

IMAGES IN INTERVENTION

Kounis Syndrome Manifesting as Coronary Aneurysm and Very Late Coronary Stent Thrombosis



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A 65-year-old woman, who was treated with a sirolimus-eluting stent (SES) (CYPHER) for the left anterior descending coronary artery (LAD) 36 months previously, presented with ST-segment elevation myocardial infarction, showing an acute thrombotic occlusion of the LAD stent (Figure 1A). Aspiration thrombectomy and subsequent balloon angioplasty were performed that resulted in Thrombolysis In Myocardial Infarction flow grade 3. Optical coherence tomography (OCT)

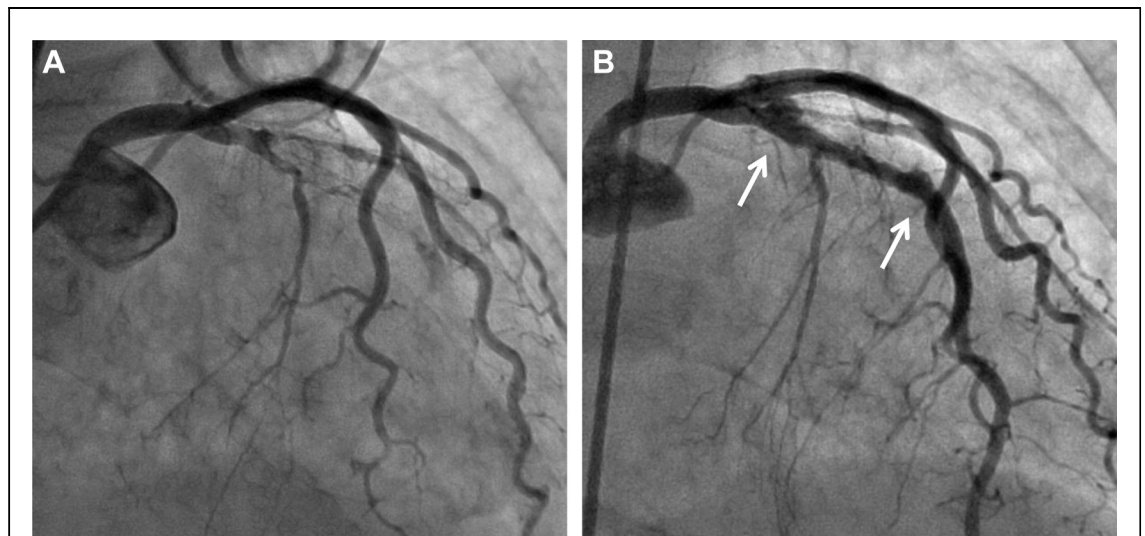
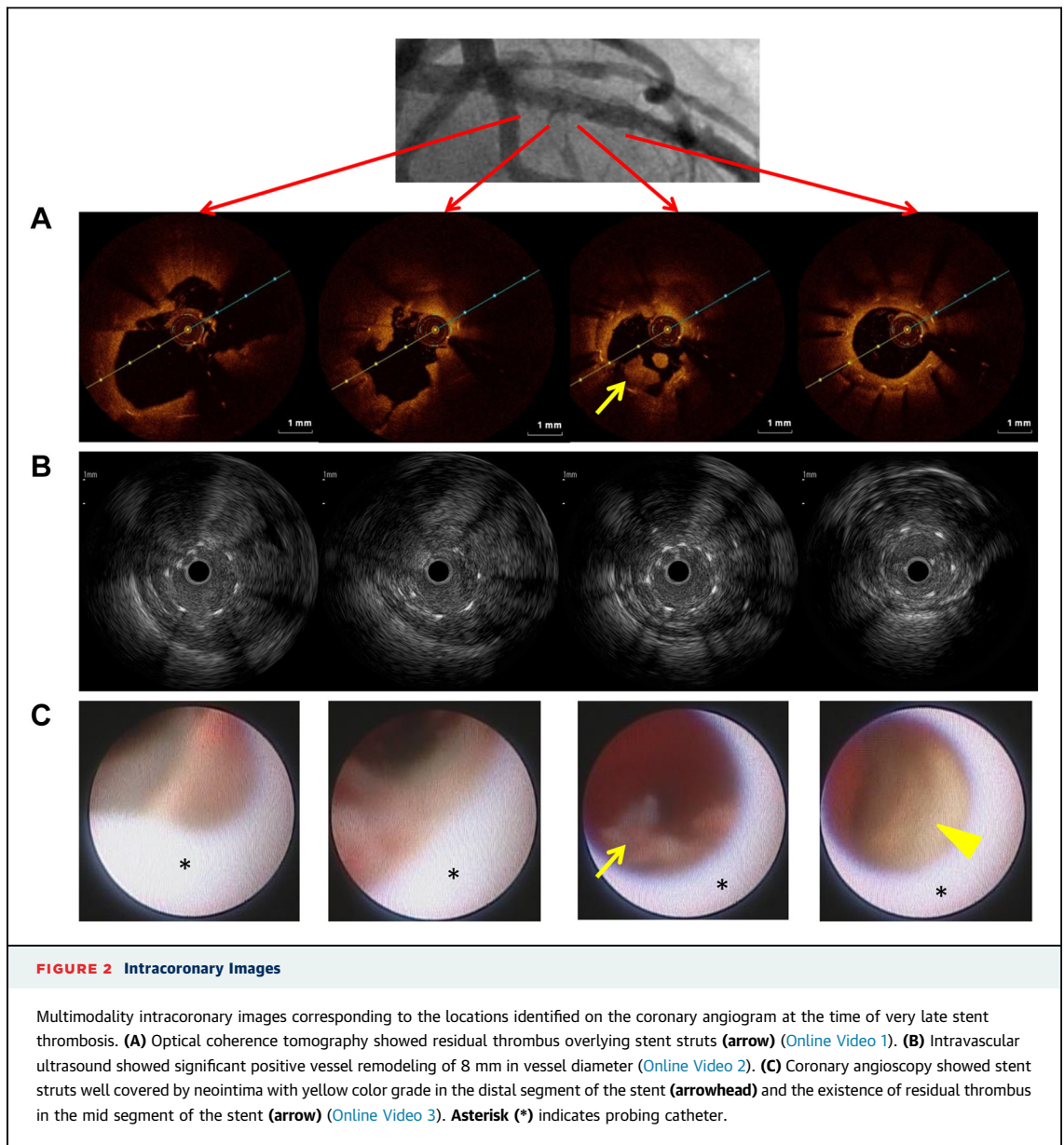


