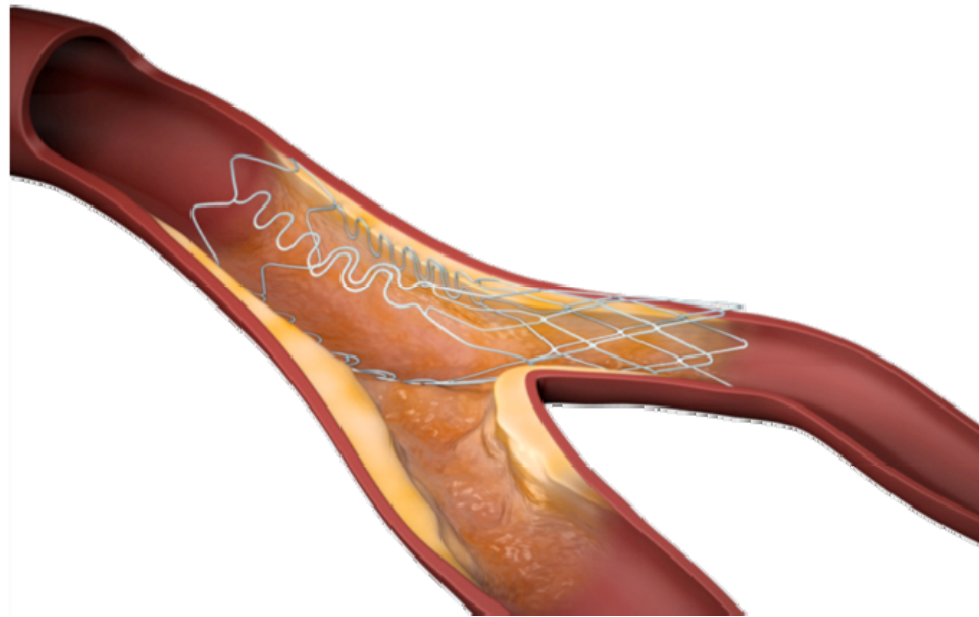


COMPLEX LAD-DIAGONAL BIFURCATION STENTING USING THE TRYTON™ DEDICATED BIFURCATION STENT



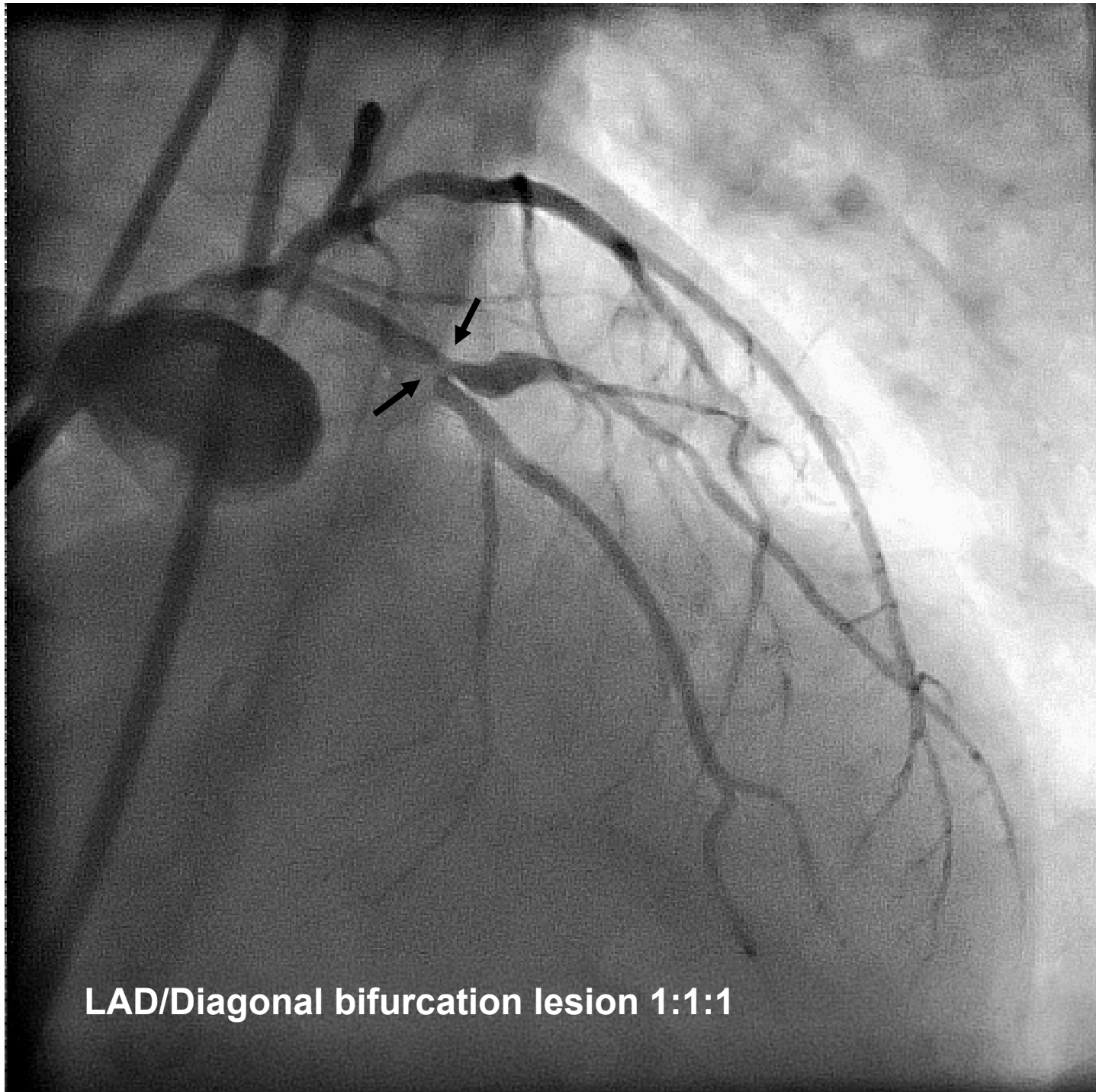
פר' עבד עסלי, פר' רן קורנובסקי, דר' חנה וקנין-אסא, דר' ירון אלמגור
המרכז הרפואי רבין – בית החולים בילינסון פתח תקוה
והמרכז הרפואי שערי צדק בירושלים

חולה בן 81 התקבל בגלל תעוקת חזה בלתי יציבה ובעברו אנגיופלסטיקה ל-RCA
(כעת פתוח) וממצא של היצרות באתר הביפורקציה של העורקים LAD-
DIAGONAL וקלסיפיקצית הפיצול לפי MEDINA 1:1:1.

אסטרטגית הטיפול בהן נקטנו בחולה זה:

