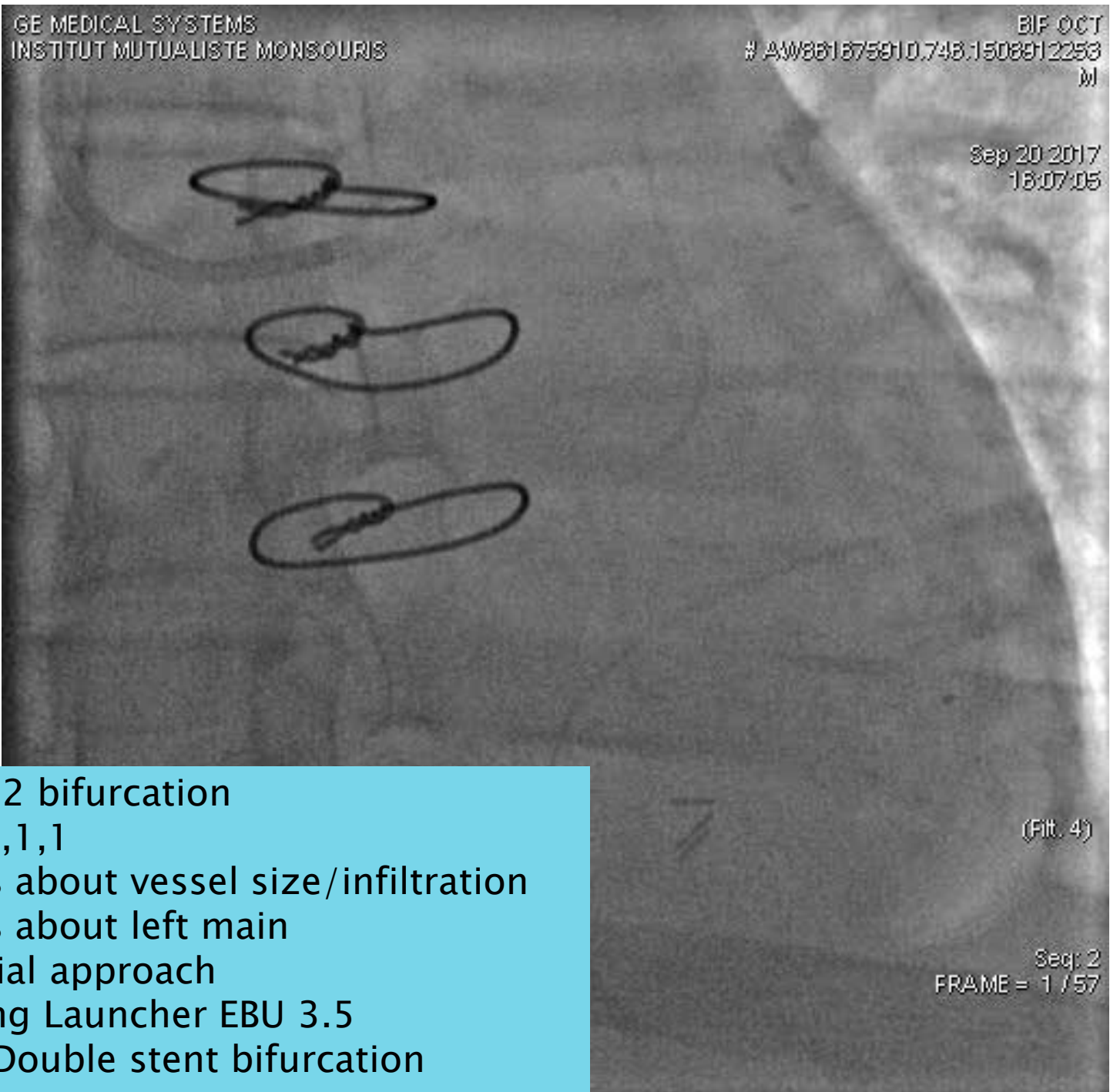
Native Left Coronary Artery



RCA and LIMA. Y ~~RIMA-OM-PDA~~



Sep 20 2017
18:07:05



(Filt. 4)

Seq: 2
FRAME = 1 / 57

OM1-OM2 bifurcation
Medina 1,1,1
Concerns about vessel size/infiltration
Concerns about left main
Transradial approach
6F Guiding Launcher EBU 3.5
Planned Double stent bifurcation



