



A 27-Year-Old Lady with Non-atherosclerotic Spontaneous Left Anterior Descending Coronary Artery Dissection – a case report.

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ABSTRACT

Non-atherosclerotic Spontaneous Coronary Artery Dissection (NASCAD) is the term used to indicate a non-traumatic and non-iatrogenic separation of the coronary arterial wall possibly due to either an intimal tear or a bleeding of vasa vasorum, resulting in an intra-medial hemorrhage. In contrast to atherosclerotic SCAD which is limited in extent by medial atrophy and scarring, NASCAD can involve extensive lengths due to underlying arterial fragility from predisposing arteriopathies. A high degree of suspicion is needed in the proper context to plan for further evaluation with optical coherence tomography (OCT) or IVUS. Alternatively, the coronary angiography could be repeated in 4-6 weeks to detect the spontaneous healing of the dissected segment. We report a young lady who has presented with non-atherosclerotic spontaneous LAD coronary artery dissection, who has been managed with percutaneous coronary intervention after the failed conservative approach. The utility of intravascular ultrasound technology in diagnosis and management and the technically difficult nature of interventional approach in arterial dissection are highlighted. A conservative approach is preferred over revascularization strategy when appropriate.

BIOGRAPHY

Sandun Prabath has completed his MD in Medicine at Postgraduate Institute of Colombo in 2018. He has been trained in Institute of Cardiology, Colombo, as a senior Registrar and Currently in training as a Senior Clinical Fellow in University Hospital of Southampton, United Kingdom. Sandun has published several papers and currently actively involved in clinical research and audits.



International Conference on


CARDIOLOGY

February 07-08, 2022 | Paris, France

Presenter Name: Sandun Prabath.

Mode of Presentation: Oral.

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