

Undeployed and uncrushed coronary stent in the proximal region of the normal left anterior descending artery revealed four years after intervention

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Intracoronary undeployed stent embolization is a rare and devastating complication of percutaneous coronary intervention (PCI). This unexpected complication can lead to coronary thrombosis, myocardial infarction, cardiogenic shock and even death. Stent embolization or misplacement has been reported in 0.3% to 1.2% of PCIs in the literature [1, 2]. Several urgent retrieval and surgical management methods have been described, but short- and long-term outcomes remain unknown. We describe an unusual case of an undeployed coronary stent in a normal left anterior descending artery (LAD) revealed 4 years after coronary intervention. A 62-year-old man was admitted to our hospital with chest pain. He had

a history of coronary artery disease with previous percutaneous coronary angioplasty and stenting in both the right coronary artery (RCA) and the left circumflex artery (LCX) 4 years ago. He had been treated with dual antiplatelet therapy for 1 month after coronary intervention, then clopidogrel therapy was withheld and acetylsalicylic acid therapy continued. After the first evaluation, left heart catheterization was planned. Coronary angiography showed an undeployed and uncrushed coronary stent in the proximal region of the normal LAD, and non-critical lesions in the RCA and LCX (Figure 1 A, B). No further intervention was performed because distal coronary flow was normal and there was no critical stenosis.

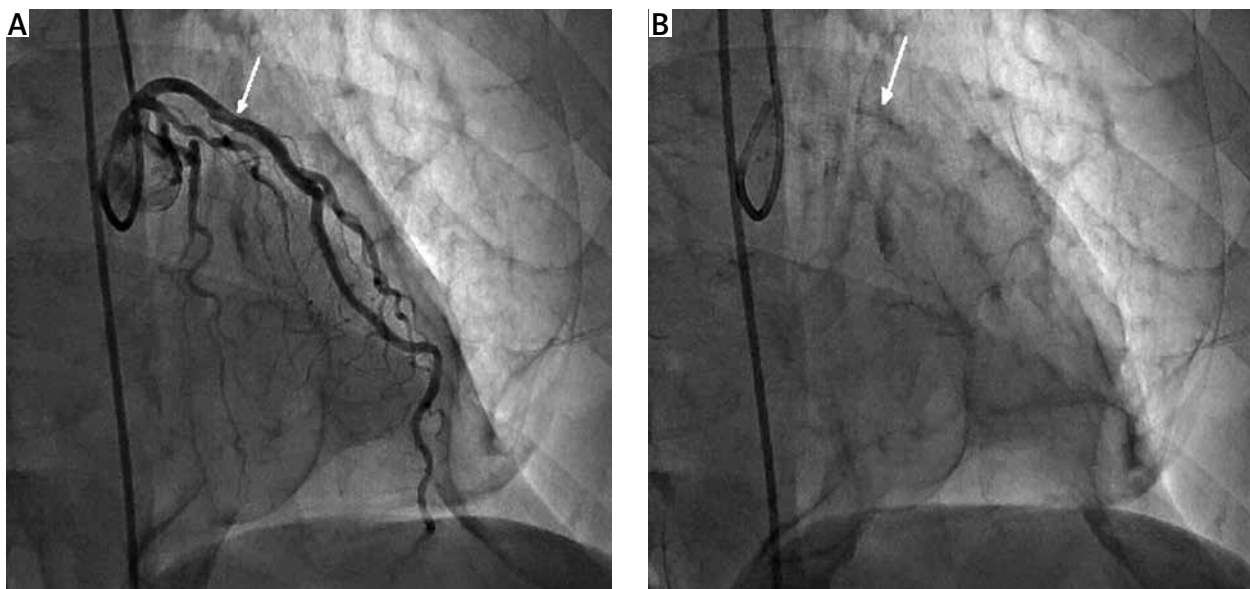


Figure 1. A, B – Arrows show the undeployed coronary stent in the proximal region of the LAD