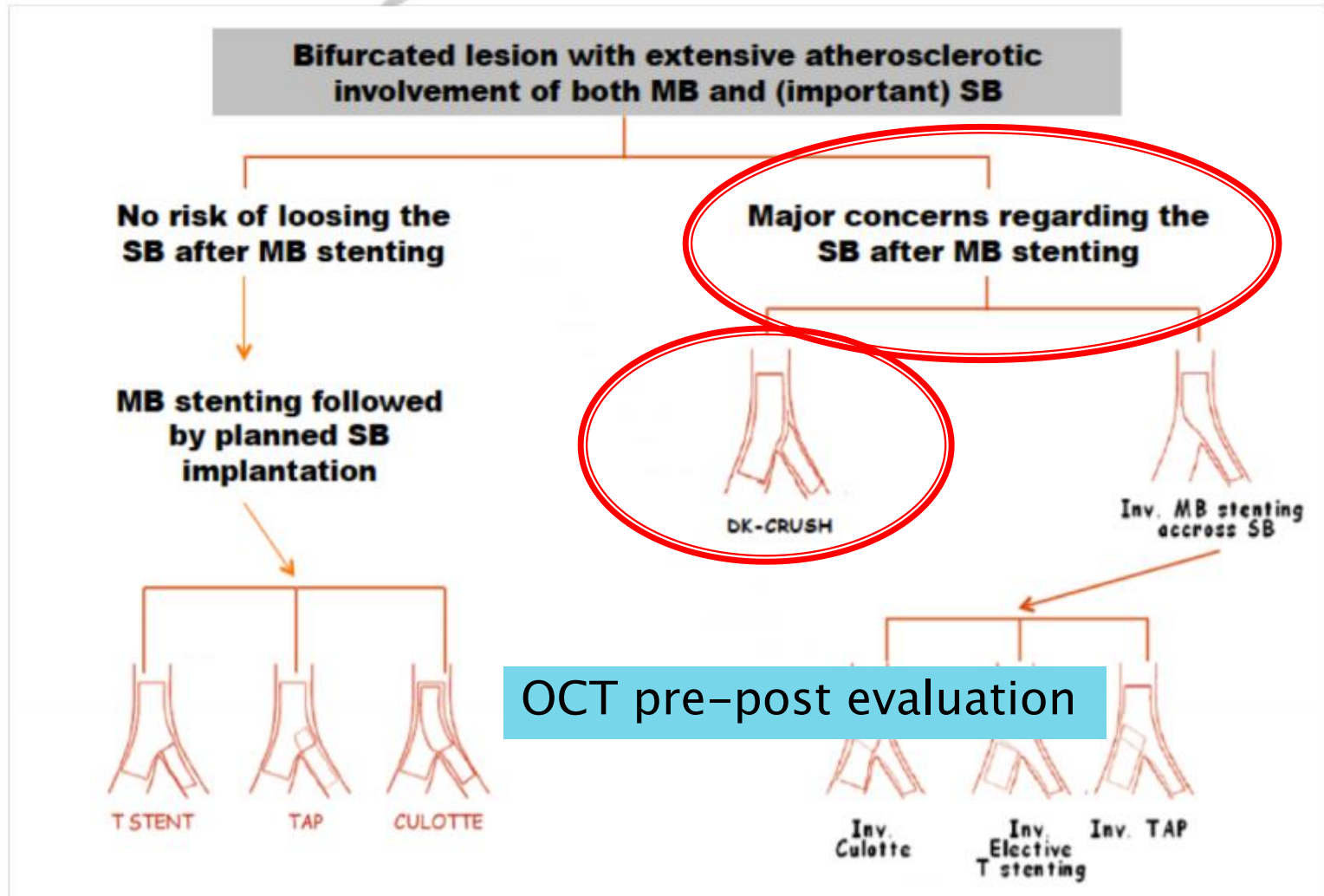
Title: Percutaneous coronary intervention for the Left Main stem and other bifurcation lesions. The 12th consensus document from the European Bifurcation Club.

Authors: Jens Flensted Lassen, M.D, PhD; Francesco Burzotta, M.D; Adrian P Banning, M.D, PhD; Thierry Lefèvre, M.D; Olivier Daremont, M.D; David Hildick-Smith, M.D; Alaide Chieffo, M.D; Manuel Pan, Niels Ramsing Holm, M.D; Yves Louvard, M.D; Goran Stankovic, M.D, PhD

DOI: 10.4244/EIJ-D-17-00622

vention

Technical options for elective double stent implantation.



