Resolution of Stress-Induced Myocardial Ischemia During Aggressive Medical Therapy as Demonstrated by Single Photon Emission Computed Tomography Imaging

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A 50-year-old man with typical Canadian Cardiovascular Class III angina pectoris had coronary angiography that demonstrated an 80% mid-left anterior descending coronary artery stenosis. He had pharmacological stress single photon emission computed tomography imaging before and after 1 year of aggressive medical therapy alone (Figure). The medical therapy resulted in no angina, an LDL cholesterol level of 80 mg/dL, an HDL cholesterol level of 43 mg/dL, and controlled hypertension (116/80 mm Hg).

Baseline pharmacological stress (dipyridamole; top) and rest (thallium; bottom) single photon emission computed tomography images before medical therapy alone (left) and dual-isotope (thallium and technetium sestamibi) images with adenosine stress 1 year later (right). Complete resolution of the baseline stress-induced anterior wall defect is obvious.
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