

# Single-Session High-Risk PCI and TAVR in Severe Aortic Stenosis and Multivessel Disease

*Cases with the Masters*

Tamara Dijkstra, MD, Research Fellow



Dr. Maik J.D. Grundeken, MD, PhD  
Dr. Alexander W. den Hartog, MD, PhD  
Prof. Dr. Ronak Delewi, MD, PhD  
Dr. Bimmer E.P.M. Claessen, MD, PhD

# Disclosure of Relevant Financial Relationships

Within the prior 24 months, I have had a financial relationship with a company producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients:

Nature of Financial Relationship

Research Support

Research Support

Research Support

Ineligible Company

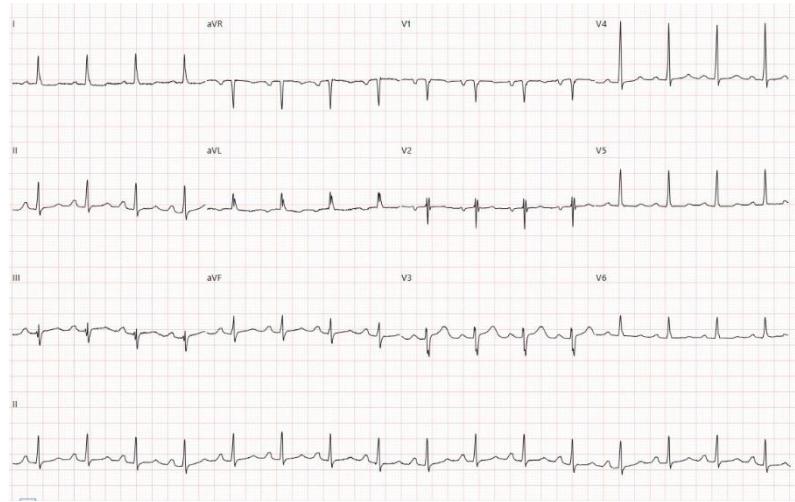
B. Braun Melsungen AG

Infraredx

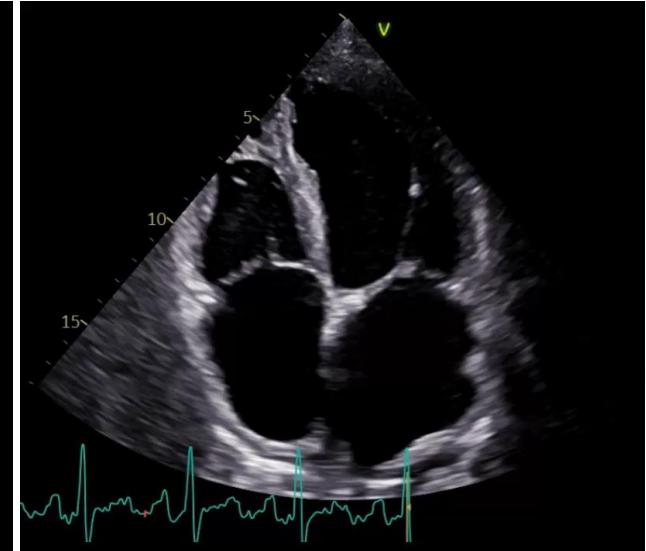
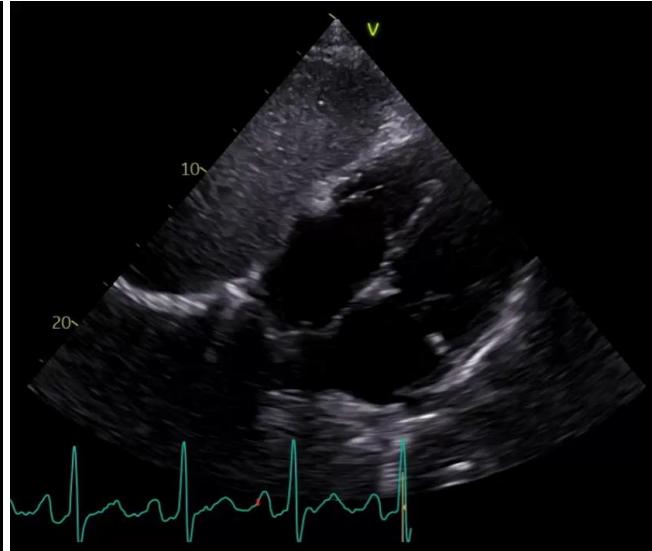
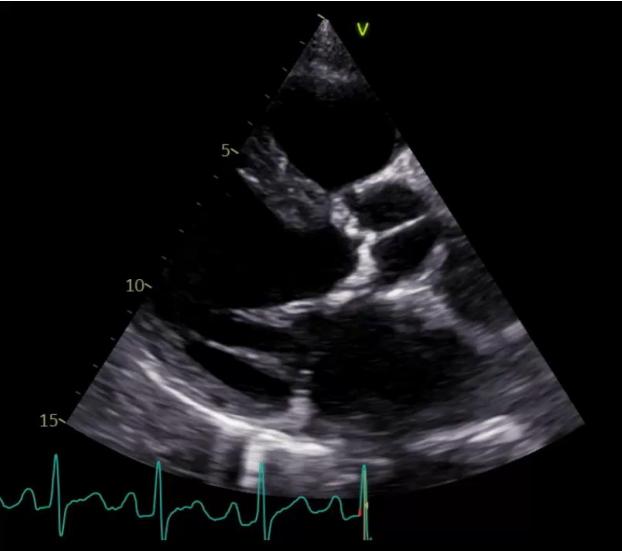
Cleerly Inc.