Les étapes du DK Crush

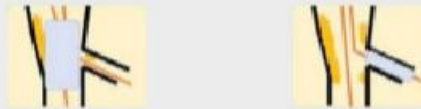
Assess bifurcation lesion



1. Wire MV and SB



2. Balloon MV and SB



3. SB stenting with protrusion
MV balloon in position for crush



4. Balloon crush of SB stent



5. Re-wiring of SB through proximal strut



6. First kissing balloon inflation



7. MV stent deployment



8. POT



9. Re-wiring of SB



10. Final kissing balloon inflation



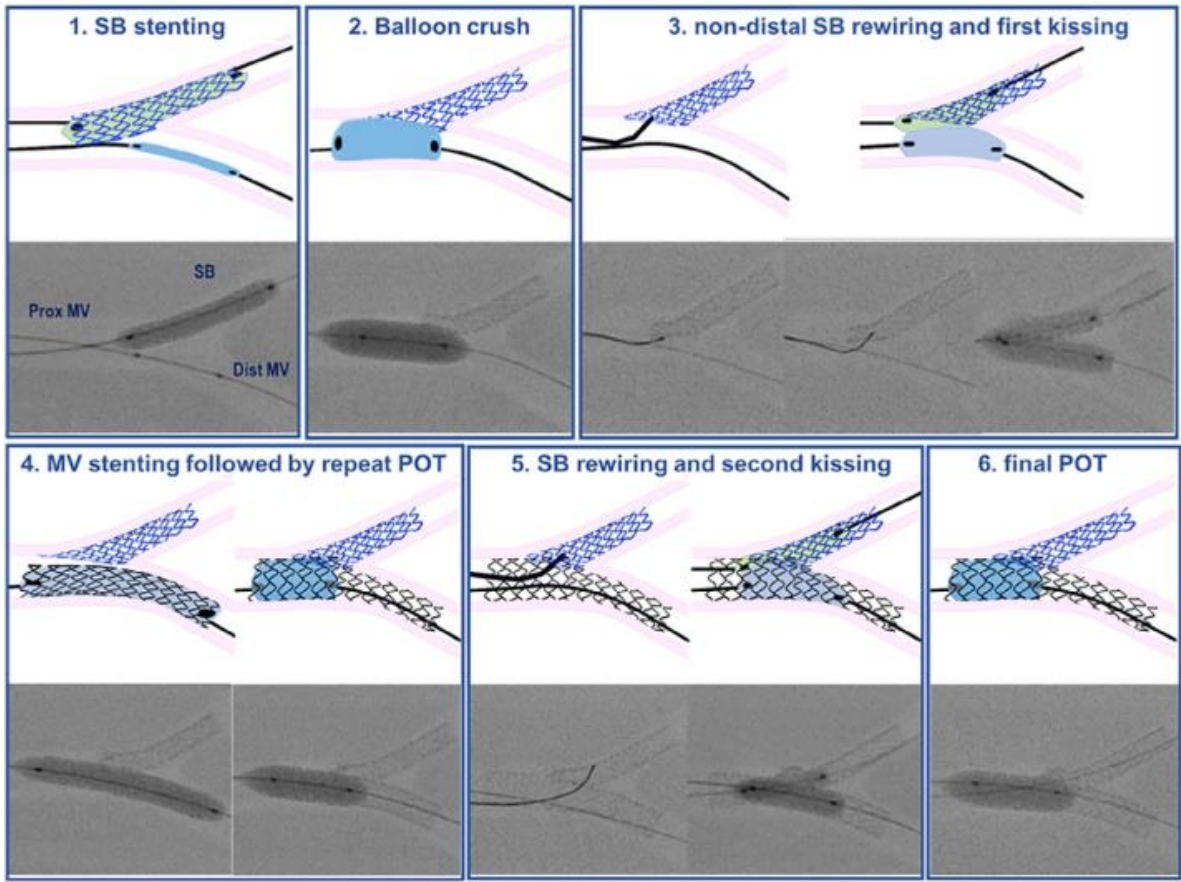
11. Re-POT



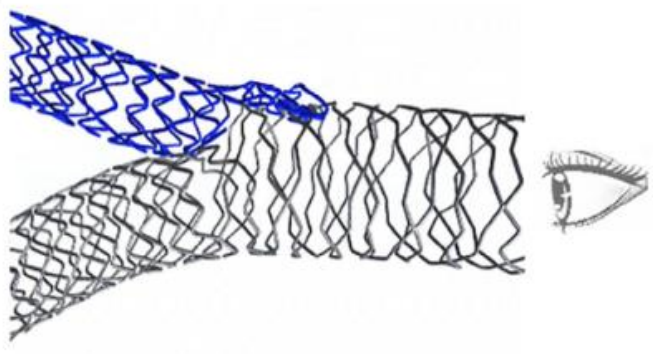
Final result



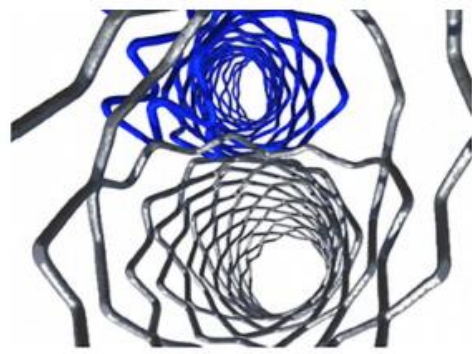
(a)

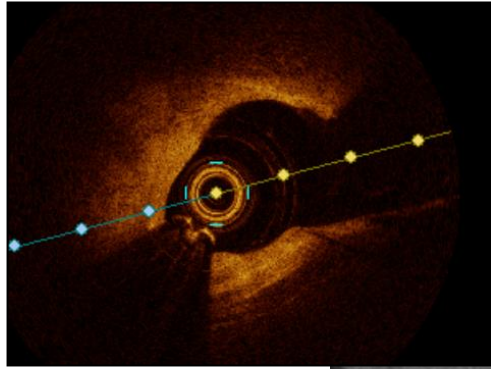


(b)

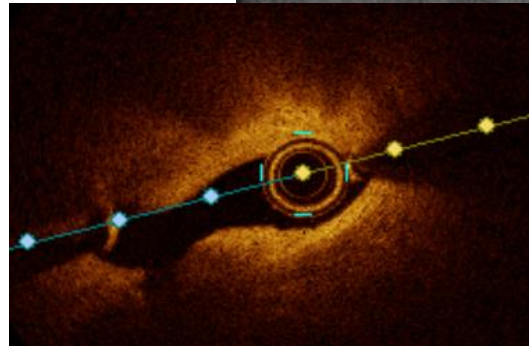
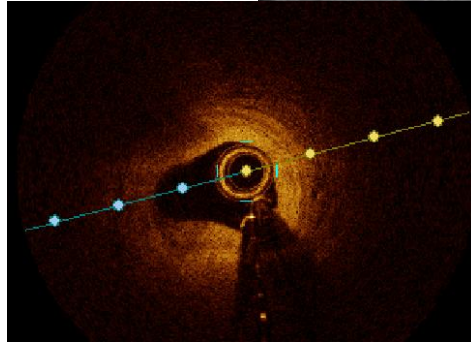
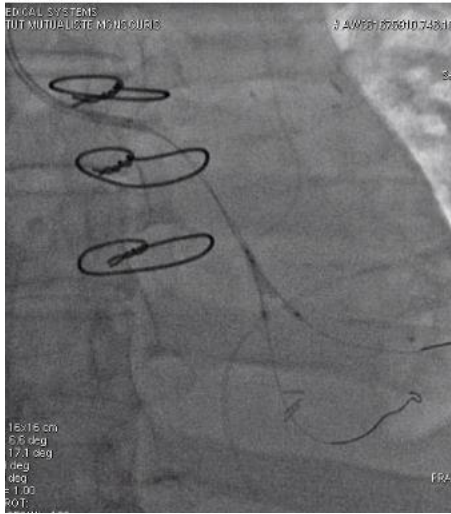
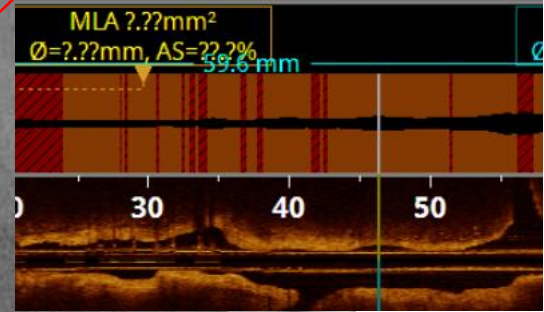
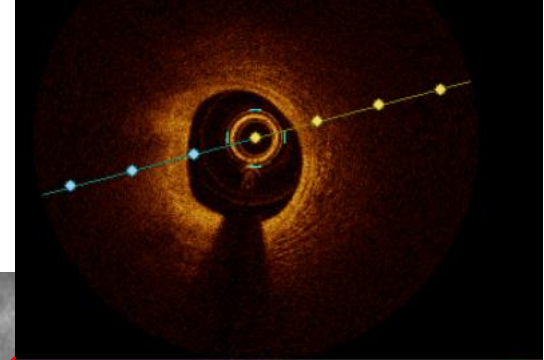


