

Bir Koroner Arter Ektazisinin Anjiyografik Görünümü

UNIQUE APPEARANCE OF A CORONARY ECTASY

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A 60 year old man was admitted to our hospital with severe one hour typical chest pain. He has been smoking for 30 years one packet a day. He had not any other coronary artery disease risk factor. The ECG showed normal sinus rhythm and ST-T changes in leads V1-V6. The chest X-Ray showed normal cardiac silhouette. There was no pathological finding on biochemical and haematological blood tests except low HDL and slightly elevated triglyceride level (TG) (Total cholesterol: 190 mg/dl, LDL:110 mg/dl, HDL: 30 mg /dl, TG: 250 mg/dl). On physical examination: Blood pressure was 120/85 mmHg and heart rate was 78/minute/regular. There was not any pathological finding on cardiovascular and the other system examination.

At the 12th hour, a slight elevation was detected in cardiac specific troponins. We performed coroner angiography. There was not any luminal narrowing on coronary angiography but, 1.5-2 fold luminal dilatation which previously described "coronary ectasy" was detected on the 1/3 proximal portion of the left anterior descending coronary artery (LAD). Especially on the left lateral projection, opaque substance formed as an unique appearance of an inflated PTCA balloon and this continued until the 120th frame (Figure 1 and Figure 2). Any lesion protruding into the arterial lumen and coronary arterial dissection excluded by intravascular ultrasonography. Pathogenesis of acute coronary syndrome in our patient was unclear. But severe blood stegnation in the ectatic segment of LAD and thrombus formation and coronary slow flow due to microvascular atherosclerotic disease may explain the pathogenesis of the acute coronary syndrome.

Keywords: Coronary ectasy, pseudo balloon appearance, ischaemia



Figure 1. Appearance of coronary ectasy in proximal of the Left Anterior Descending Coronary Artery.

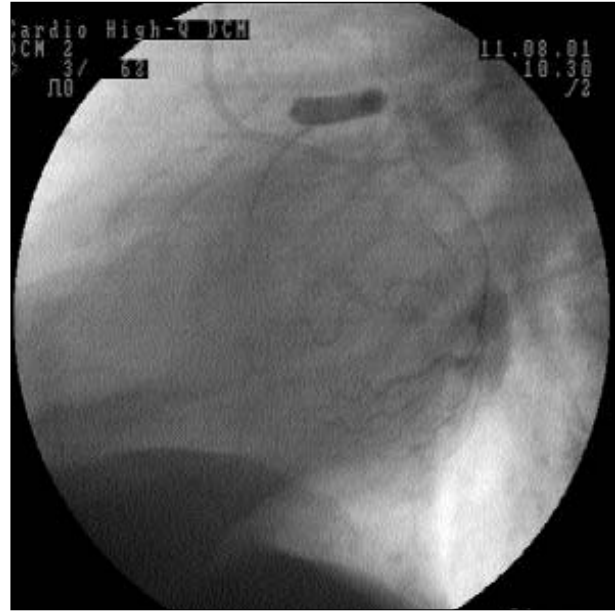


Figure 2. Inflated balloon appearance in the proximal portion of the Left Anterior Descending Coronary Artery.

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