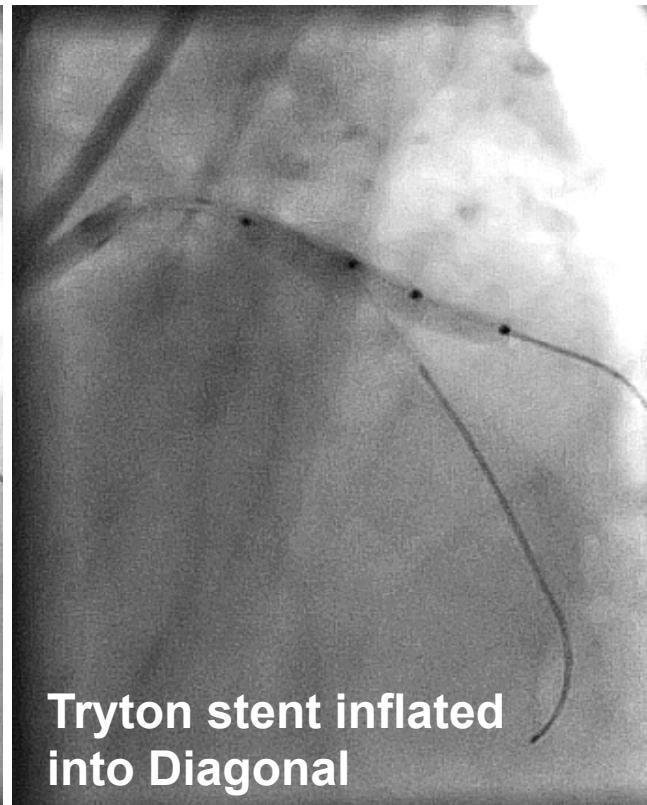
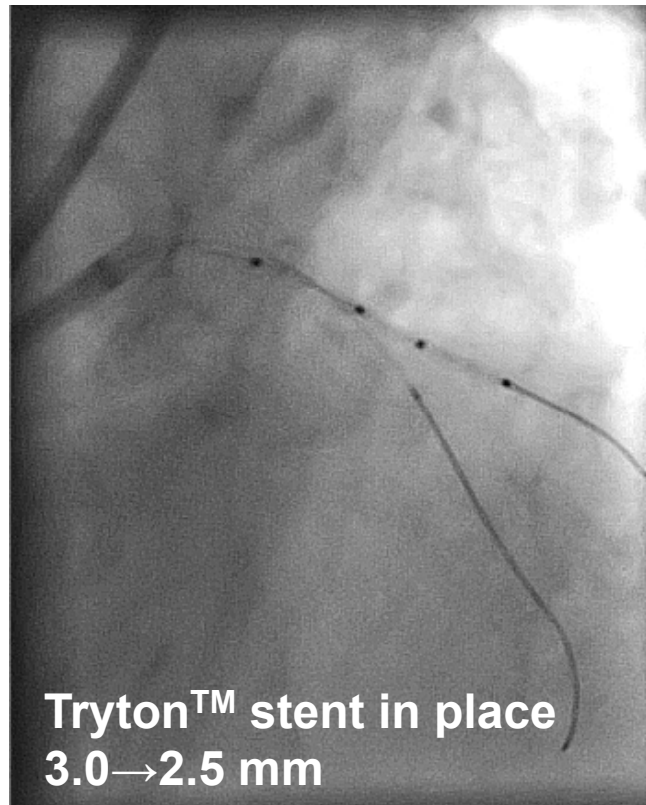
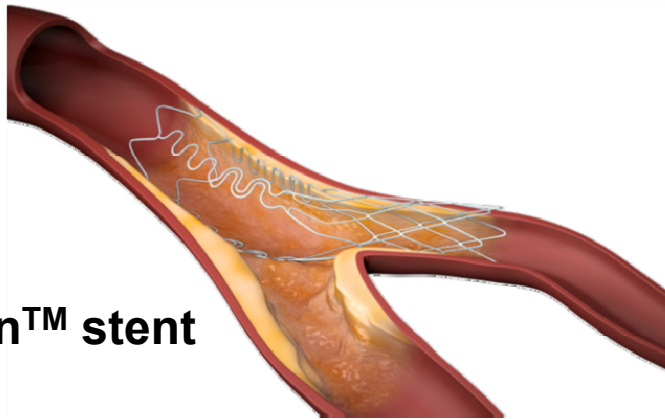
1. CLOPIDOGREL LOADING
 2. 7 FRENCH EBU GUIDING CATHETER
 3. DOUBLE WIRING INTO LAD+DIAGONAL BRANCHES
 4. PRE-DILATATION OF BOTH BRANCHES