(c)



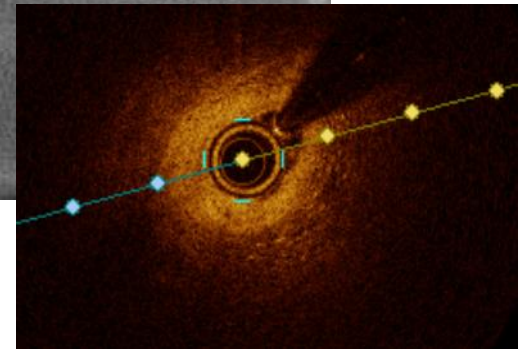


SYSTEMS
LISTE MONSIEUR



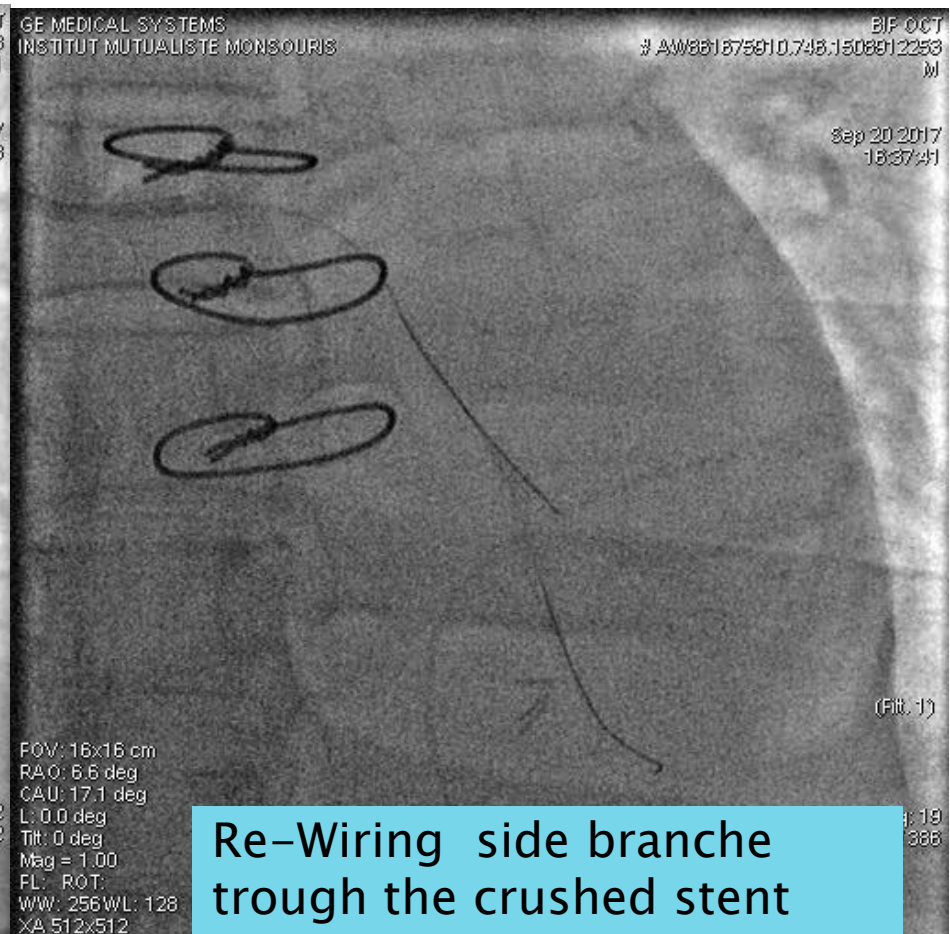
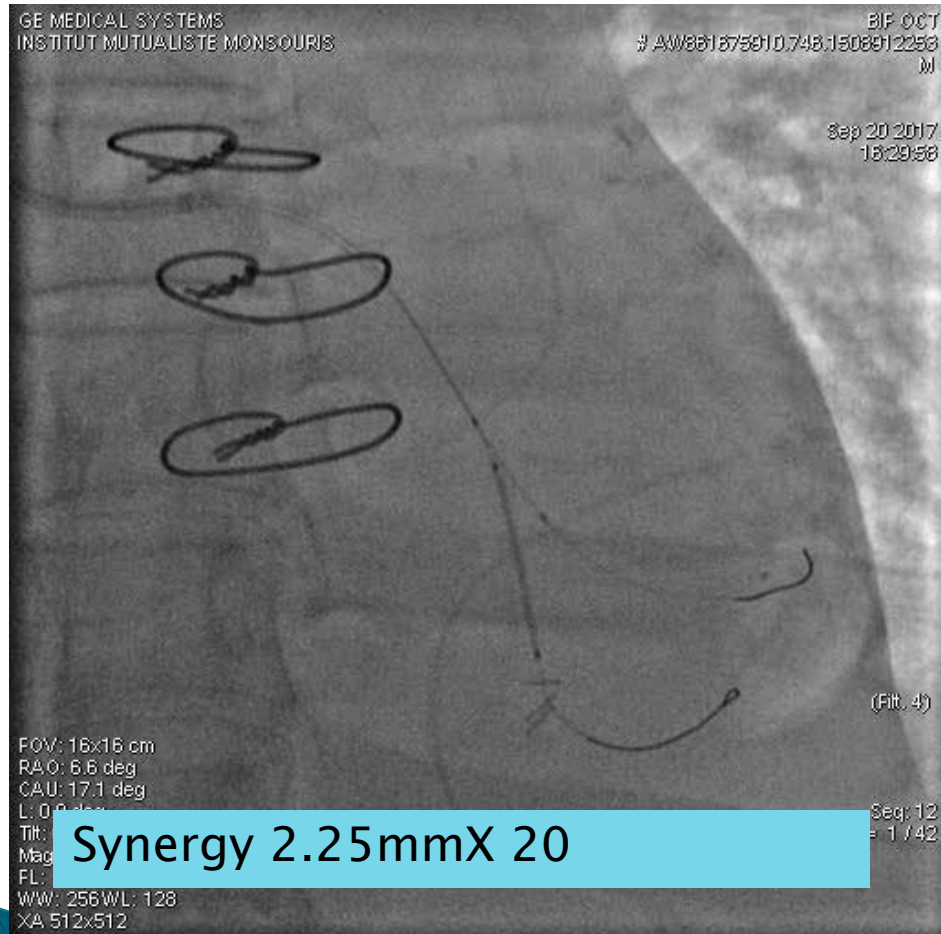
www.zoo.wl.120
XA 512x512

