



Coronary Slow Flow Phenomenon (CSFP) Manifest as Acute Coronary Syndrome – Case Report

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Introduction

Coronary slow flow phenomenon is a angiographic entity characterized by delayed progression of the injected contrast through the coronary arteries, without any flow limiting lesions incidence is 1.7% of all Coronary Angiograms.

This can manifest as myocardial ischemia, life threatening arrhythmias, sudden cardiac death, recurrent ACS.

This CSFP may be primary, secondary. Secondary causes are coronary artery ectasia, coronary spasm, valvular heart disease, connective tissue disorder etc.

Case Report

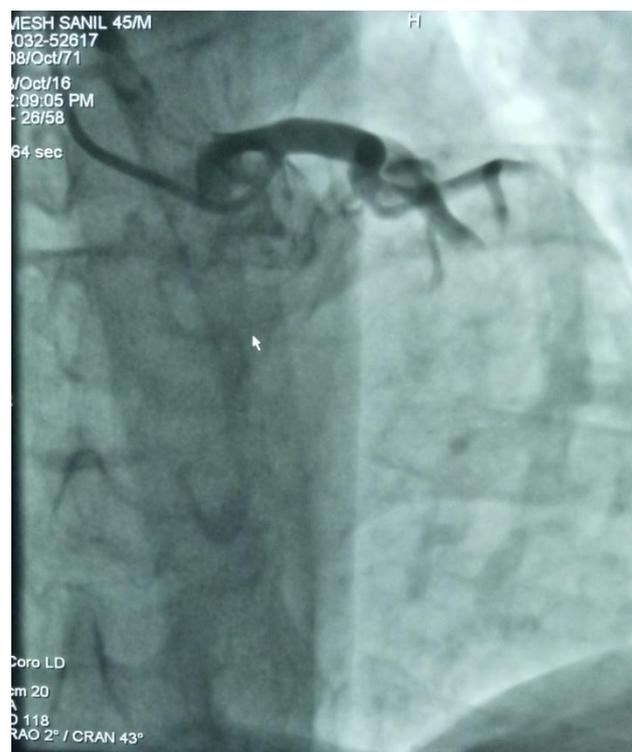
A 45 years old male admitted with H/o sudden onset of chest pain associated with sweating. He is a non diabetic, normotensive, smoker. On evaluation BP 100/70 mmhg, RR 16/m, SpO₂, 96%.

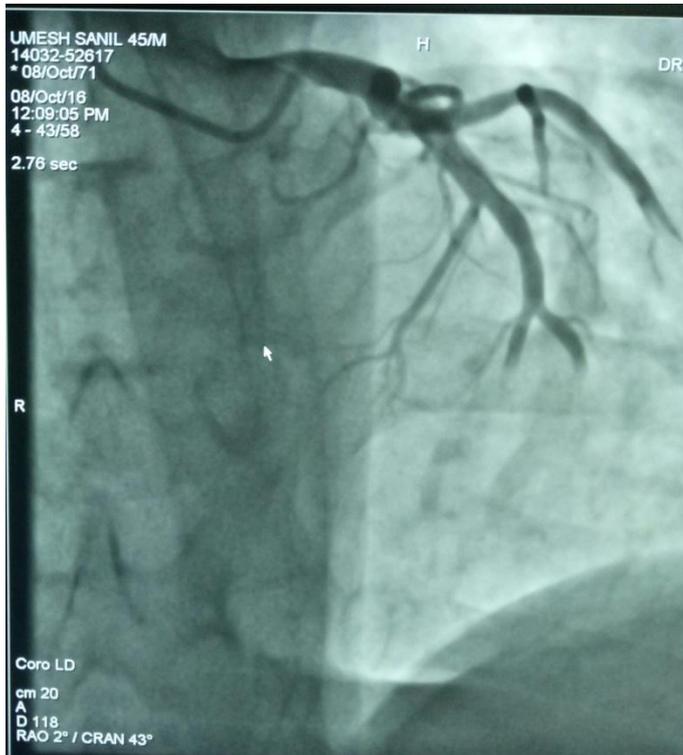
ECG HR 70/m, incomplete RBBB, no significant ST-T changes, ECHO: No RWMA, Normal valves, normal LV systolic Function, Trop I: 1.02 μ IU/L, Normal <0.03 μ IU/L) Hb 12gm, RBS 102mg, K 4mEq/L, Urea 2.2mg, creatinine 1.1 mg.

Patient was taken for diagnostic CAG by Radial approach. 5F Tiger catheter used, Angio showed slow flow in LAD, LCX, without any flow limiting lesions, RCA normal.

(CSFP in CAG assessed by semi quantitative method - TIMI time flow grade classification, Time frame count).

Patient was discharged with statin, Beta blocker.





Conclusion

CSFP can manifest as Acute coronary syndrome this is separate clinical entity, its nor infrequent in CAG Finding and contributes to morbidity.

Reference

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3. Beltrame JF Iimaye SB, Horowitz JD, The coronary slow flow phenomenon a new coronary microvascular disorder – cardiology 2002; 97(4): 197-202.