# Male patient, 73 years old

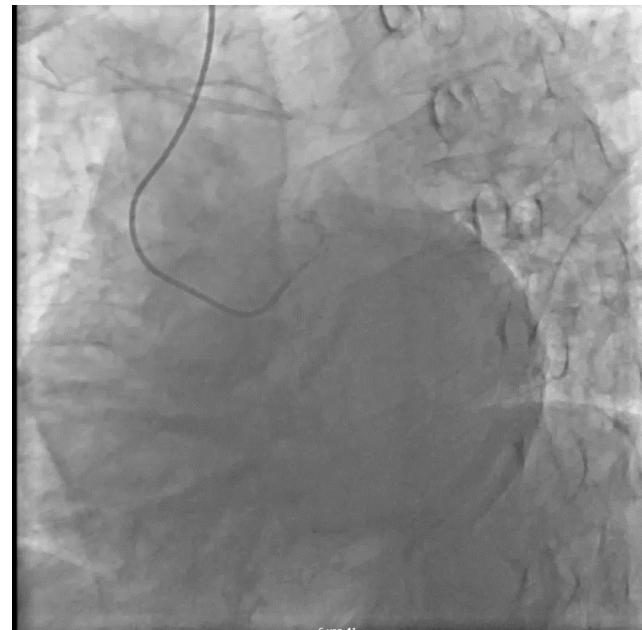
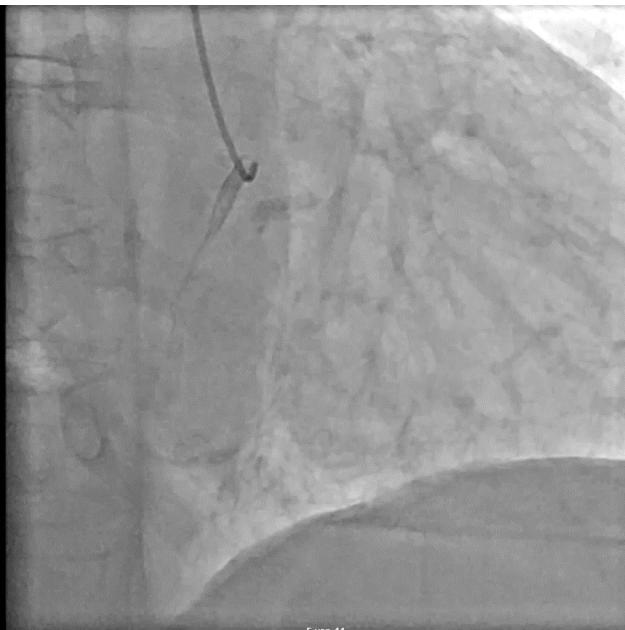
- Length 167cm, weight 63kg
- No significant medical history
- Admitted with acute decompensated heart failure
- After medical stabilization:
  - ECG: sinus rhythm, non-specific T-wave abnormalities
  - Echocardiogram: Poor LVF, severe aortic stenosis (AVA 0.6m<sup>2</sup>)



