Editöre Mektup

Acute Myocardial Infarction with Simultaneous Involvement of Left Anterior Descending Artery and Right Coronary Artery: A Subacute Stent Thrombosis

Mehmet Ali Elbey[*], Ahmet Bacaksiz[**], Abdurrahman Tasal[**], Ercan Erdogan[**]

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Simultaneous occlusions of multiple coronary arteries in patients with ST elevation myocardial infarction are uncommon and lead to a fatal outcome (1). We report a 77-year-old woman with a previous history of chronic angina, who had undergone BMS (bare metal stent) implantation on her left anterior descending coronary artery (LAD, one stent) and right coronary artery (RCA, two stents) 5 days before in another hospital, was admitted to our hospital for acute anterior and inferior ST-elevation myocardial infarction. The patient discontinued dual antiplatelet therapy after the procedure. She was admitted with respiratory distress and cardiogenic shock secondary to acute myocardial infarction. Electrocardiography demonstrated >2 mm ST segment elevation in D 2-3, AVF and V1-6 and D1 leads (Figure 1).

The patient was intubated and taken to the catheterization laboratory. Emergent coronary angiography revealed subacute in-stent thrombosis and showed total occlusion of the LAD and subtotal occlusion of the RCA (Figure 2 A and B). A temporary pacemaker was placed through a femoral venous line and an intra-aortic balloon pump was used for hemodynamic support. Percutaneous coronary intervention with drug eluting stent (DES) implantation in LAD artery (Supralimus®, for proximal 2.75x28 mm and for distal 2.5x32 mm) and balloon coronary angioplasty in RCA (in proximal stent) were performed (Figure 2 C and D). We describe a case of a patient presented with ST-elevation myocardial infarction due to subacute stent thrombosis, which occurred simultaneously in BMS, 5 days after implantation. Patient was discharged from hospital in good condition.

[*]Dicle University School of Medicine, Department of Cardiology. Diyarbakır, Turkey
[**]Bezmialem Vakif University School of Medicine, Department of Cardiology. Istanbul, Turkey
Correspondence Address: Mehmet Ali Elbey, MD
Dicle University School of Medicine, Department of Cardiology. Diyarbakır, 21280, Turkey
Phone: 0412 248 80 01
Fax: 0412 248 85 23
E-posta: elbeymali@hotmail.com
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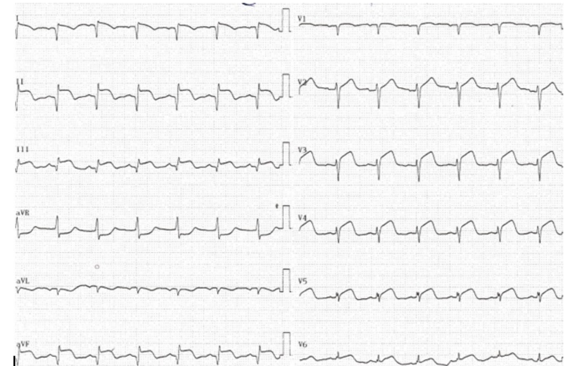

Fig. 1. Electrocardiography demonstrated ST segment elevation in D 2-3, AVF and V1-6 and D1 leads.

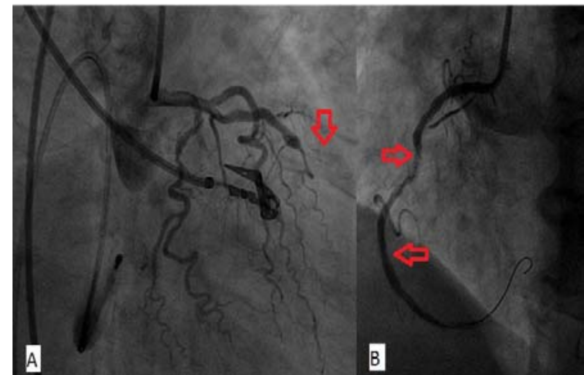

Fig. 2. A-B. Emergent coronary angiography at admission of (A) the LAD in the right anterior oblique view and the RCA in the left anterior oblique view (B) revealing occlusion of both stents (arrows).

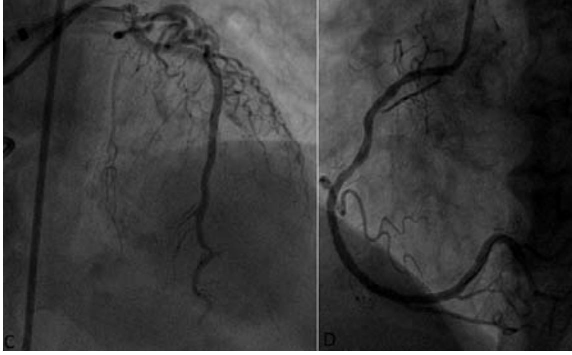

Fig. 2. C-D. Balloon angioplasty and DES implantation resulted in thrombolysis in myocardial infarction (TIMI) III antegrade flow of the LAD (C) and the RCA (D).

This rare case suggests that aggressive reperfusion therapy and even mechanical support to improve poor clinical outcome are suggested in high risk patients with simultaneous occlusions of multiple coronary arteries.

Sol Ön İnen Arter ile Sağ Koroner Arterin Aynı Anda Tutulumu ile Seyreden Akut Miyokard İnfarktüsü: Subakut Stent Trombozu

Anahtar kelimeler: Çıplak stent trombozu, kardiyojenik şok, perkütan koroner girişim

Reference

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