

# Coronary artery disease – the silent killer

## Patient information

- 43 year old male, smoker with high cholesterol & triglycerides & a strong family history of Coronary Artery Disease.
- He had no symptoms and came for routine medical checkup.
- Exercise stress test was negative for ischaemia.
- However, MSCT Coronary Calcium score was 53 and MSCT Coronary Angiogram showed complete occlusion of one of the major heart arteries.

## MSCT Coronary Angiogram Results:

Left Main: Normal

LAD: 100% occlusion in mid LAD

LCx: Normal

RCA: 20% calcified plaque in proximal RCA

The patient was then advised to undergo PTCA/  
Stent to the mid-LAD,

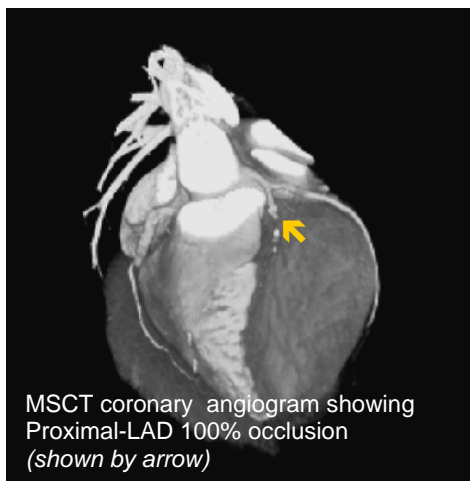
## Findings on invasive Coronary Angiography:

Left Main: Normal

LAD: 100% occlusion of the mid LAD

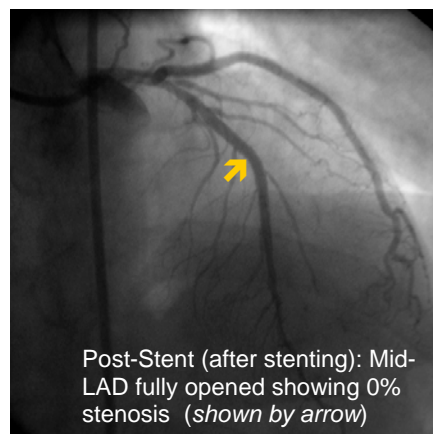
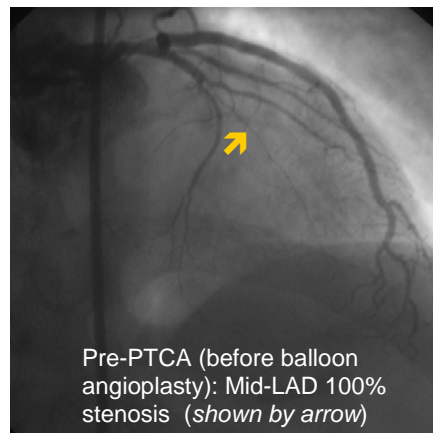
LCx: Normal

RCA: No significant stenosis



## PTCA / Stenting Procedure

The mid-LAD 100% occlusion was successfully opened up and stented.



## Teaching Points

- Coronary Artery Disease can present in many ways. Most commonly it presents as Left sided chest pain or discomfort with or without difficulty in breathing on exertion.
- The accuracy of the exercise stress test is approximately 60%, which means that 40% of patients with Coronary Artery Disease will actually have a normal exercise stress test.
- As shown in this case, the results of the MSCT Coronary Angiogram corresponded exactly with the findings of the invasive Coronary Angiogram done during PTCA/Stenting.
- As shown in the following chart, only 10% of heart patients have typical chest pain, whilst 20% have atypical chest pains as in this case. Another 70% present initially as heart attack or sudden death without history of previous chest pain.

## What are the first signs or symptoms of heart disease?

