Cannabis Abuse And ST Segment Elevation Acute Coronary Syndrome (ACS).

C-18

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Coronary artery disease (CAD) is primarily influenced by modifiable risk factors including smoking.The aims were to evaluate whether the use of cannabis is a risk factor of acute coronary heart disease in low-risk, young males who have had no other risk factors for CAD.MethodWe conducted an analytical series study at our institution which included 10 young males (under 32 years) with history of cannabis abuse and no other risk factors for CAD on history, laboratory and physical exams who presented with ACS . This analytical series was conducted over a period of 6 months.ResultsThe mean age was 28.8 years. The average time of onset of acute MI symptoms was within 3 hours after last cannabis use All patient underwent Left heart catheterization within 30 minutes of presentation. In 5 individuals, the left anterior descending coronary artery was occluded, making it the most common artery involved, followed by 2 individuals with right coronary artery and 1 individual with left circumflex involvement. 2 individuals had triple vessel involvment.Most cases were managed by PPCI of the culprit artery with Drug eluting stents.ConclusionCannabis contains compounds like tetrahydrocannabinol (THC) and cannabidiol(CBD) that interact with receptors in the body, potentially impacting cardiovascular health.CB1 activation linked to atherosclerosis progression and CB2 receptor activation might trigger tissue damage .As the use of synthetic cannabinoids increases, further research into these compounds is needed to explore their rapid detection on standardized assays and their hazardous effects on heart.