(Fig. 4)

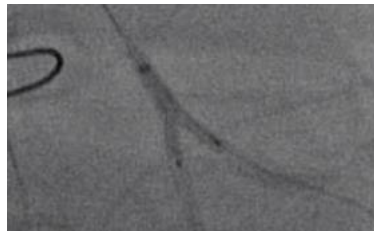


Kissing balloon
Emerge 2.0mm

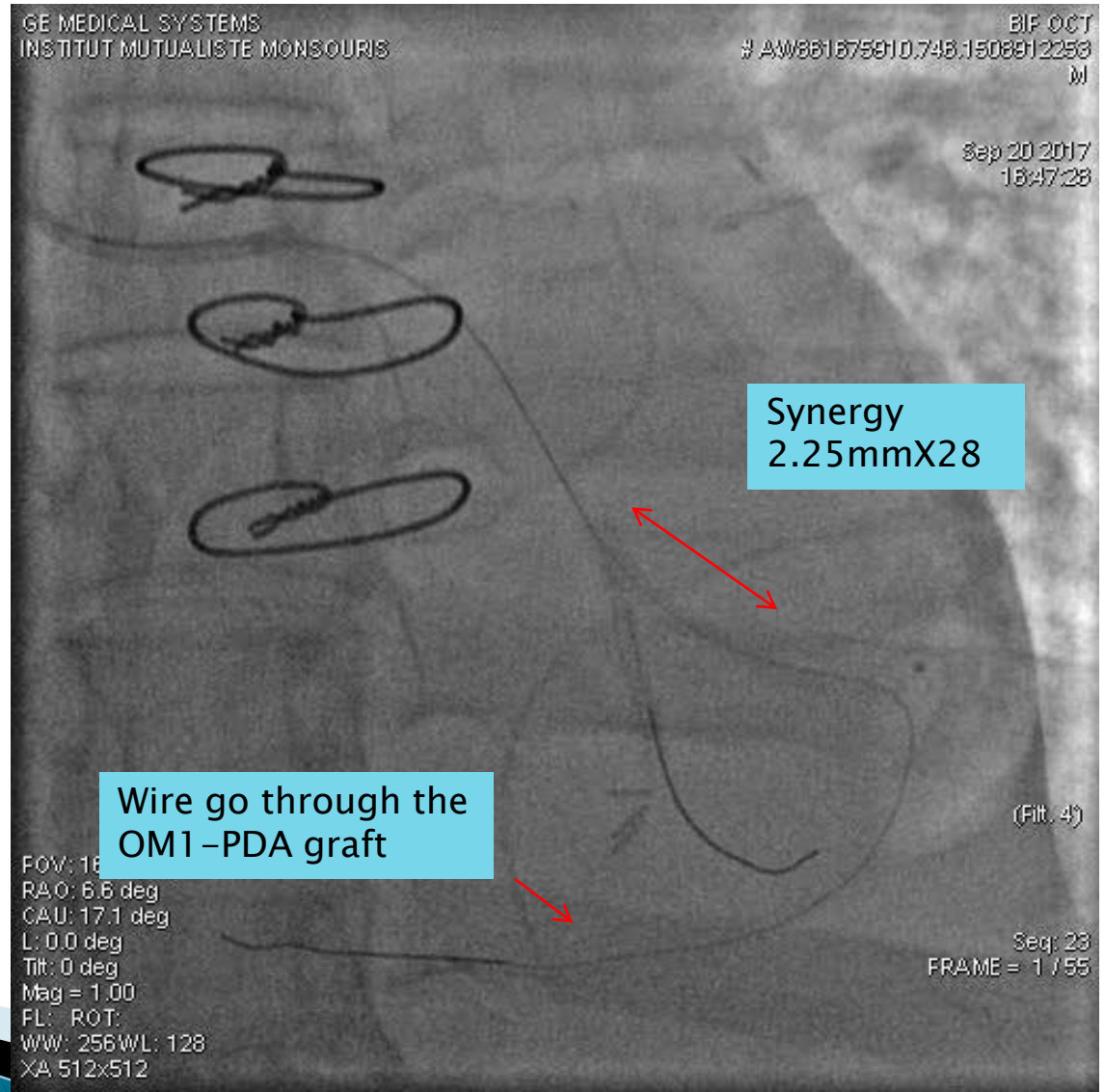
Stent dans la branche latérale et crush immédiat



