Acute Ischemic Stroke after Primary PCI- Intra-coronary Thrombolysis in Young

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Clinical Presentation

28-years-male chest pain for 2 hours.

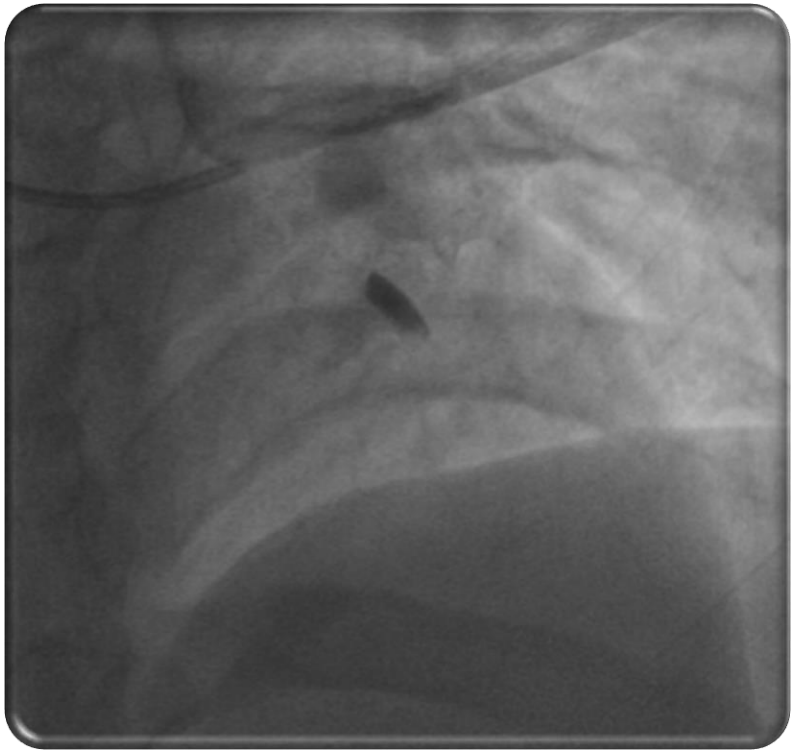
ECG – STEMI,AWMI.

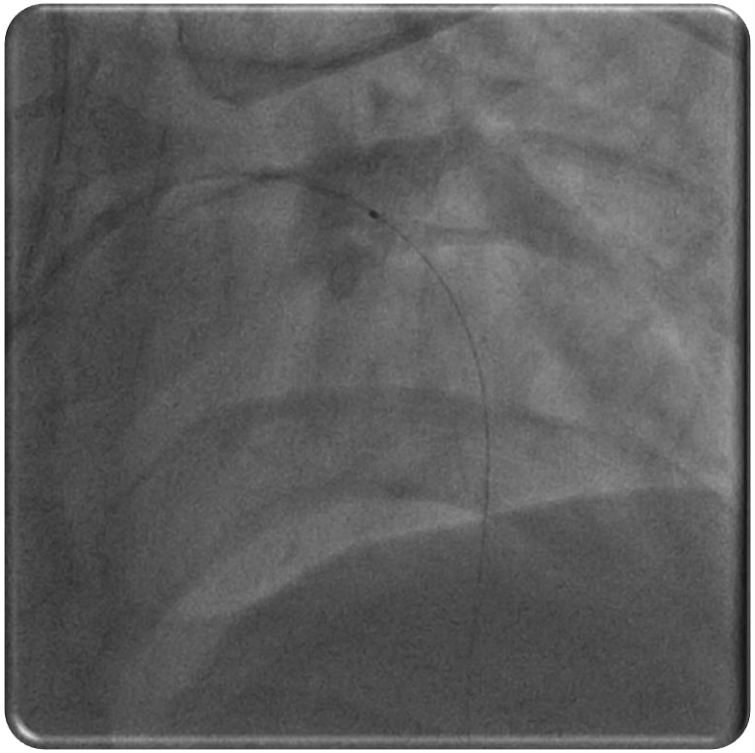
Management Decision – Primary PCI.

Cath LAB – CAG – Large thrombus in proximal LAD.

Patient's father request for not to implant stent in view of young age.

Coronary Angiography & Thromboaspiration





Large occlusive thrombus in the proximal LAD with embolization into distal segment of LAD

