



2020

## Infected Coronary Artery Aneurysm - A Rare But Fatal Complication Of Percutaneous Coronary Intervention

Follow this and additional works at: <https://www.j-saudi-heart.com/jsha>



Part of the [Cardiology Commons](#)



This work is licensed under a [Creative Commons Attribution-Noncommercial-No Derivative Works 4.0 License](#).

### Recommended Citation

Singh, Ajit Pal and Pruthi, Harnoor Singh (2020) "Infected Coronary Artery Aneurysm - A Rare But Fatal Complication Of Percutaneous Coronary Intervention," *Journal of the Saudi Heart Association*: Vol. 32 : Iss. 2 , Article 23.

Available at: <https://doi.org/10.37616/2212-5043.1034>

This Images is brought to you for free and open access by Journal of the Saudi Heart Association. It has been accepted for inclusion in Journal of the Saudi Heart Association by an authorized editor of Journal of the Saudi Heart Association.

---

## **Infected Coronary Artery Aneurysm - A Rare But Fatal Complication Of Percutaneous Coronary Intervention**

### **Cover Page Footnote**

We acknowledge our cardiology team for all the help in management of the patient

# Infected Coronary Artery Aneurysm - A Rare but Fatal Complication of Percutaneous Coronary Intervention

Ajit Pal Singh\*, Harnoor Singh Pruthi

Capitol Hospital, Jalandhar, Punjab, India

A 43 year old male underwent successful PCI to LCX. 3 months after the procedure, he presented with NYHA class III-IV angina associated with low grade fever and reduced appetite. Biochemical parameters including complete blood count and renal function tests were normal.

coronary angiogram and could not be saved. Infected coronary aneurysms are a rare and potentially fatal complication [1] after drug eluting stent implantation [2] and may arise from contamination of cathlab equipment.

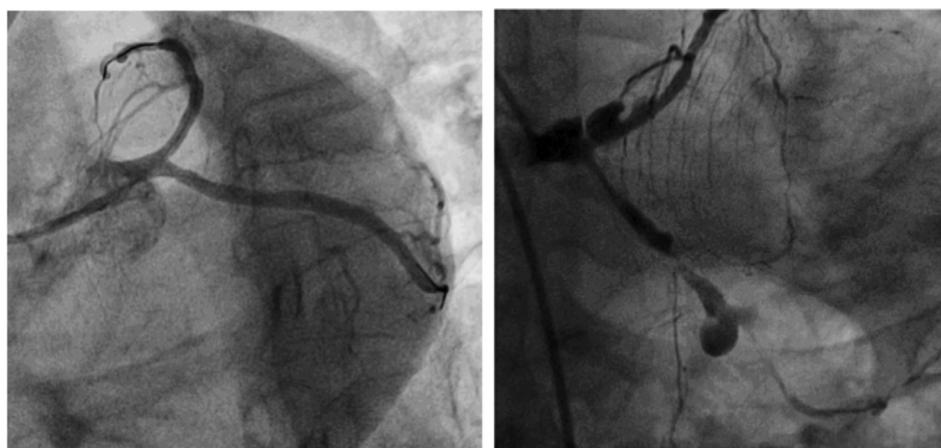


Fig. 1. Post PTCA to LCX image. Infected coronary aneurysms in Left main and LCX vessels seen 3 months after index procedure.

ECG showed ST segment depression in lateral leads. Echocardiography showed lateral wall hypokinesia with moderate mitral valve regurgitation. Coronary angiogram revealed large mycotic aneurysms in LAD and LCX coronary arteries (Fig. 1). Blood culture showed growth of *Pseudomonas aeruginosa*. The patient developed refractory pulmonary edema few hours after the

## References

- [1] J Cardiovasc Comput Tomogr. 2019 Jan 26. pii: S1934-5925(18) 30446-30455. doi: 10.1016/j.jcct.2019.01.018. [Epub ahead of print] Infected ("Mycotic") coronary artery aneurysm: Systematic review. Restrepo CS1, Gonzalez TV2, Baxi A3, Rojas CA4.
- [2] Sinha SK, Aggarwal P. TCT-767 Coronary artery aneurysm after drug eluting stenting- incidence, predictors and outcome- a single centered study. J Am Coll Cardiol 2018 Sep; 72(13 Supplement):B306. <https://doi.org/https://doi.org/10.1016/j.jacc.2018.08.1995>.

Received 24 April 2020; revised 6 May 2020; accepted 7 May 2020  
Available online 22 July 2020

\* Corresponding author.  
E-mail address: [ajitpal11@yahoo.com](mailto:ajitpal11@yahoo.com) (A.P. Singh).

