Jornadas SOLACI
Montevideo, URUGUAY

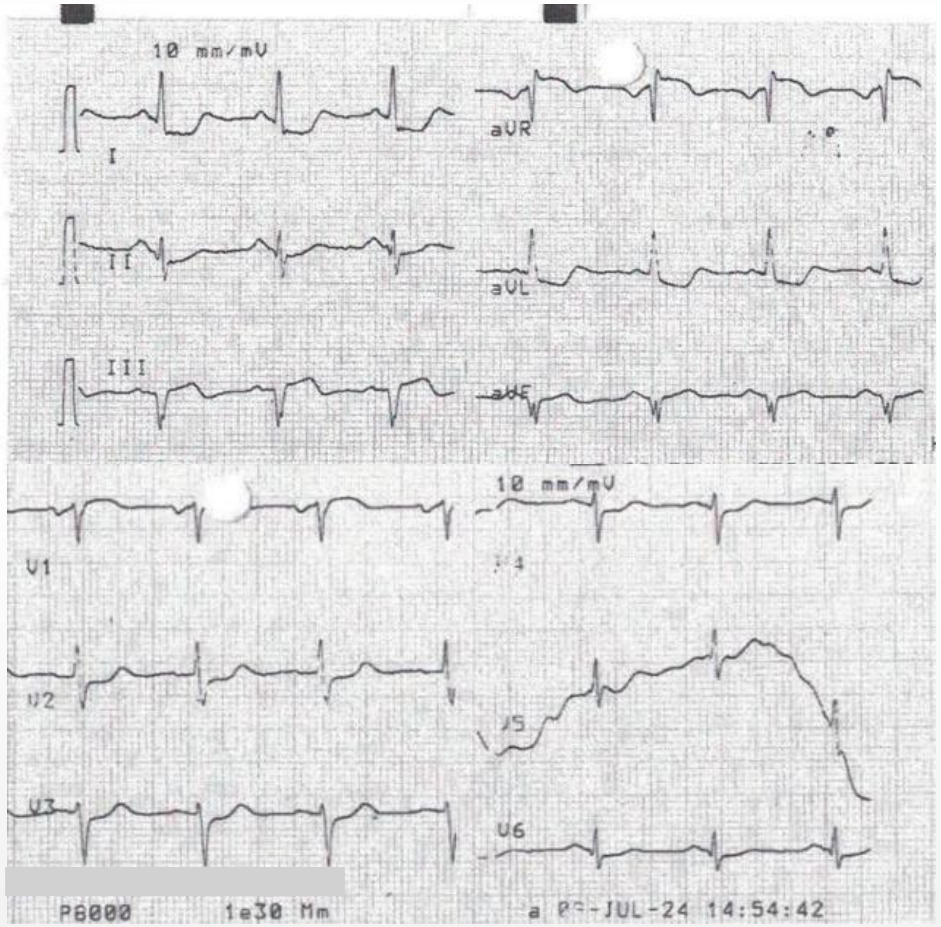
CardioSUC 2025
41º Congreso Uruguayo de Cardiología
El paciente en el corazón de cada decisión

