Supplementary Fig. 1. Case of second-generation drug-eluting stent-related coronary artery aneurysm who received target lesion revascularization (Case No. 4 in Table 1). (A) Initial angiography shows chronic total occlusion of right coronary artery (RCA). (B) RCA was successfully treated with three second-generation everolimus-eluting stents [Promus (Boston Scientific, Marlborough, MA, USA) 3.5 × 23.0 mm, Promus (Boston Scientific) 3.0 × 28.0 mm, and Promus (Boston Scientific) 3.0 × 28.0 mm] from proximal to distal segment (dotted-line). (C) Fusiform aneurysm (white arrowhead) and in-stent restenosis (black arrowhead) were detected on follow-up angiography performed at 385 days after the index procedure because of recurrent chest pain. (D) In-stent restenotic lesion was successfully treated with everolimus-eluting stent [Xience (Abbot Vascular, Santa Clara, CA, USA) 3.0 × 18.0 mm (dotted-line)]. After this treatment, 7.5 years were clinically followed up without further adverse events.