

Retrograde Chronic Total Occlusion Percutaneous Coronary
Intervention Through Ipsilateral Collateral Channels

Supplementary material

Azzalini, Lorenzo; Agostoni, Pierfrancesco; Benincasa, Susanna; Knaapen, Paul; Schumacher, Stefan P.; DENS, Jo; MAEREMANS, Joren; Kraaijeveld, Adriaan O.; Timmers, Leo; Behnes, Michael; Akin, Ibrahim; Toma, Aurel; Neumann, Franz-Josef; Colombo, Antonio; Carlino, Mauro & Mashayekhi, Kambis (2017) Retrograde Chronic Total Occlusion Percutaneous Coronary Intervention Through Ipsilateral Collateral Channels. In: JACC-CARDIOVASCULAR INTERVENTIONS, 10(15), p. 1489-1497.

DOI: 10.1016/j.jcin.2017.06.002

Handle: <http://hdl.handle.net/1942/24397>

Table 2. Angiographic characteristics.

Variable	n=126
Number of diseased vessels	2.3±0.8
Target-vessel CTO	
Left anterior descending	49 (39%)
Circumflex	53 (42%)
Right coronary artery	24 (19%)
In-stent CTO	5 (4%)
Blunt stump	88 (70%)
Moderate or severe calcifications	46 (37%)
>45° bending	45 (36%)
Lesion length >20 mm	77 (61%)
Retry	44 (35%)
J-CTO score	2.36±1.13
J-CTO score ≥2	99 (79%)
Proximal cap ambiguity	86 (68%)
Ostial CTO	14 (11%)
Distal cap at bifurcation	47 (37%)
Good distal landing zone	76 (60%)
Collateral degree (Werner)	
CC0	5 (4%)
CC1	86 (69%)
CC2	34 (27%)
Epicardial / septal	96 (76%) / 30 (24%)
Anatomy of the ipsilateral collaterals	See Figure 1
Collateral tortuosity	
Mild	65 (52%)
Moderate	54 (43%)
Severe (“corkscrew”)	7 (6%)
McEntegart CC score	3.71±1.30

Abbreviations: CC, collateral channel; CTO, chronic total occlusion.