No improvement of flow despite thrombo-aspiration

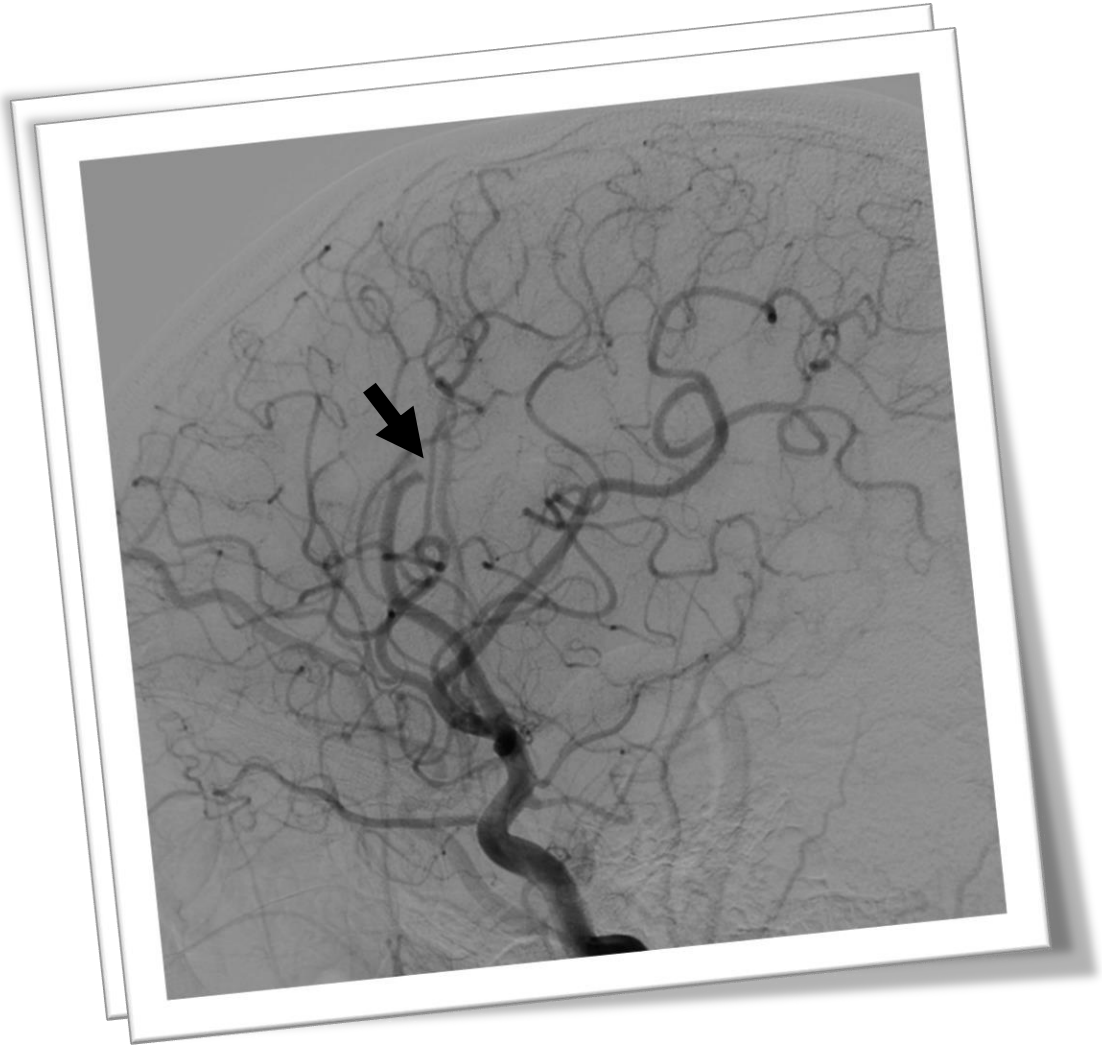
Intra-coronary Thrombolysis

IC thrombolysis – Tenectaplase after few runs of thrombo-aspiration.

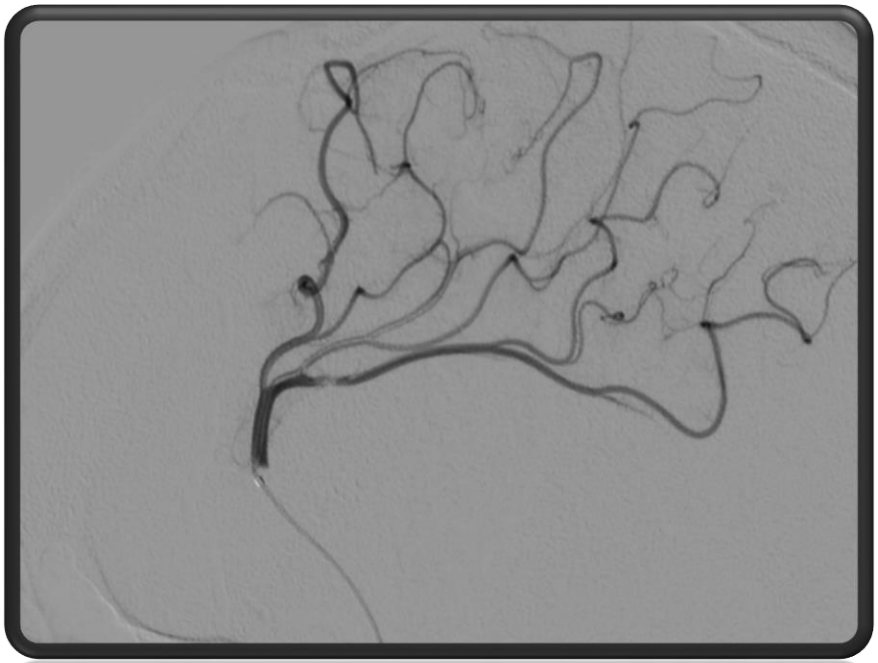
5mg Into the distal LAD and 5mg into the proximal LAD.