FIGURE 1 Images of Coronary Angiography

(A) Urgent coronary angiography demonstrated acute thrombotic occlusion within a sirolimus-eluting stent (3.0 mm in diameter, 28 mm in length). After aspiration thrombectomy and subsequent balloon angioplasty, coronary blood flow was successfully restored. (B) Repeat coronary angiography 1 month after development of stent thrombosis showed coronary aneurysms at the site of the proximal and distal stent edges (arrows).

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showed residual thrombus overlying the stent struts ([Figure 2A](#), [Online Video 1](#)). Intravascular ultrasound showed significant positive vessel remodeling of 8 mm in diameter and stent malapposition ([Figure 2B](#), [Online Video 2](#)). Coronary angioscopy also showed residual thrombus and stent struts well covered by neointima with yellow color grade, suggesting in-stent neoatherosclerosis ([Figure 2C](#), [Online Video 3](#)). Histological analysis of the extracted thrombus revealed a mixture of fibrin and platelet aggregates infiltrated with inflammatory cells consisting of

neutrophils and eosinophils ([Figure 3](#)). One month later, repeat coronary angiography clearly revealed the formation of coronary artery aneurysms at both the proximal and distal stent edges ([Figure 1B](#)). OCT showed malapposed stent struts at the sites of positive remodeling, whereas multiple interstrut hollows and stent struts well covered by neointima were observed at other sites ([Figure 4](#), [Online Video 4](#)).

Currently, very late drug-eluting stent (DES) thrombosis is of major concern because of the potentially catastrophic complications. On the basis

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