



36th World Congress on Heart Diseases

Upper Limb Ischemia after Transradial Access for Coronary Angiography: a Rare Case Report

M. Ibrahim

University of Padjadjaran, Hasan Sadikin General Hospital, Indonesia

Acute Upper Limb Ischemia (AULI) is a less common entity of limb ischemia. Although most of the causes of AULI was embolism, it can be caused from complication after transradial access (TRA) coronary angiography. The incidence of AULI following transradial access is unknown and uncommon and not much reported. A 61 years old active smoker man was diagnoses as Acute Upper Limb Ischaemia Rutherford II-A one week after underwent elective percutaneous coronary angiography procedure using right radial artery as access. Revascularization was initially planned along with anticoagulation using unfractionated heparin. Unfortunately, the ischaemia worsened to Rutherford III after the patient decided to refuse to any procedure. Eventhough the probable mechanism is not clear about ischemia after TRA, one possible mechanism is the presence of a thrombus on the tip of the sheath or at the tip of the microcatheter or base catheter, dislodged upon sheath or catheter removal and following the path of least resistance artery during radial artery compression. In order to prevent those complication, radial artery puncture must be conducted in proper sites and accompanied by collateral flow checkup, carefully conducted procedures, follow up and contionus monitoring of distal blood flow. Critical hand ischemic is an extremely rare and serious complication of transradial coronary angiography. Until now there wasn't any clear underlying possible mechanism that might be correlate and explained these cases. Appropriate testing and management for prevention of complication following radial access in coronary angiography is crucial.

Keywords: Upper limb ischemia, transradial access, coronary angiography

Received: 12, February 2022 | **Accepted:** 15, February 2022 | **Published:** 01, March 2022