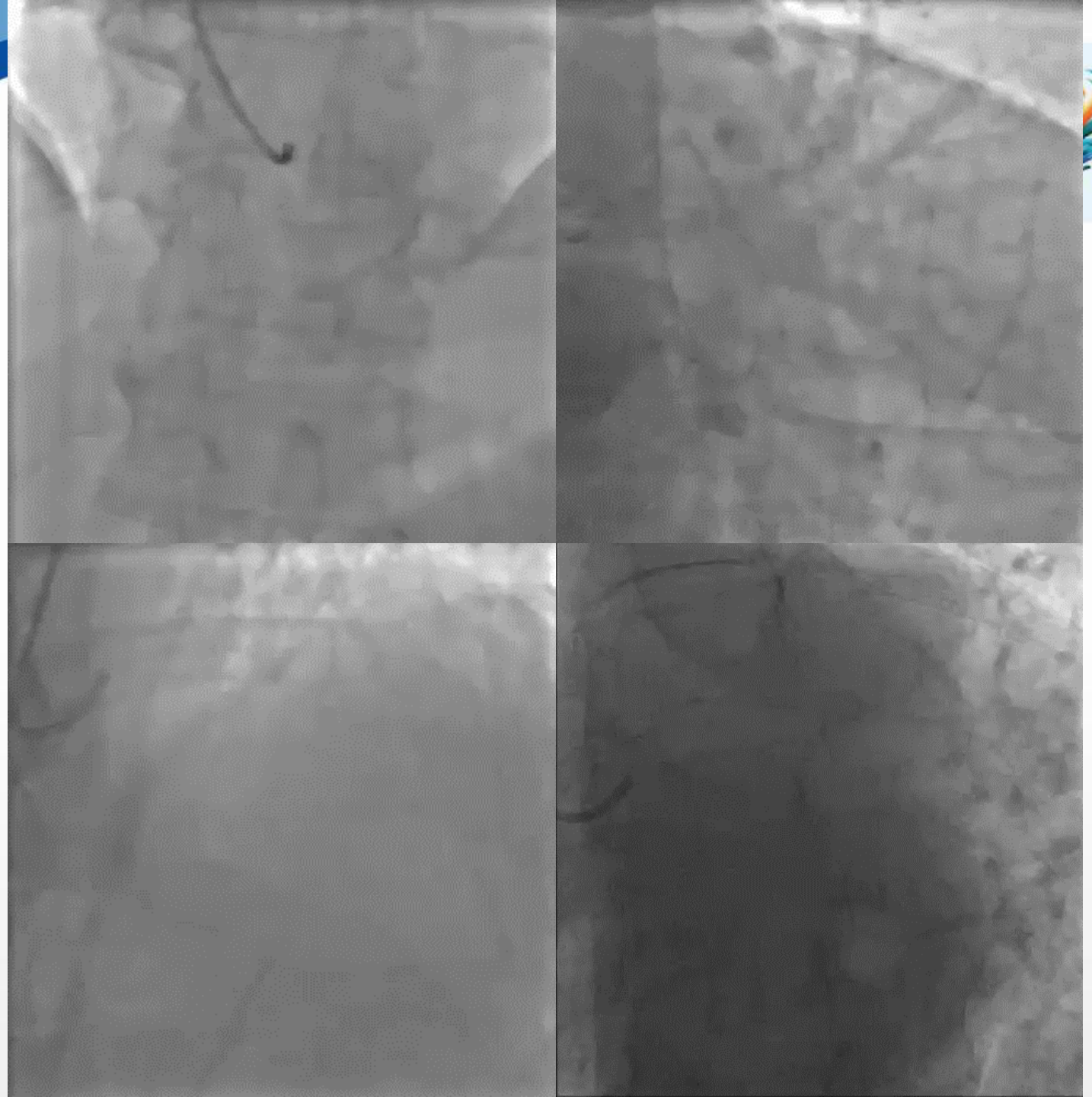
Caso Clínico

Dra. Lucía Rampa

Mayo 2024

- SM, 79a
- **AP:** HTA, DMIR, ERC, Hipotiroidismo (T4).
- **AEA:** SCA sin ST alto riesgo 2023. CACG: TCI+3V. Se niega a CRM.
- **EA:** angor y DE CFII 2m. Reitera DxTx de reposo+SNV.
- **EF:** RR 95cpm, sin soplos, PA: 120/70. **PP:** normal.
- Hb: 11,9 g/dl, Urea: 0,55 g/l, Creatininemia: 1,42 mg/dL FG 46ml/min/1,73m^2
- Troponinas I: 689 ng/L y 1277 ng/L (2-100 ng/L)
  - **ETT:**
    - hipertrofia concéntrica leve VI
    - hipoquinesia anterolateral e inferior basal
    - FEVI 47%.