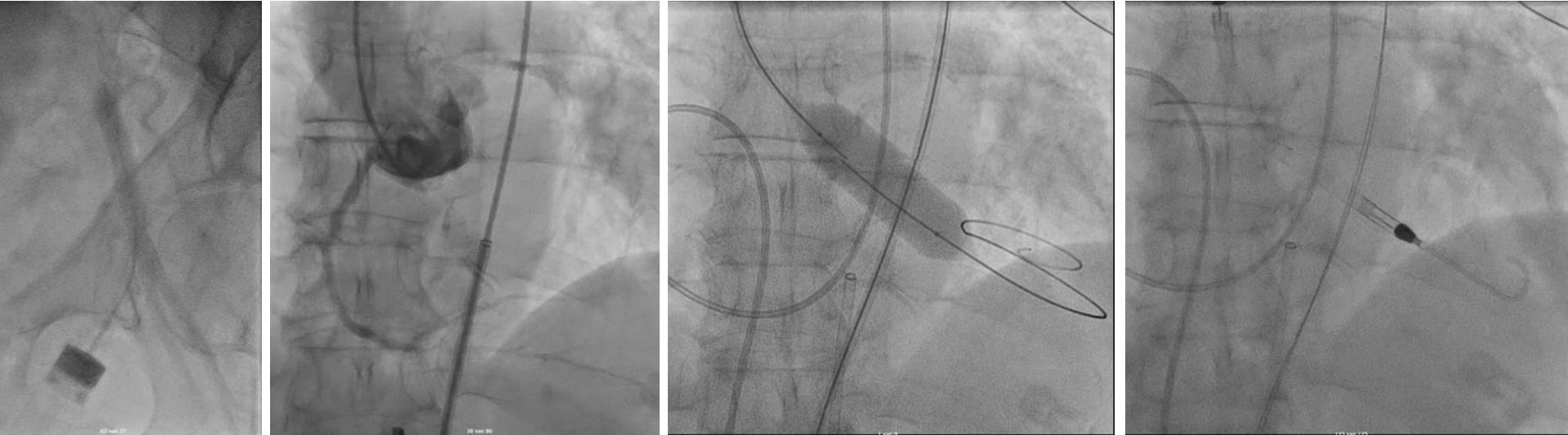
# Echocardiogram: Severe aortic stenosis (AVA 0.6 cm<sup>2</sup>)