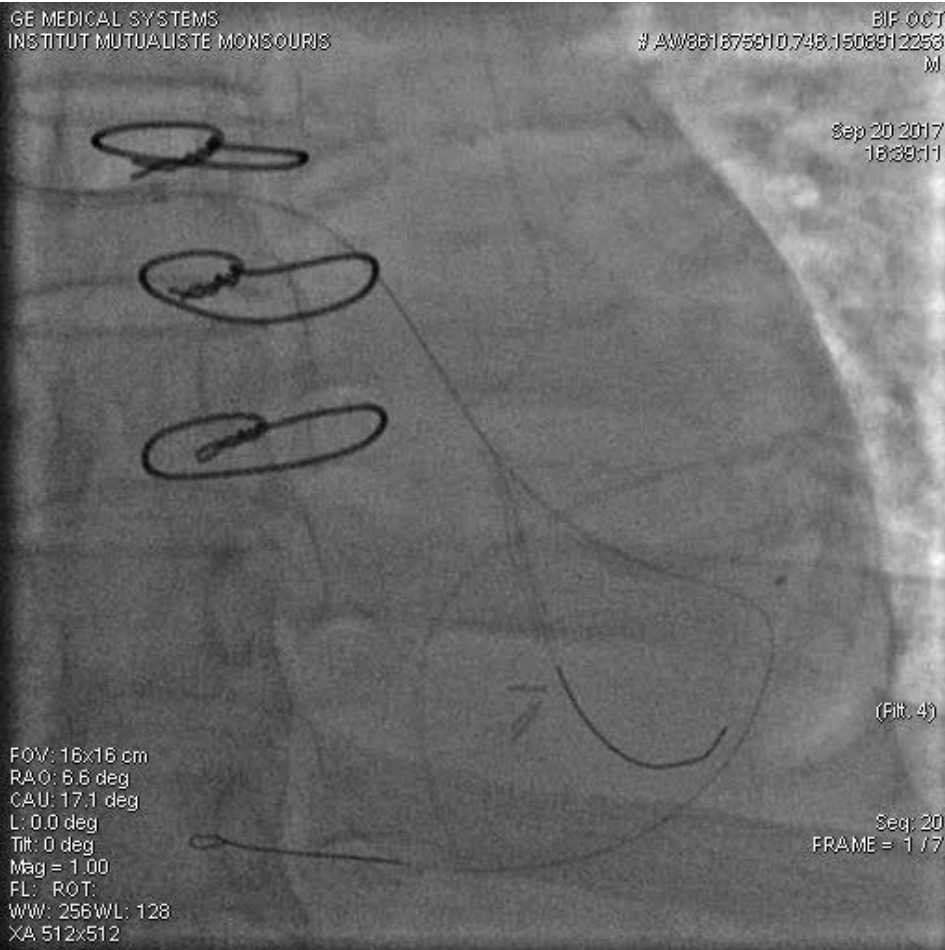
Kissing balloon and Main Branch stent implantation