STS SCORE

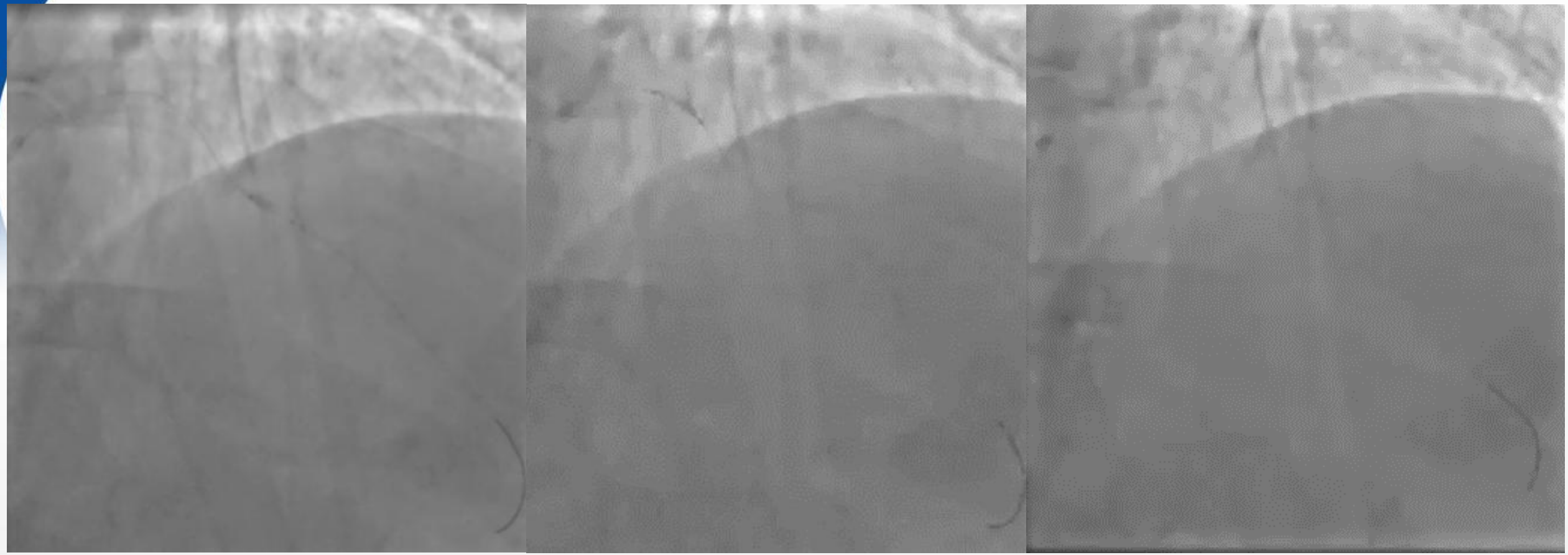
Procedure Type: Isolated CABG

PERIOPERATIVE OUTCOME	ESTIMATE %
Operative Mortality	2.5%
Morbidity & Mortality	11.6%
Stroke	1.12%
Renal Failure	4.99%
Reoperation	1.76%
Prolonged Ventilation	6.1%
Deep Sternal Wound Infection	0.791%
Long Hospital Stay (>14 days)	10.9%
Short Hospital Stay (<6 days)*	23.1%