Patient coughed – Sudden onset of dense right hemiplegia [Power grade 0] on-table.

Embolization of thrombus into the left MCA



Intra-arterial Thrombolysis & course in the Hospital



Intra-Arterial cerebral thrombolysis using Tenectaplase 2.5 mg selectively into the MCA using 'Cantata' Catheter.

Patient recovered Grade V power on –table.

Complete relief of chest pain.

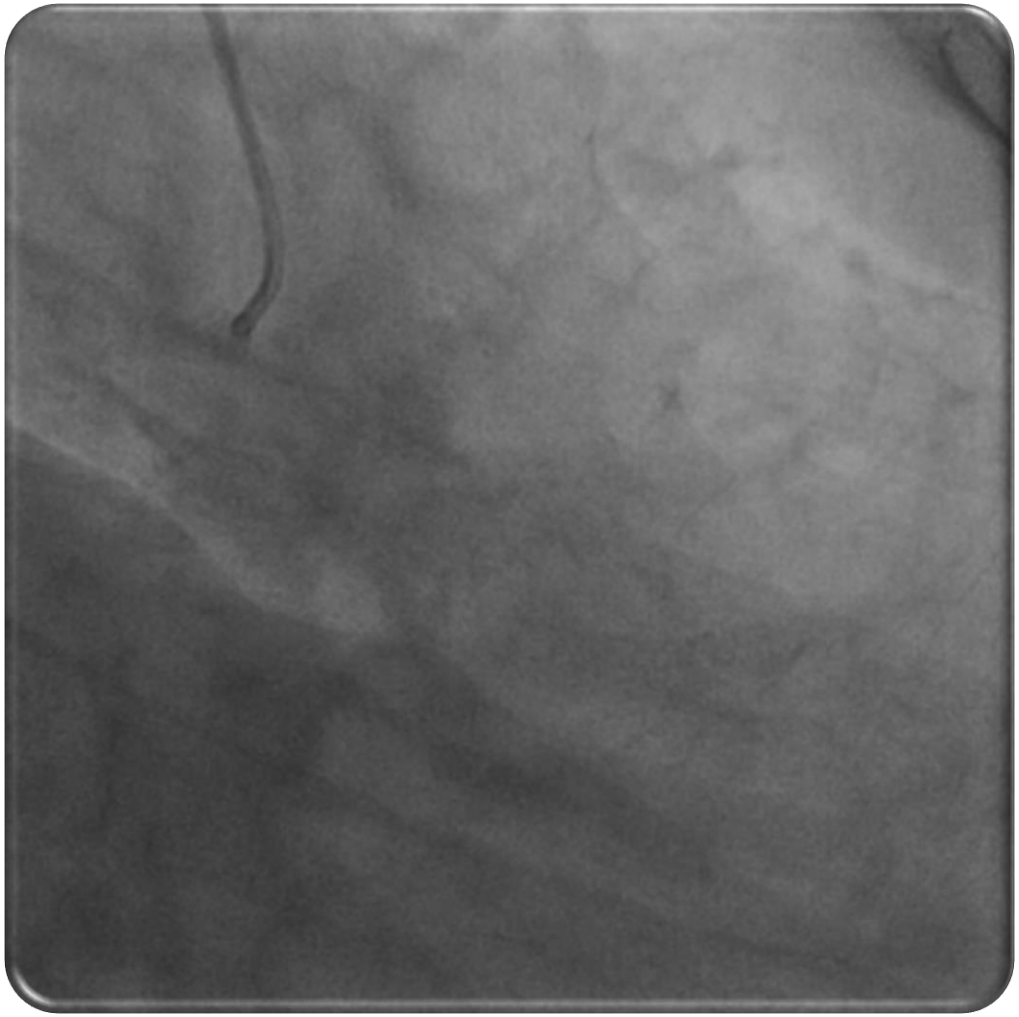
Post procedure CT scan Brain – Normal.

Discharged uneventfully and 6-month follow-up Negative TMT.

Optimal Medical Management with DAPT.

Hyperhomocysteinaemia with deranged lifestyle disease [Night shifts at BPO]

Intra-coronary Thrombolysis and Aspiration



Intra-Coronary Thrombolysis using Tenectaplase lead to dissolution of 90% thrombus with TIMI 3 flow of the LAD.

Take Home Message

Peri-procedural stroke is an iatrogenic complication.

Incidence - 0.08%–0.40%.

Sheath still in-place, cerebral angiography should be done quickly.

This can better define the thrombus morphology and extend and degree of occlusion.

Rapid administration of IA thrombolysis.

If it can be rapidly diagnosed and acted upon, a short event-to- treatment time can be achieved.

HM
Heart and Mind
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CASE REPORT

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On-table acute ischemic stroke during primary PCI-double intra-arterial thrombolysis in a young patient: Uncommon complication and "double-edged sword" management

Thank you!!