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Three cases of acute coronary syndrome with essential thrombocythemia

We have treated 3 cases of acute coronary syndrome with essential thrombocythemia (ET) which is rare hematological disorder. Case 1: 70Y/0 male He had received chemotherapy for 5 years to control ET and was diagnosed with unstable angina. His platelet count was reduced up to 600000/mm³. He was performed percutaneous coronary intervention (PCI) to 90% stenosis with thrombi at segment 1 using bare metal stent without complications. Case 2: 65Y/0 female She was diagnosed with ET but rejected hematological therapy and her platelet count was more than 1200000/mm³. She had acute myocardial infarction and received PCI to occluded left anterior descendent artery (LAD) but acute occlusion was occurred. She was performed re-PCIs and treated with PCPS to save her life but died of general thrombosis. Case 3: 61Y/0 male He had received chemotherapy about 2 years ago only to fail to control ET. He felt chest pain and then cardiac arrest was recorded. He was diagnosed with acute myocardial infarction after successful cardiopulmonary resuscitation. His platelet count was 850000/mm³. He was performed PCI to occluded LAD with IABP support and bronchial intubation and survived from severe condition. About such patients with thrombocythemia, we have to consider not only cardiac conditions but hematological complications.