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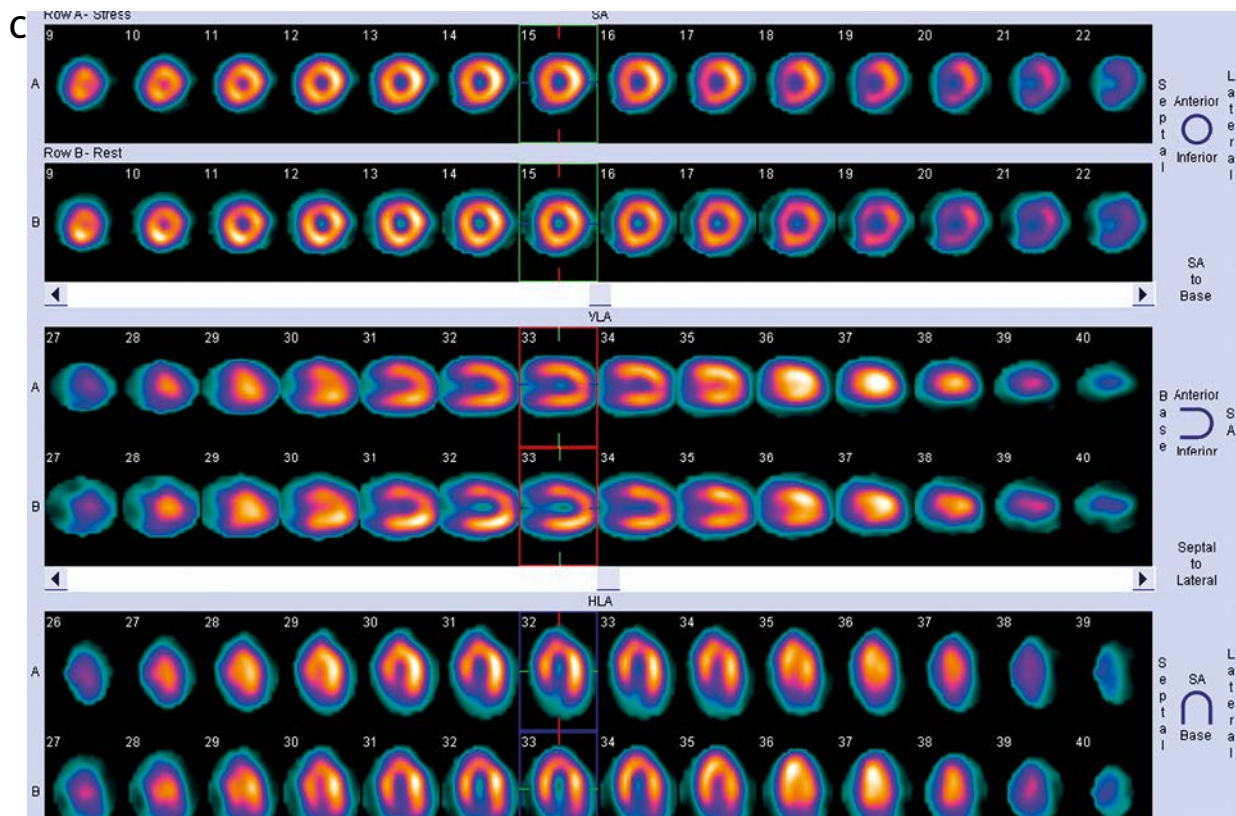


Figure 1. C – Myocardial perfusion scintigraphy showed no ischemia

Myocardial perfusion scintigraphy (MPS) was planned to evaluate ischemia. Myocardial perfusion scintigraphy showed no ischemia (Figure 1 C). Several retrieval methods and crushing techniques have been described in the literature [1, 3]. Conservative treatment of the embolized stent after unsuccessful crushing has also been reported previously, but this is the first report of an undeployed and uncrushed embolized coronary stent in the proximal region of a normal LAD [4].

Conflict of interest

The authors declare no conflict of interest.

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