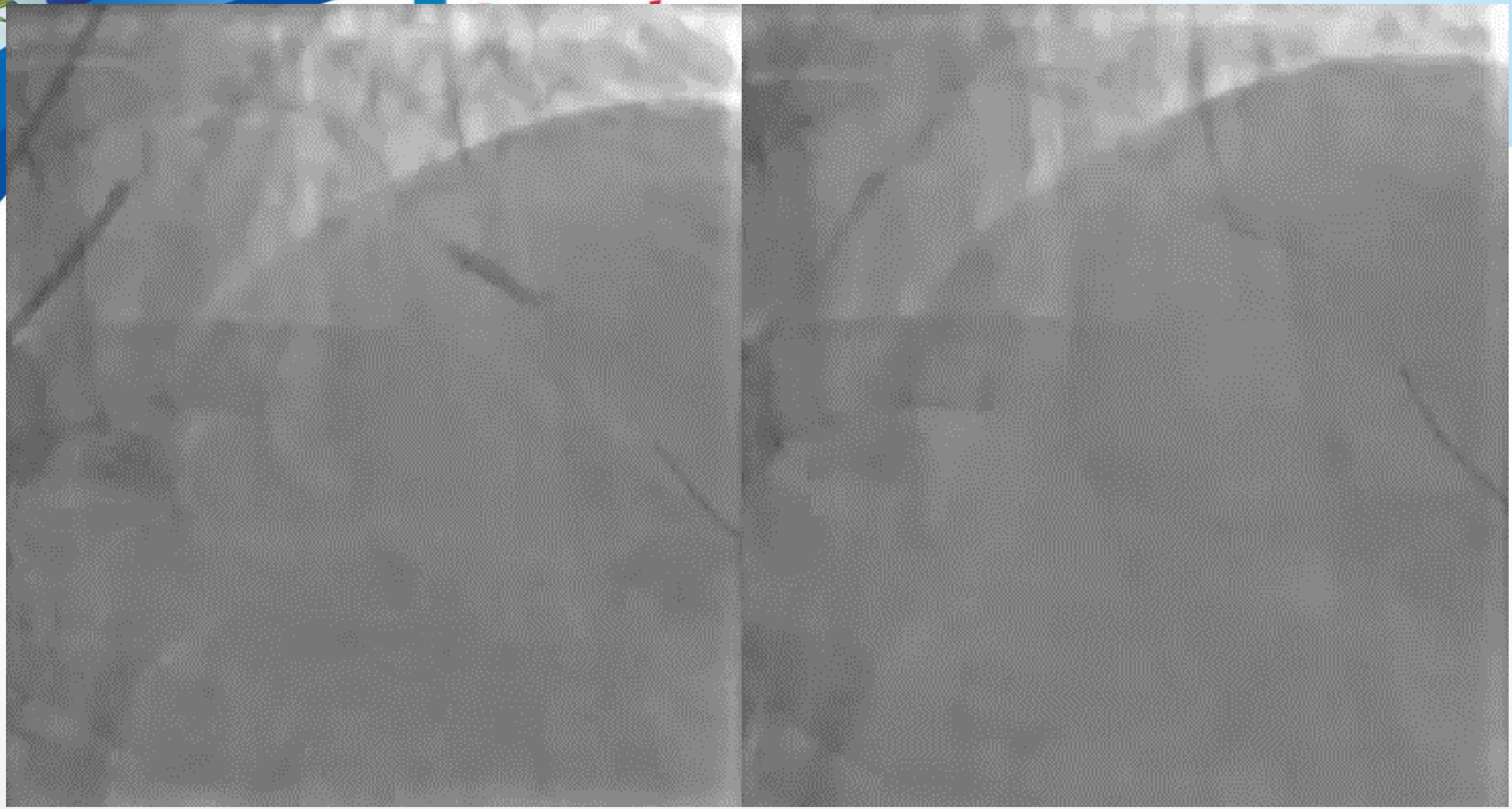
*higher values reflect a better outcome

SYNTAX SCORE: 29

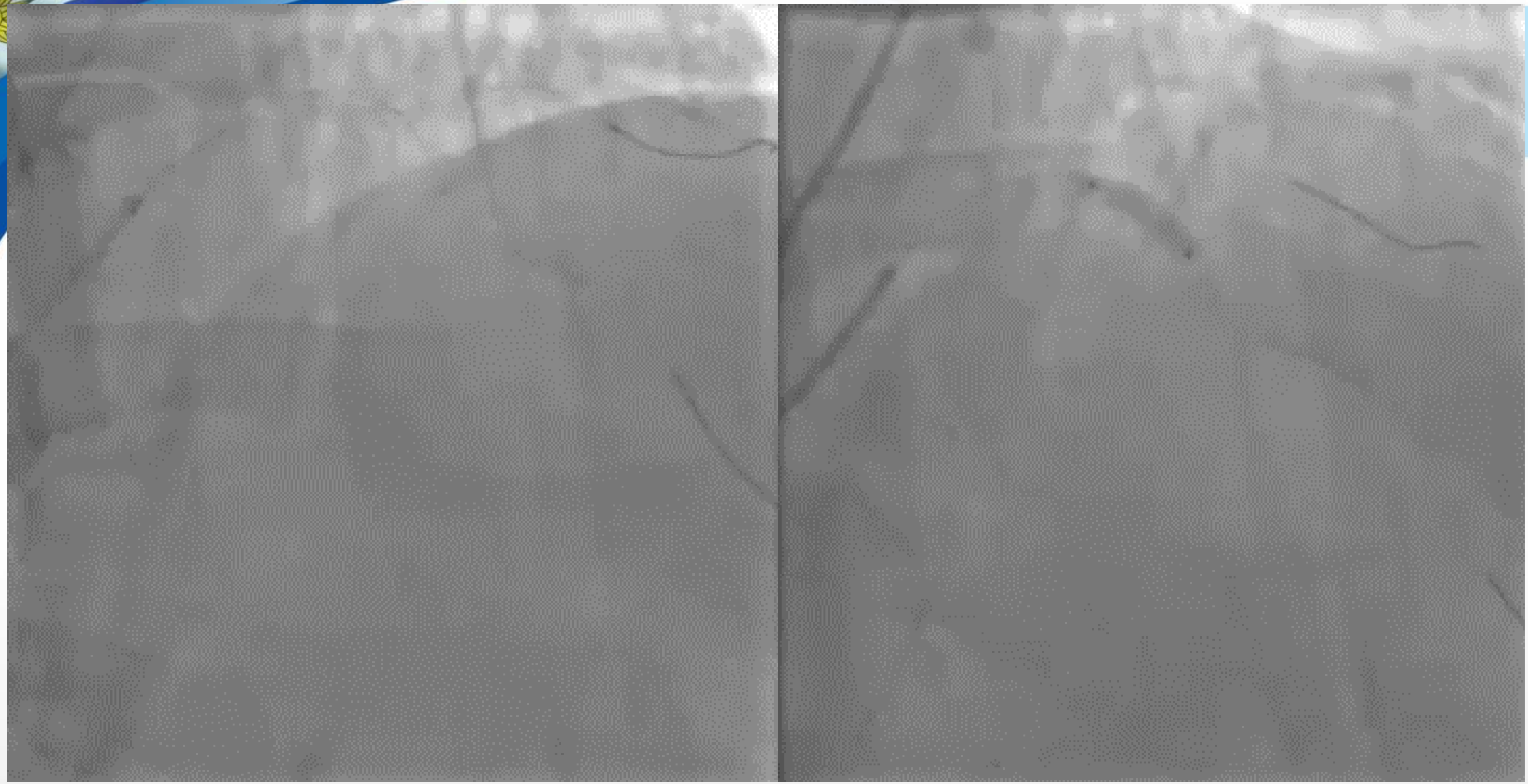
Primer vaso a tratar: ADA



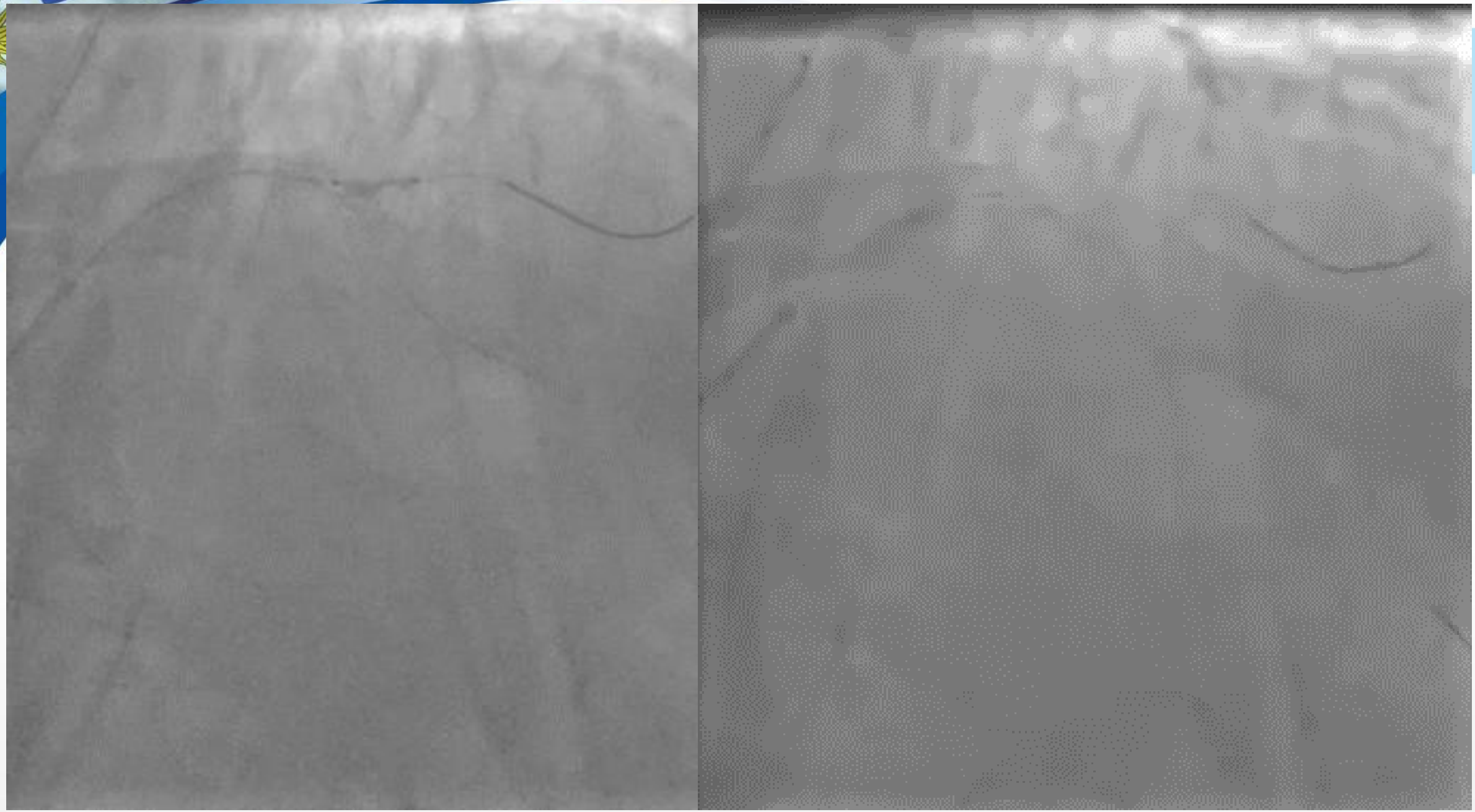
Balón Mini Trek 2,0-12 mm