 5. ***TRYTON™** STENTING OF LAD INTO THE DIAGONAL BRANCH
 6. DES STENTING THROUGH AND ACROSS THE TRYTON STENT
 7. RRE-WIRING AND KISSING BALLOONS-SIMULTANEOUS DILATATION
 8. IVUS VALIDATION OF OPTIMAL EXPANSION AND CARINA OPENING
 9. STENT-OPTIMIZER™ ENHANCED ANGIOGRAPHIC IMAGING
 10. FINAL ANGIOGRAPHIC RESULTS AND PROCEDURE COMPLETION.
-

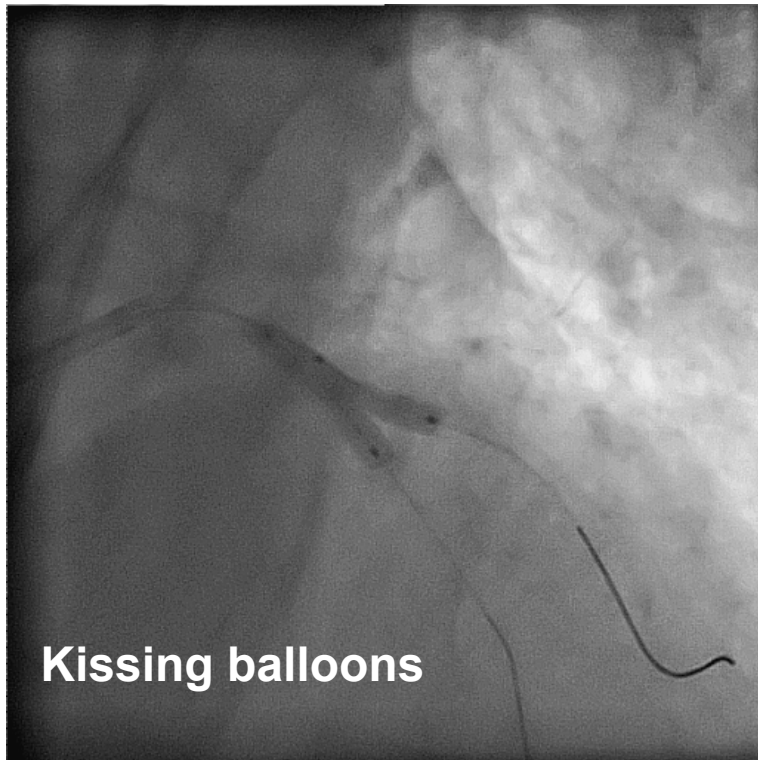
*Special regulatory authorization by the AMAR department of the MOH 5-2010

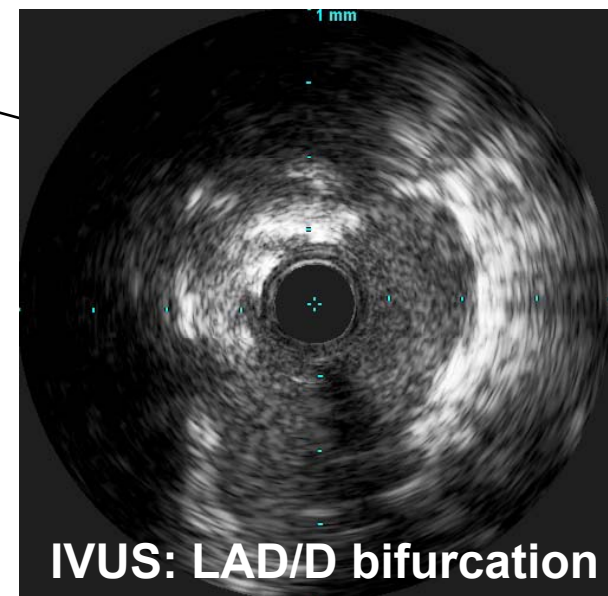
