

Introduction

Dyslipidemia is a poor lipid profile involving high Triglycerides (TG), high total cholesterol (TC) and a low high density lipoprotein (HDL) to low density lipoprotein (LDL) ratio. This condition is typically found in obese patients with insulin and leptin resistance and frequently results in lipotoxicity and atherosclerosis (**Flier and Flier, 2007**).

Coronary artery disease (CAD) is the end result of the accumulation of atheromatous plaques within the walls of the coronary arteries that supply the myocardium with oxygen and nutrients. It is sometimes also called coronary heart disease (CHD). Although CAD is the most common cause of CHD, it is not the only one (**Rosamond et al., 2007**).

Percutaneous coronary intervention (PCI) has transformed the practice of revascularization for CAD. Initially used in the treatment of patients with stable angina and discrete lesions in a single coronary artery, coronary angioplasty has multiple indications today, including unstable angina, acute Myocardial Infarction (MI), and multivessel CAD. With the combination of sophisticated equipment, experienced operators, and modern drug therapy, PCI has evolved into an effective nonsurgical modality for treating patients with coronary artery disease (**Levine et al., 2011**).

Recent advances in guidewires, stents, and devices to cross chronically occluded arteries are evolving, so that more patients with chronic total occlusions (CTOs) are now being successfully treated percutaneously (**Cavusoglu et al., 2004**).