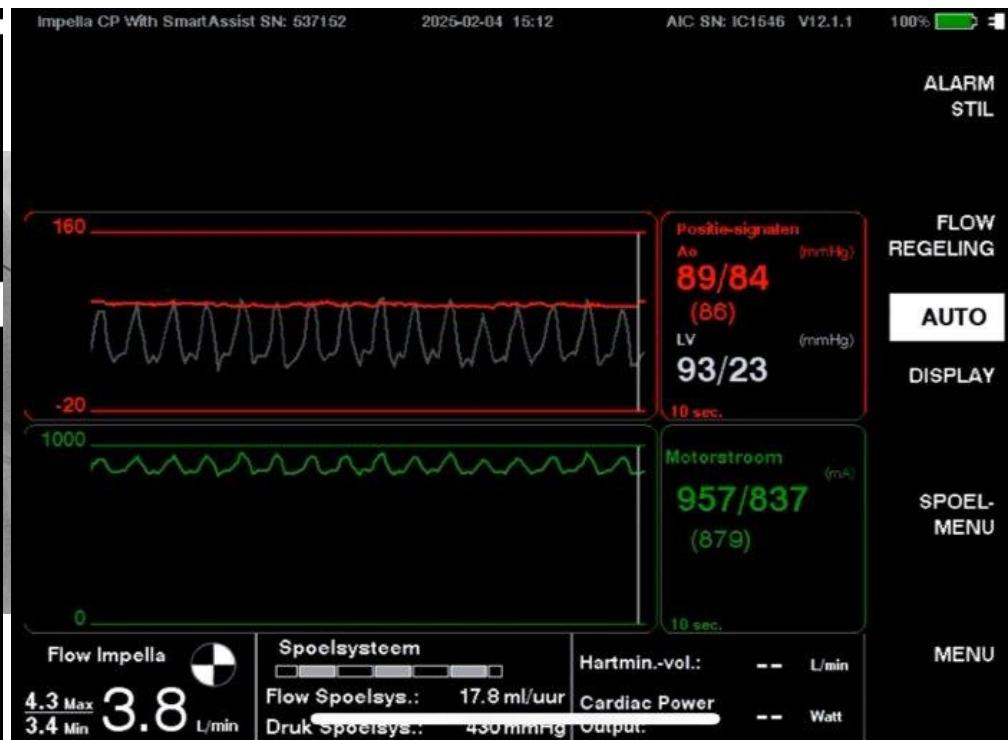
# Diagnostic angiography



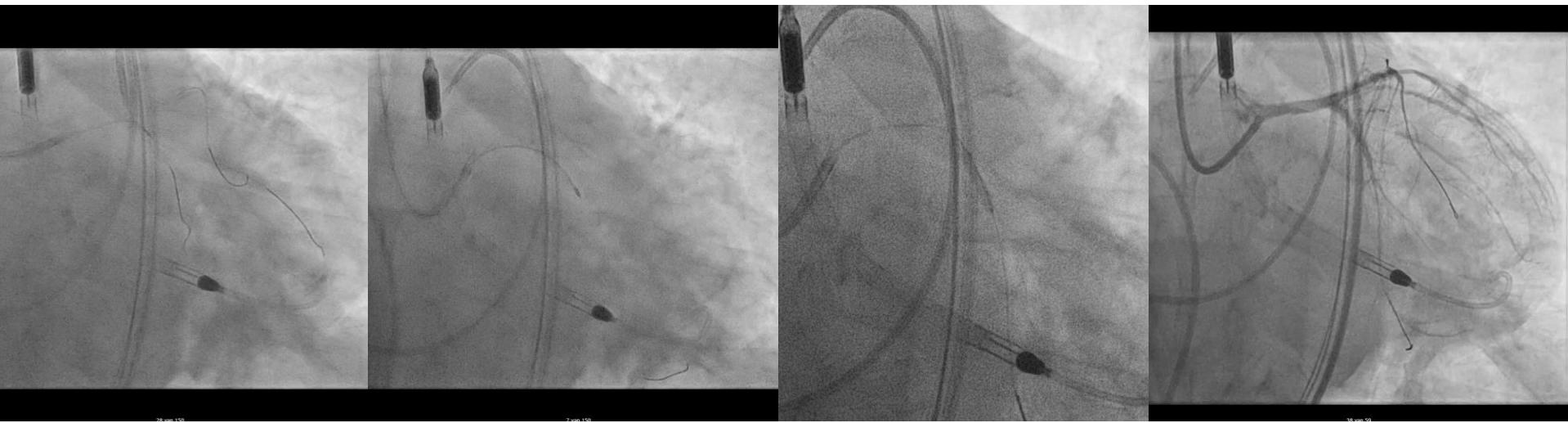
# Procedure

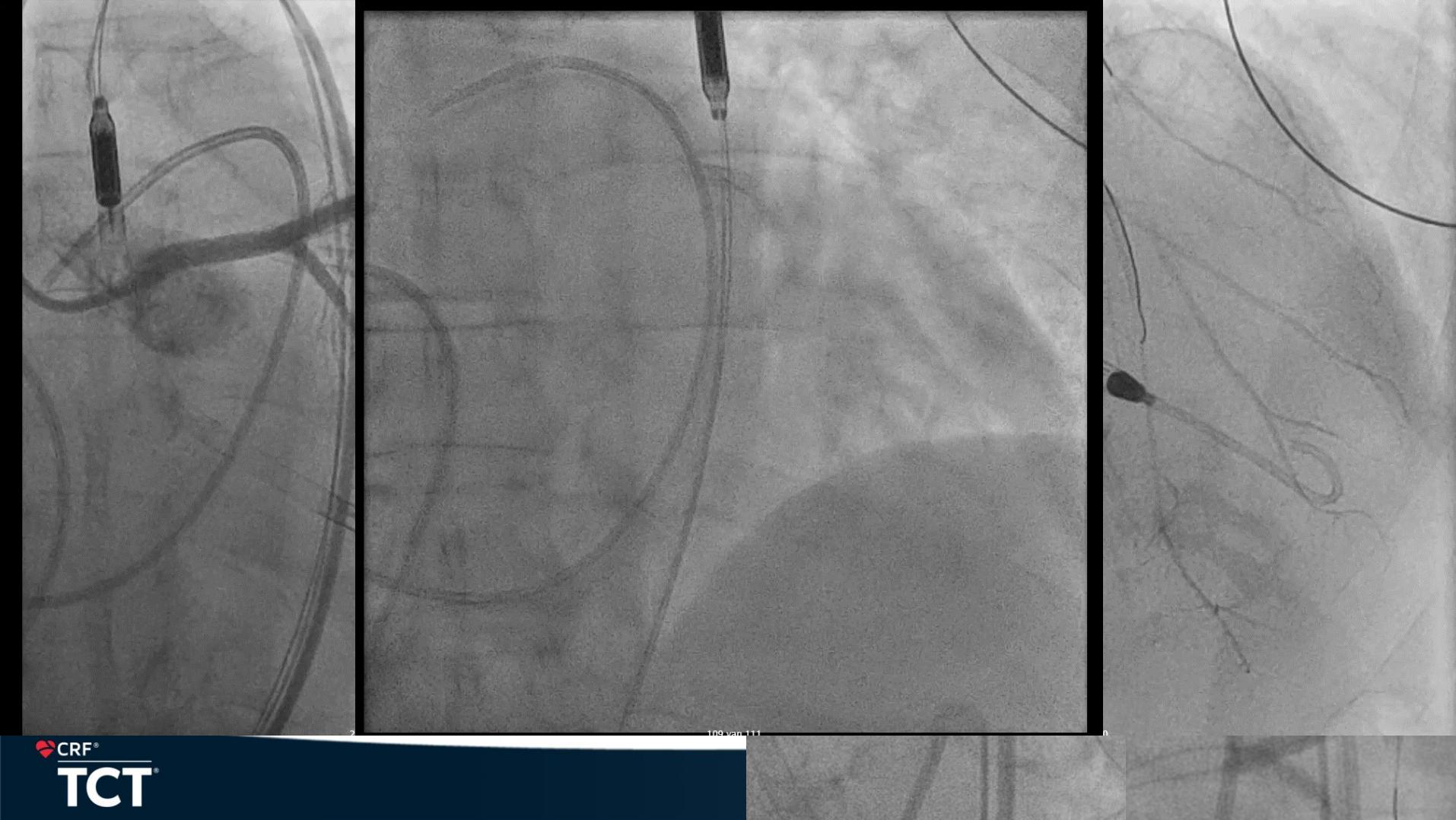


# Procedure

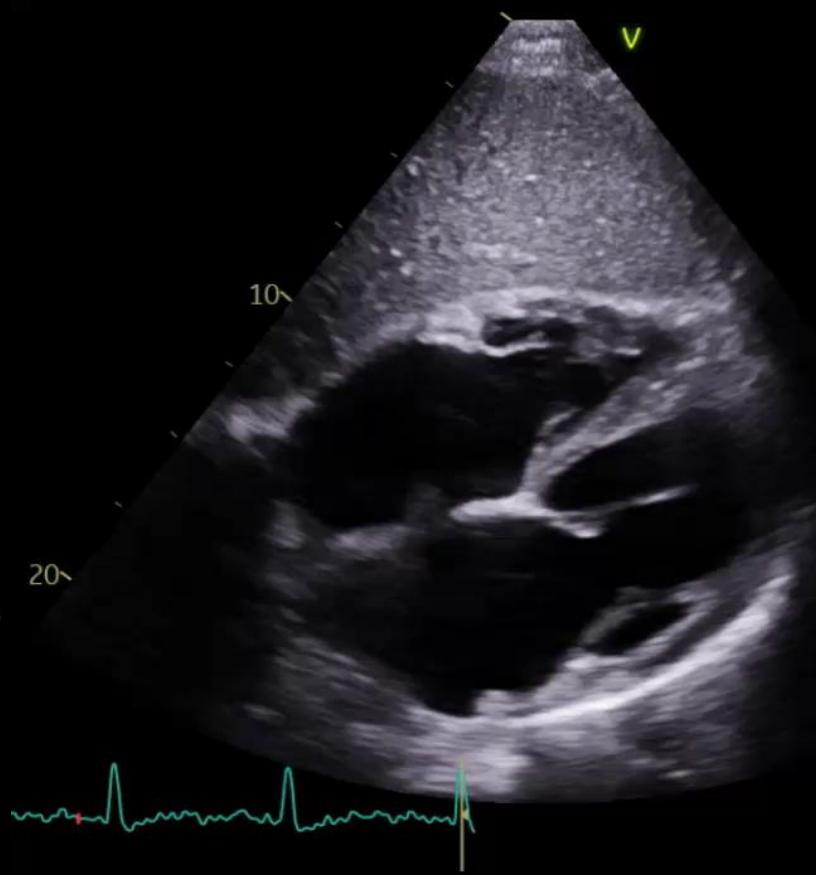


# Procedure





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# Key messages

- This case illustrates the feasibility of combining high-risk PCI and TAVR in a severely compromised patient using a stepwise percutaneous approach.
- Multidisciplinary planning, Impella support, intravascular imaging, and advanced PCI techniques were key to procedural success.