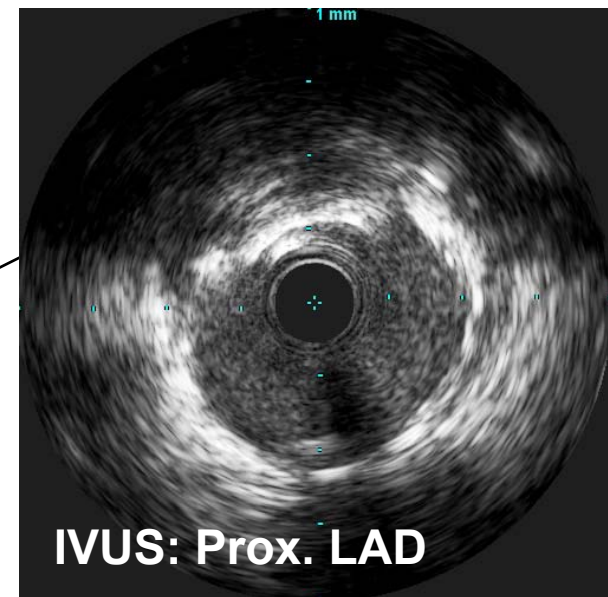
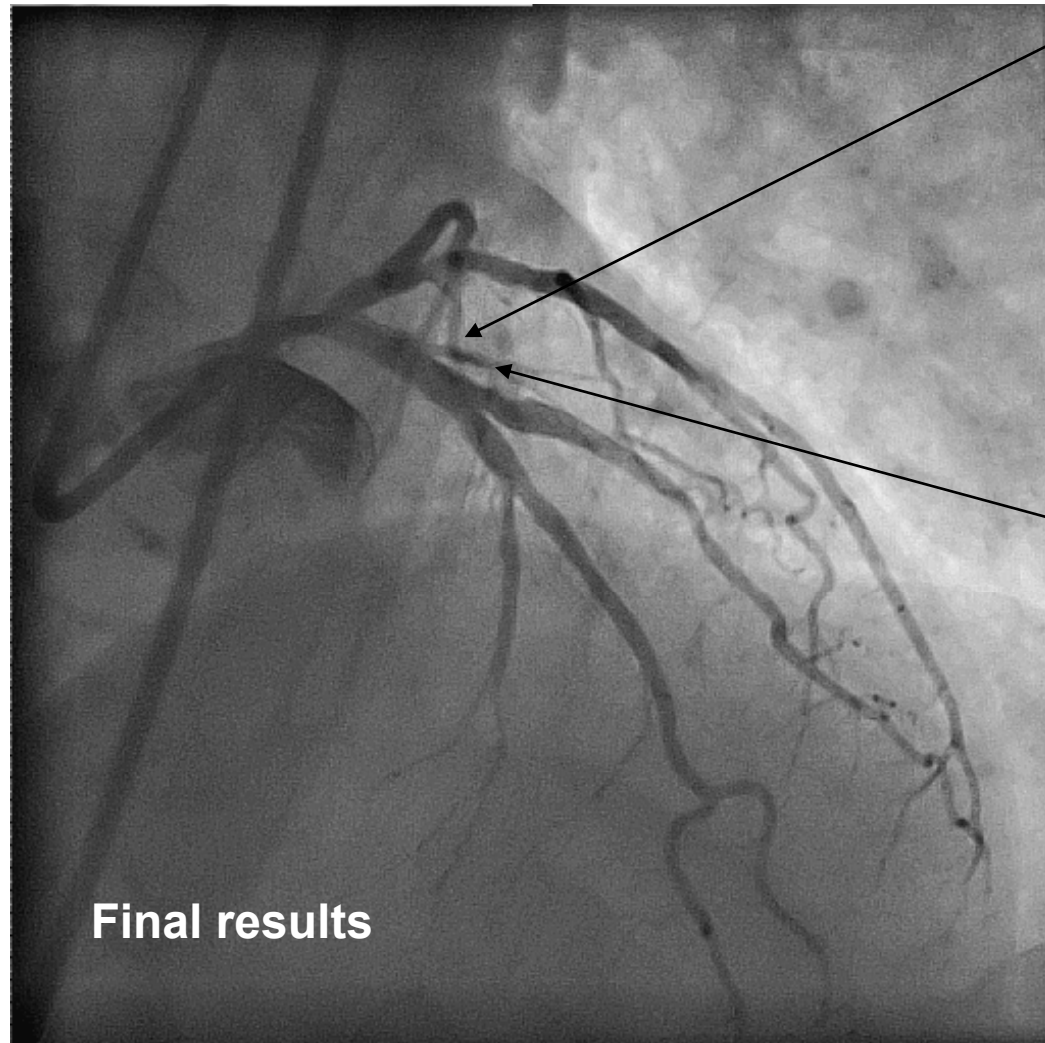


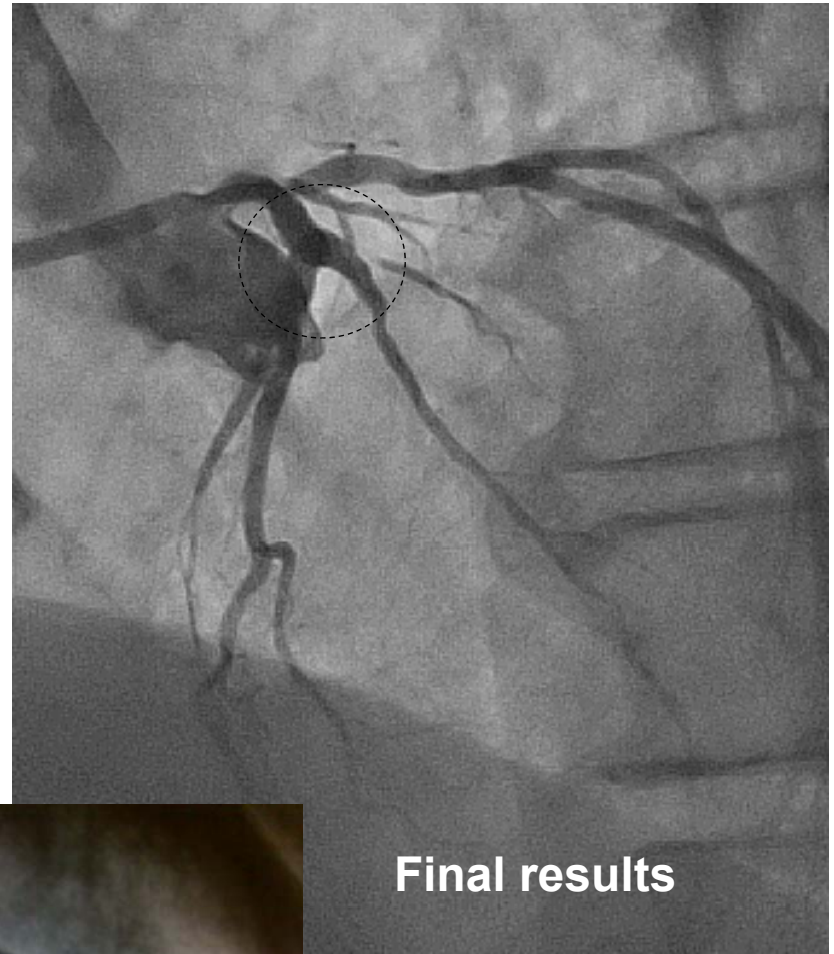
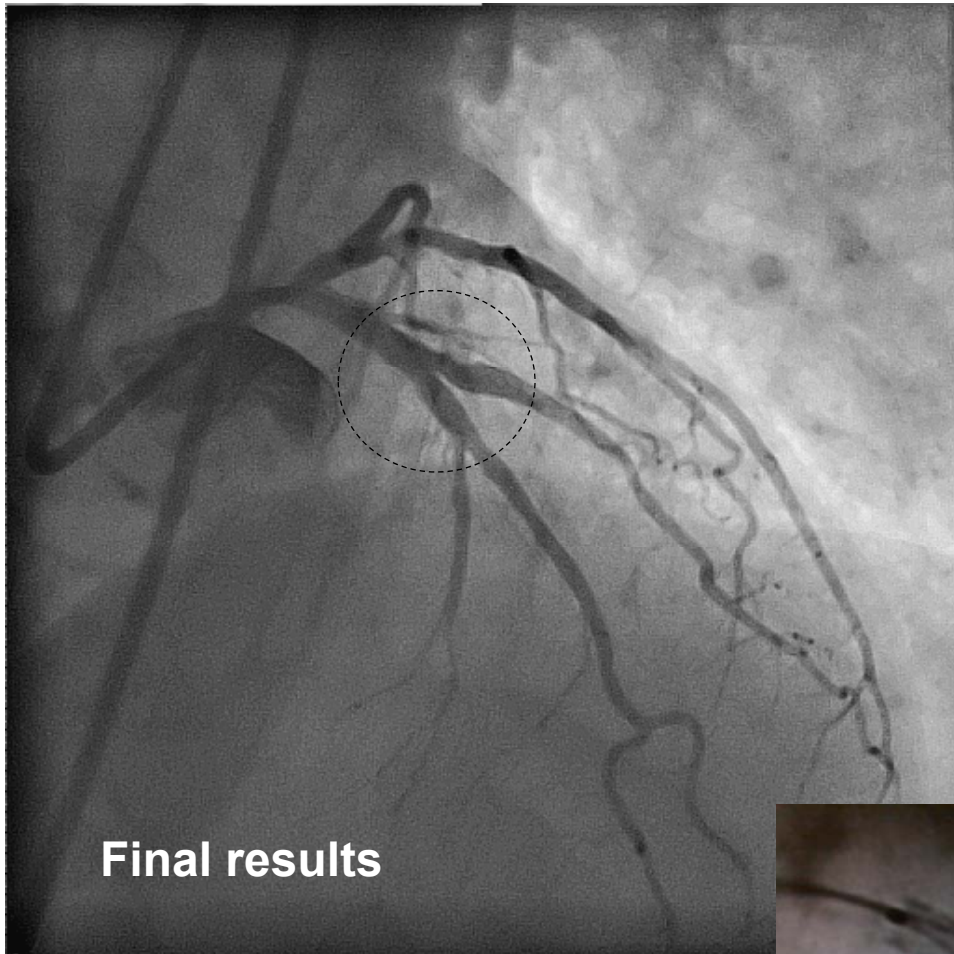
LAD/Diagonal bifurcation lesion 1:1:1

Tryton™ stent









END