(80) Spontaneous Coronary Artery Dissection in Asian Women with Different Clinical presentation, Risk Scenario and Coronary Angiographic Evaluations: Multi Centric Analysis

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Background : Spontaneous Coronary Artery Dissection (SCAD)is usually occurs at 35-50 years of age especially in women.SCAD represent as cause of Acute Coronary Syndrome and sudden cardiac death, particularly among young often healthy women with few conventional atherosclerotic risk factors.

Case : We analayzed all myocadial infarction patients in Asia and collected data of SCAD through multi centric randomized study with assessment of risk scenario and clinical presentation.We accessed invasive coronary evaluation with support of Intravascular Ultrasound or Optical Coherence Tomography.

Decision-Making : 181 cases of SCAD (1.8% of 9863 patients) were registered for SCAD Registry, mostly women n = 146 (80.6%). 146 female patients of SCAD from different cardiac centers Age 33-54 yrs,mean weight was 61+/- 17.5 kg.We found STEMI patients 61% and NSTEMI (39%) with different symptoms like; Chest pain 65%, Palpitation 26%, Shortness of breath 24%, Sweating 19%, tiredness 16%, Nausea 14%, Dizziness 11%, Syncope 6%.We categorized risk scenario of SCAD like; Pregnancy (n = 9)61%.during delivery (n = 8) 55%, post- delivery (n = 7) 4.8%, Menstrual periods 4.8%, Fibromuscular dysplasia (n = 14) 9.6%, Accelerated Hypertension (n = 5) 3.4%, Heavy Exercise 6.1%, Severe Emotional Stress 5.5%, Tobacco (n = 3) 2,05%, Cocaine abuse 2,05%, Cannabis (n=2) 1.36%, Systemic Lupus Erythematous 2.05%,Marfan Syndrome 2.05%,Ehlers - Danlos Syndrome 1.36%, Polyarteritis nodosa 1.36%, Ulcerative Colitis 1,36%, Crohn's disease 1,36%,Poly cystic kidney (n=1) 0.68%, Endometriosis 0,68%, Uterine Fibroid 0,68% and Hormonal therapy/contraceptives/Treatment for infertility (n=10) 6.8%. According to coronary Angiography (CAG) revealed single vessel were often like; Left main (n=16), LAD (n=77) - simple (n=59) & bifurcation (n=18). LCX (n=34) -simple (n=28) & bifurcation (n=6), RCA (n=19)-simple (n=17)-& bifurcation (n=2).

Conclusion: High rates of recurrent SCAD, its association with female sex, pregnancy, stress triggers; and concurrent systemic arteriopathies, particularly Fibromuscular dysplasia. Research has increased awareness improved diagnostic capabilities and findings led to changes in approaches to initial and long-term management.

Keywords: Imaging and Physiology, Left Main and Bifurcation Lesions, Registries and Reporting.