52-year-old man was admitted to emergency department with typical chest pain. His physical examination was normal. Electrocardiogram showed ST segment depression in leads III, aVF and V5-V6. Coronary angiography showed normal left main (LMCA) and left anterior descending artery (LAD). There was 70% stenosis at proximal segment of circumflex coronary artery (CX). A 3.5x16 mm bare stent was implanted to CX. Right coronary angiography showed an interesting finding. There were two different right coronary arteries originating from the right sinus of Valsalva with the different ostia (Figure 1).

Double right coronary artery originating as common ostium from right sinus Valsalva have previously been reported. However, double right coronary artery originating from right sinus valsalva with different ostia is a very rare finding. A few cases were detected by multidetector CT and only one case detected by conventional angiography have been reported in the literature.\(^1\)\(^2\)\(^3\) We believe our case is a very rare anomaly to show a true double right coronary artery with conventional angiography.

**FIGURE 1:** Left anterior oblique views of the right coronary system, two different right coronary arteries originating from the right sinus of Valsalva.
REFERENCES

