

18th Annual Cardiologists Conference

June 19-21, 2017 Paris, France

Spontaneous coronary artery dissection (SCAD): Overview, summary and literature review

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Spontaneous coronary artery dissection is a rare cause of acute coronary syndrome in young female in reproductive period; the mechanism is completely different from common causes of coronary artery atherosclerotic disease. It has been reported that there is a significant link with underline blood vessels disease like fibro-muscular dysplasia which is a rare condition affect all arteries in the body, most common affected arteries are renal and carotid artery which characterized by thickening of arterial wall leading to stenosis. Majority of patient affected were found to be female with median age 20-60 years. The risk increased significantly during pregnancy between 5 to 18%, this can be six weeks per-partum and post-partum but up to 18 months also reported. Extreme emotional stress and physical exercise like heavy lifting and valsalva type of activity participated in the cause of SCADAS as well. Connective tissue disease like Marfan syndrome, Ehlers-Danlos syndrome, systemic lupus erythematosus polyarteritis nodosa and inflammatory bowels disease can be participator factor for SCAD. The diagnosis of SCAD is a challenge and in most cases establishment of SCAD diagnosis has to be at time of coronary angiogram, intravascular ultrasound and OCT (optical coherence) tomography and IVUS intravascular ultrasound, according to coronary angiogram findings SCAD divided into three types. The management of SCAD in majority of the patients is conservative in form of aspirin, heparin, and beta-blocker and ACE inhibitor along with clopidogrel in some patients. However, revascularization by PCI and CABG is dependent on certain specific criteria. Overall long-term prognosis of SCADA is excellent but there is high risk of recurrence, interestingly recurrence in most cases involves a new coronary artery segment therefore patient with SCAD should always be counseled about the risk of recurrence of this condition.

Biography

Amjed Eljaili completed his MBBS at University of Al-Zaiem Al-Azhari, Sudan in 2010, currently practicing at Wales Deanery, UK. He attended several academic meetings, regionally and nationally, He has participated in various national work-shops and has membership with British Institute of Radiology, UK.

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