2 balloons Emerge
2.0 X 12



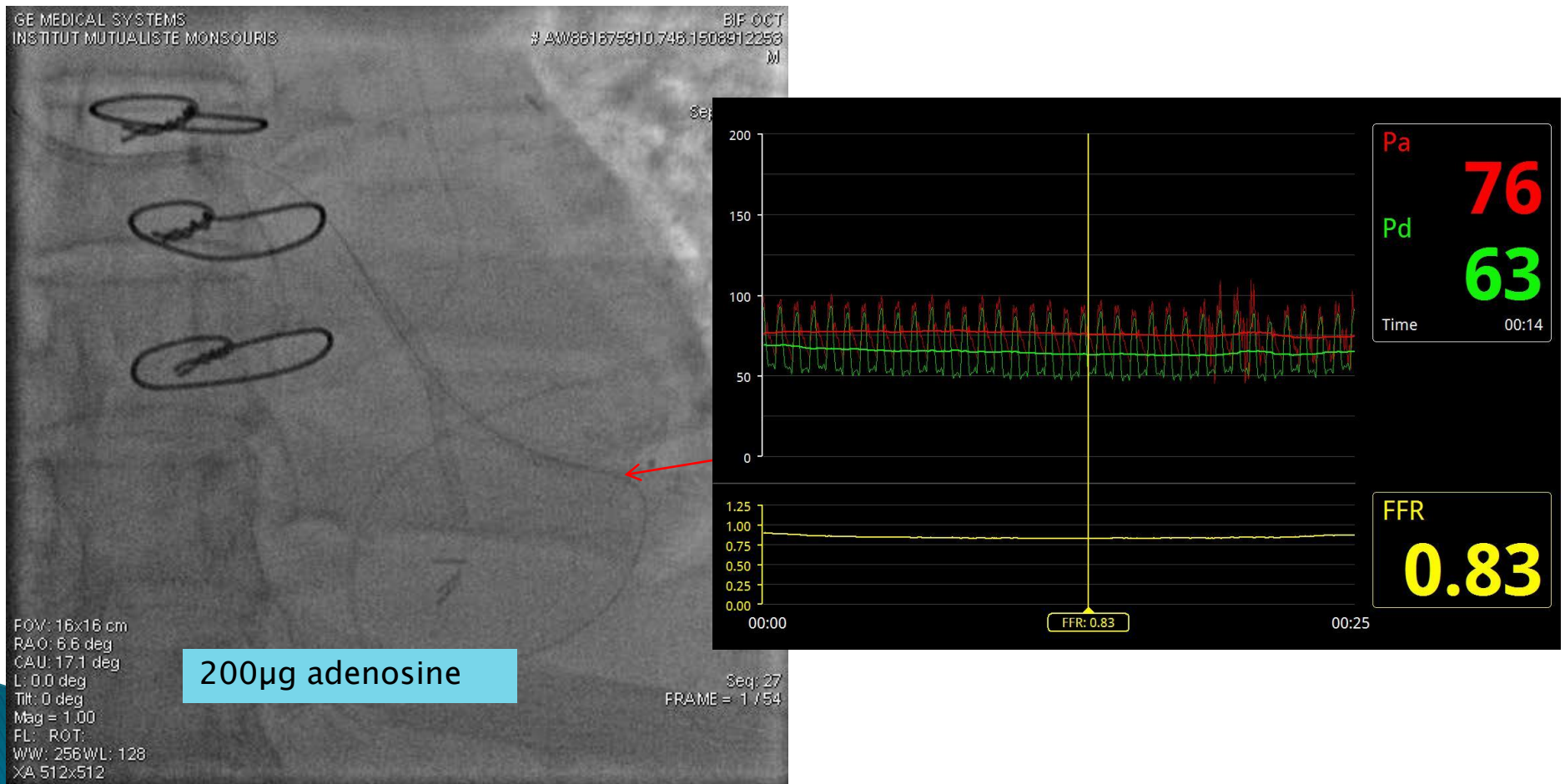
POT + Re-wiring side branch and second kissing balloon



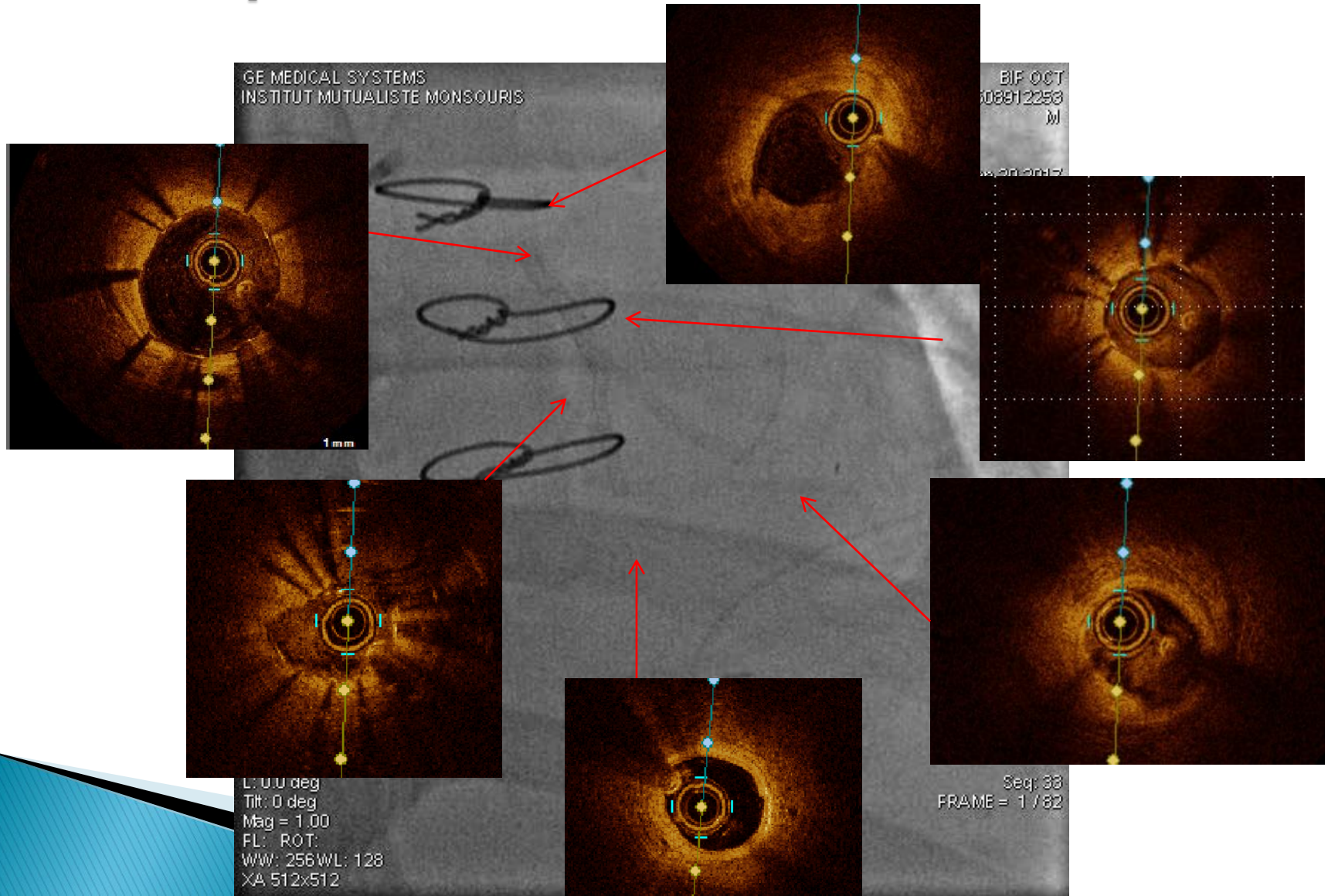
Proximal stent implantation (not part of the DKCrush) and RE-POT



