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IMMEDIATE AND MEDIUM-TERM OUTCOME OF LEFT MAIN CORONARY ARTERY STENTING

Submitted for Partial Fulfillment for M.D. Degree
In Cardiovascular Medicine

By

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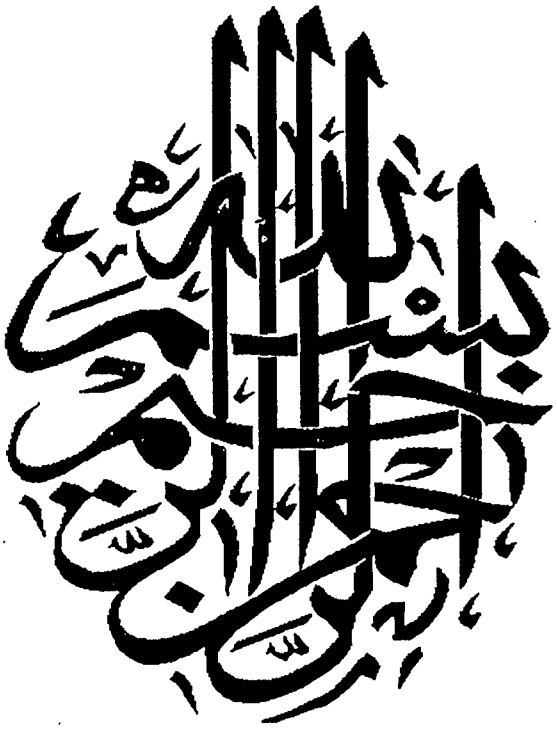

وقل رب زدني علماً

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ABBREVIATION

AMI	:	Acute myocardial infarction
CASS	:	Coronary artery surgery study
D1	:	First diagnosal artery
DCA	:	Directional coronary atherectomy
DES	:	Drug eluting stent
EF	:	Ejection fraction
IABP	:	Intra aortic balloon pump
IMA	:	Internal mammary artery
IVUS	:	Intravasculr ultrasound
LAD	:	Left anterior descending artery
LCX	:	Left circumflex artery
LM	:	Left main
LMCA	:	Left main coronary artery
LMCAD	:	Left main coronary artery disease
LMS	:	Left main stem
LMT	:	Left main trunk
LV	:	Left ventricle
MACE	:	Major adverse cardiac events
MI	:	Myocardial infarction
OM_1	:	Obtuse marginal
PCI	:	Percutaneous coronary intervention
PTCA	:	Percutaneous transluminal coronary angioplasty
QCA	:	Quantitative coronary angiography
RCA	:	Right coronary artery
TEE	:	Transesophageal echocardiography
TLR	:	Target lesions revascularization
TTE	:	Trans thoracic echocardiography
ULMT	:	Unproected left main trunk

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INTRODUCTION

In the early days of percutaneous transluminal coronary angioplasty (PTCA), Anadreas Gruentzig used the procedure to treat unprotected left main caronary artery (LMCA) stenoses in a few patients *(Gruentzig, 1978).*

This practice was promptly stopped, however, because of its poor result and because of the publication of several surgical series demonstrating longer survival times after surgical revascularization compared with nonsurgical treatment in patients with LMCA disease *(Caracciolo et al., 1995).*

Subsequently, a number of interventional cardiology groups also reported disappointing outcomes after balloon angioplasty alone in LMCA stenosis : there was substantial perioperative mortality, restenosis rates were high, and long term survival rates were unsatisfactory *(O'keefe et al., 1989).*

However, the explosive growth of coronary stenting in the 1990s, fueled in part by the dramatic reduction in thrombotic complications provided by ticlopidine therapy *(Barragan et al., 1994)* and by evidence that stenting reduced postangioplasty restenosis rates, prompted, new attempts at LMCA dilation *(Macaya et al., 1992).*

Since 1993, angioplasty with stenting was offered to all patients with LMCA stenoses *(Silvestri et al., 2000).*