Stent XIENCE PRO S 3.0-15

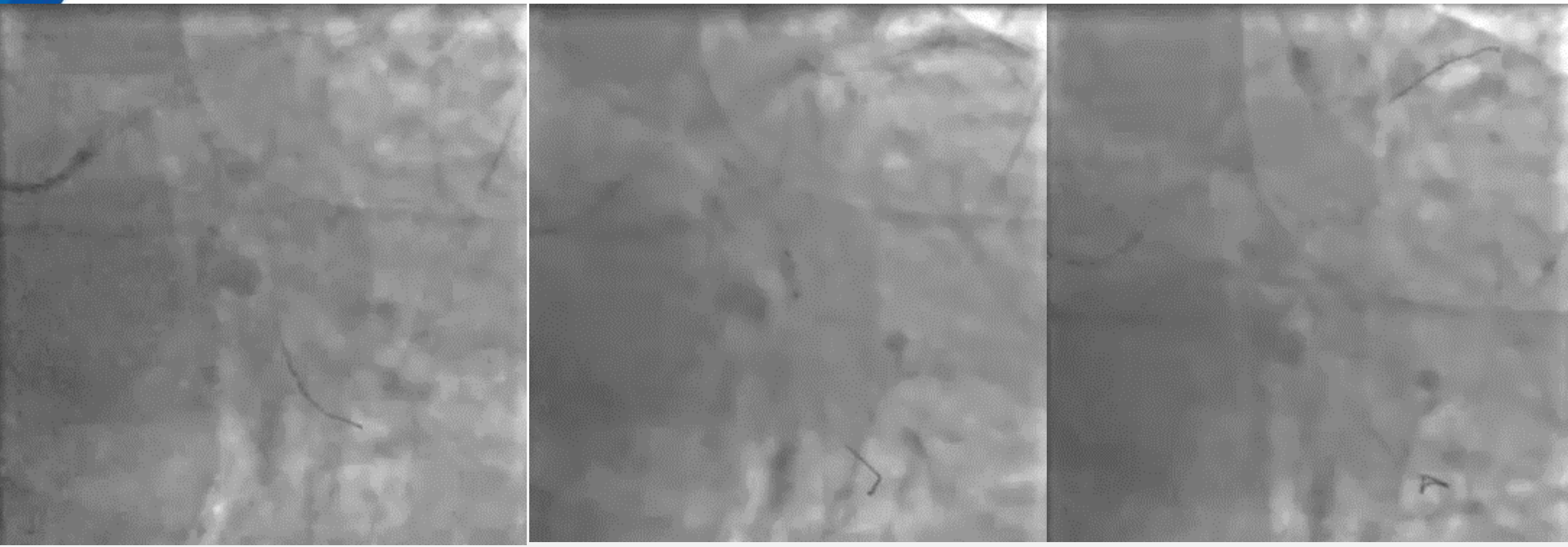


Stent XIENCE PRO S 4.0-18



Mini Trek (Abbot) 2.0-12

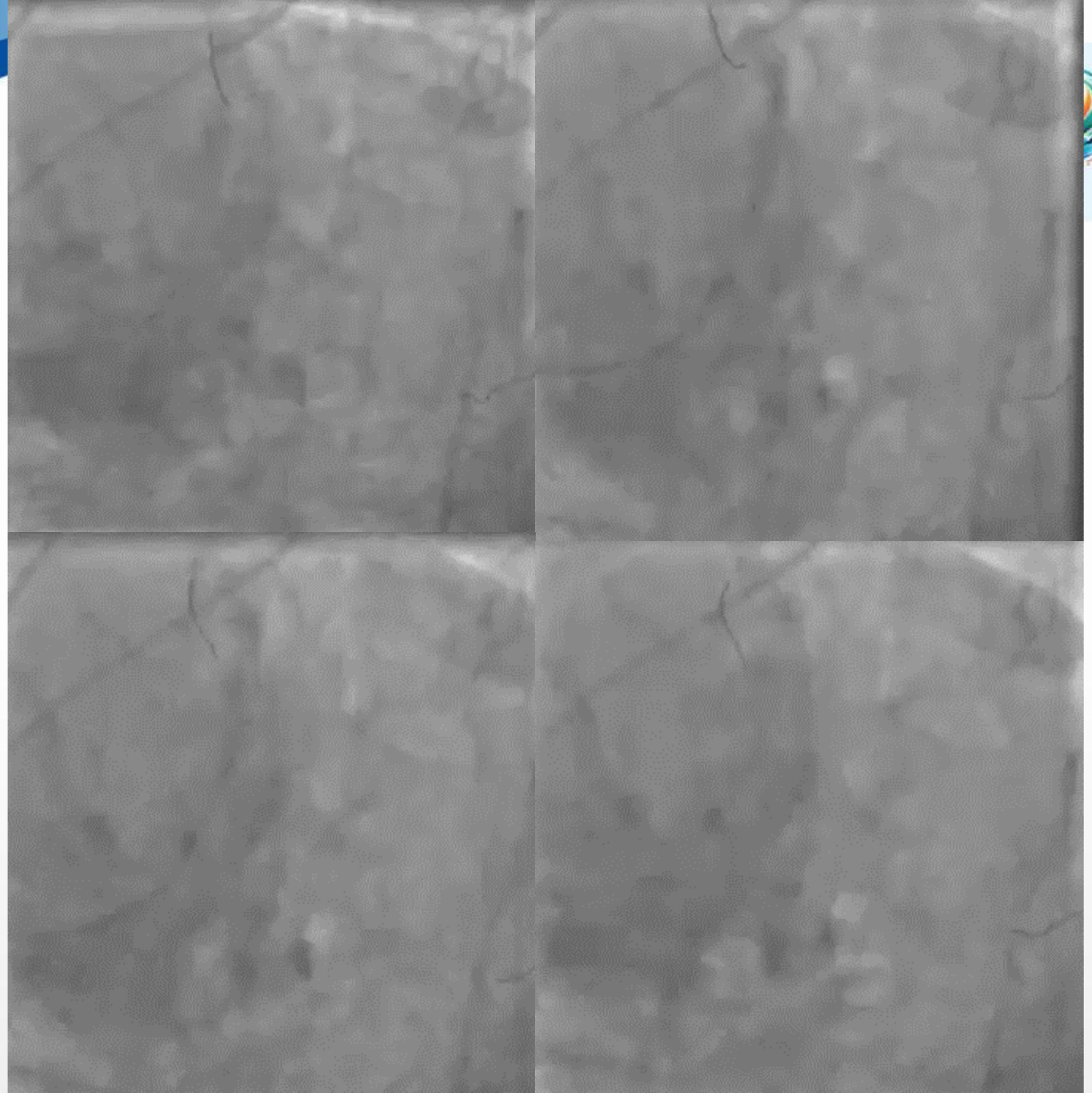
ATC DE MG



Stent XIENCE PRO S 2.75-8

ATC DE TCI

POT: Balón Europa NC 4.0-5