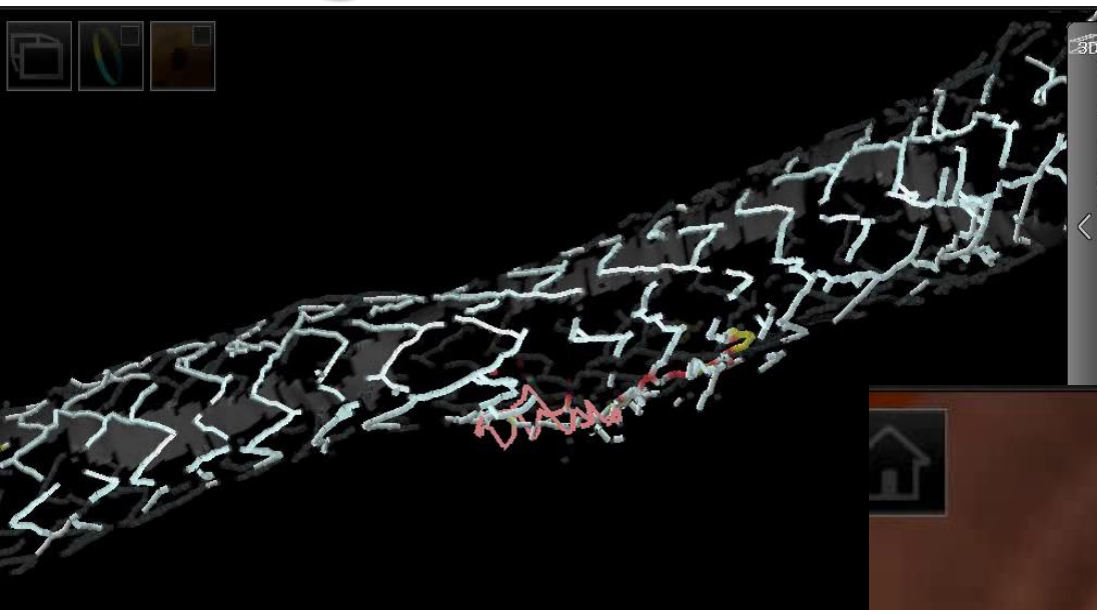
Concerns about LM stenosis



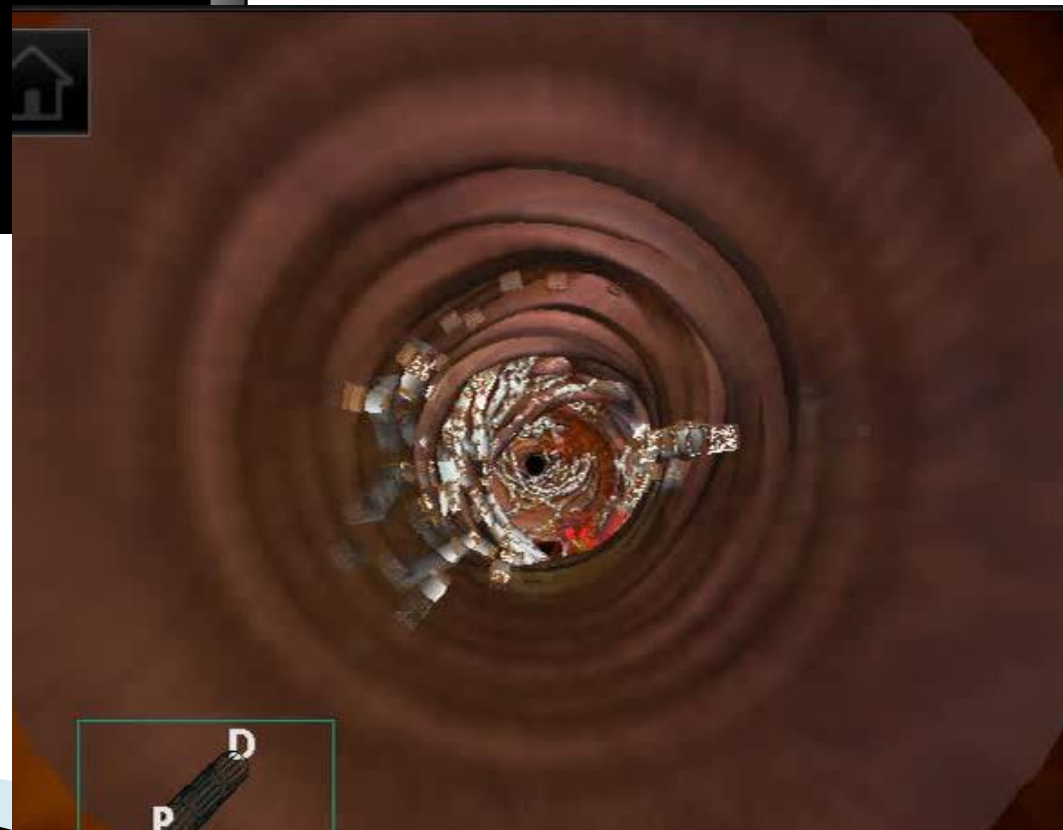
Concerns about landing zone stent optimization and bifurcation



Imagerie OCT



Main branch run
(OM1)



Merci

