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A case of evaluation of vulnerable plaque with Multidetector-row computed tomography after intensive statin therapy

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A case was 75 years-old man who was consulted our hospital for ECG abnormality. With Cardiac Multidetector-row computed tomography (MDCT), the plaque was detected that had a density of 38 Hounsfield units (HU), positive remodeling and spotty calcification in proximal segment of the left anterior descending (LAD) coronary artery. With Cardiac angiography (CAG), the lesion showed Type B2 morphology. Considering that lesion as vulnerable plaque, the patient was given intensive statin therapy (rosuvastatin 5mg daily) for 3 weeks. LDL-Cholesterol has decreased from 88mg/dl to 57mg/dl. MDCT after three weeks of intensive statin therapy showed the elevation of CT density (66HU) and improvement of positive remodeling. IVUS also showed intermediate plaque. MDCT is a useful strategy for evaluating the effect of intensive statin therapy. This case suggests that vulnerable plaque may be stabilized for only three weeks with intensive statin therapy.