We report a case of a 63-year-old woman who was admitted at our institution for unstable angina with a severe coronary disease and circumflex coronary artery fistula draining to the coronary sinus (Fig. 1). Surgical treatment was revascularization of the diagonal branch (no reperfusion of the LAD) and ligation of the fistula.

Fig. 1. (A) Multislice cardiac spiral tomography showing circumflex coronary artery fistula. (B) Coronary angiography showing coronary artery disease and the circumflex artery to coronary sinus fistula. (C) Intraoperative image showing the origin of the circumflex coronary artery fistula and its anatomical relationships. RCA, right coronary artery; LAD, left anterior descending artery; F, fistula; Diag, diagonal branch; PA, pulmonary artery.