

1106 Resolution of coronary thrombosis under edoxaban treatment in recent STEMI

A 61-year-old male admitted to the emergency department with a new-onset chest pain for three days. Electrocardiogram (ECG) showed slightly ST elevation in leads I and aVL. Bedside echocardiogram revealed slight hypokinesis of lateral wall with an ejection fraction of 48%. The patient was transferred to the coronary care unit with the diagnosis of recent STEMI. Coronary angiography showed complete thrombotic occlusion of the left circumflex artery. IVUS shows large thrombus burden and extensive thrombosis throughout LCX. After balloon angioplasty, culprit lesions were treated with drug-eluting stent (DES). The coronary flow improved Thrombolysis In Myocardial Infarction (TIMI) 2, but thrombosis remained left main trunk and obtuse marginal branch. Then the patient was started on edoxaban 60 mg daily. Follow-up coronary angiography after two weeks showed decreased thrombus burden with improved TIMI 3 flow.