

Cardiac stent

Cardiac stents are expandable coils made of metal mesh.

The device is designed to support your artery walls, keep your artery open, and improve blood flow to your heart.

Dual antiplatelet therapy (e.g. **ASA** + **Plavix®**) are mandatory for 4 weeks (90 days is preferable ¹⁾ after placement of a bare metal cardiac stent, and for at least 1 year with drug-eluting stents (DES) (the risk declines from $\approx 6\%$ to $\approx 3\%$) ²⁾. Even short gaps in drug therapy (e.g. to perform neurosurgical procedures) is associated with significant risk of acute stent occlusion (and therefore elective surgery during this time is discouraged ³⁾ DES is so effective in suppressing endothelialization that lifetime dual antiplatelet therapy may be required. Bridging DES patients with antithrombin, anticoagulants, or glycoprotein IIb/IIIa agents has not been proven effective ⁴⁾

¹⁾
Nuttall GA, Brown MJ, Stombaugh JW, et al. Time and cardiac risk of surgery after bare-metal stent percutaneous coronary intervention. *Anesthesiology*. 2008; 109:588-595

²⁾
Rabbitts JA, Nuttall GA, Brown MJ, et al. Cardiac risk of noncardiac surgery after percutaneous coronary intervention with drug-eluting stents. *Anesthesiology*. 2008; 109:596-604

³⁾ , ⁴⁾
Landesberg G, Beattie WS, Mosseri M, et al. Perioperative myocardial infarction. *Circulation*. 2009; 119:2936-2944

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