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Rare case of iatrogenic aortocoronary dissection by diagnostic transradial cardiac catheterization

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A combined, type A Aortic dissection with coronary artery dissection during diagnostic coronary angiography is an extremely rare, but a very critical complication with high mortality. During a coronary artery involvement as an entry point, it can be treated by sealing the dissection plane with a coronary stent. Extensive dissections may require a surgical intervention. Different factors that influence the management decision includes hemodynamically unstable patient, aortic injury mechanism, size, severity, direction

in which the dissection spreads, intimal flap presence, and preexisting atherosclerotic disease. We present a case of type A aortic dissection including dissection of ostium of right coronary artery (RCA) caused by a diagnostic coronary catheter. This iatrogenic aortic dissection required emergent coronary artery bypass graft (CABG) to RCA and surgical repair with supracoronary replacement of the ascending aorta.

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