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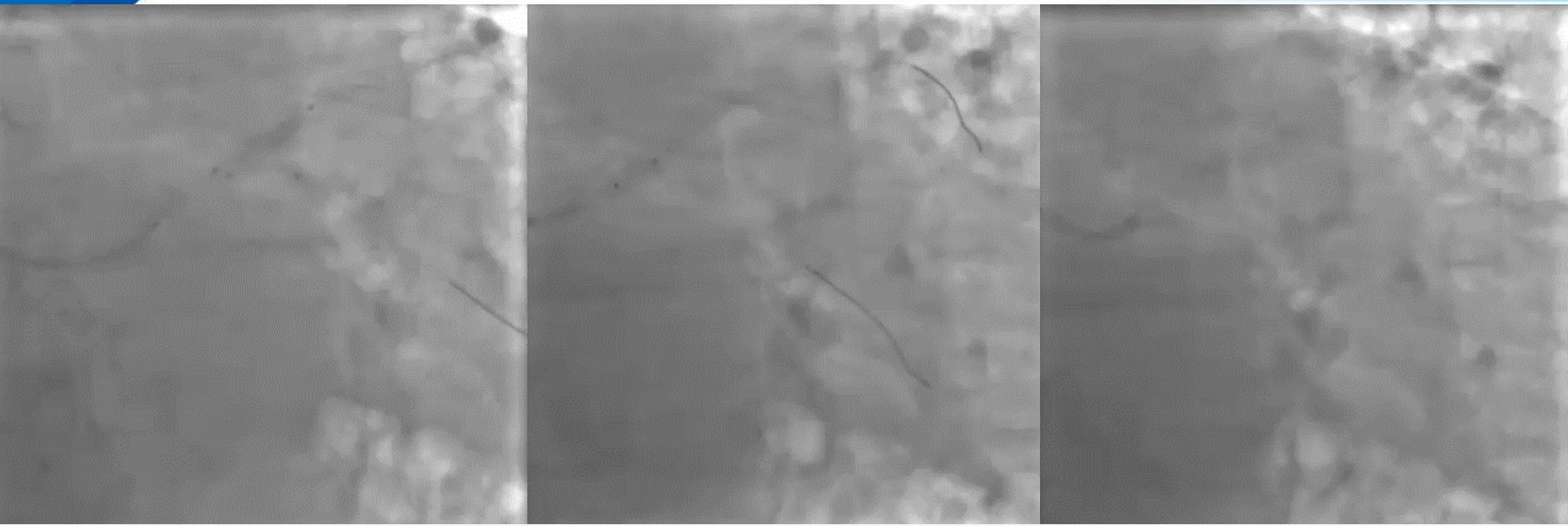
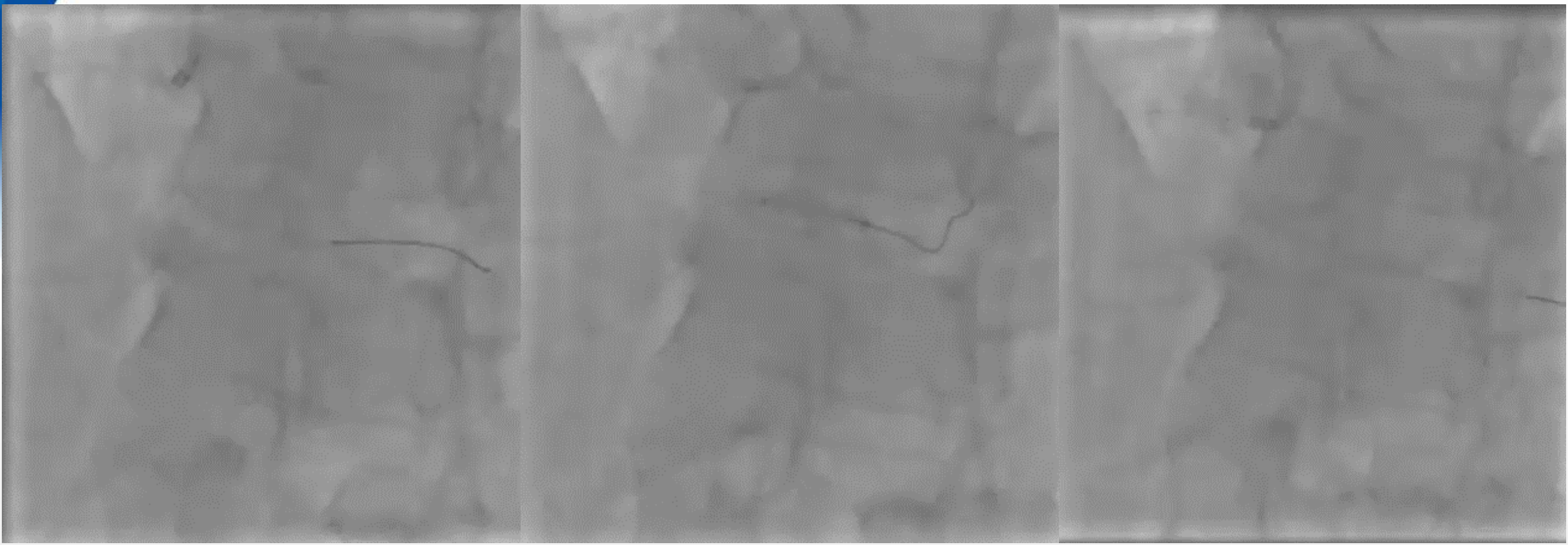
Stent XIENCE PRO S 4.0-23



KB: balón Trek 3.0x15mm ACX y 3,5x23mm ADA

POT: balón Trek NC 4.5x8

ATC DEL RAMO PL



Stent XIENCE PRO S 2.5x18mm

Evolución:

- Buena, sin complicaciones
- Asintomático en lo CV, sin elementos de IC
- Se otorga el alta a las 48 hs
- Asintomático a los 3 meses
- Spect negativo para isquemia a los 2 meses

- <u>Tratamiento:</u>
  - Ranitidina 150 mg c/12 hs
  - AAS 100 mg/día
  - Clopidogrel 75 mg/día
  - Losartan 50 mg c/12 hs
  - Insulina NPH 30/15/15 U
  - Levotiroxina 50 mg/día
  - Atorvastatina 80 mg/día

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GRACIAS !