The first resuscitated sudden cardiac death by means of primary angioplasty in Santa Clara: 20 years later

Primera muerte súbita cardíaca recuperada con angioplastia primaria en Santa Clara: 20 años después

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The sudden cardiac death that takes place in the course of an ST-segment elevation acute coronary syndrome is usually caused by electrical complications that degenerate into ventricular fibrillation. The post ischemic electrical heterogeneity, which causes severe arrhythmia, appears in the early hours of the infarction, in patients with extensive myocardial affected area, and usually inproximal or medial segments occlusions of the epicardial coronary arteries. On November 12, 2017 is celebrated the 20th anniversary of the completion of the first primary angioplasty at the Cardiocentro Ernesto Che Guevara of Santa Clara –and outside Havana– (Figure [fragments of the Vanguardia newspaper]), in a patient with acute proximal occlusion of the left anterior descending artery, which presented several episodes of ventricular tachycardia and cardiorespiratory arrest in ventricular fibrillation. Idalberto Valdés Pérez, alias Chochó, underwent a balloon angioplasty and, after reocclusion through elastic recoil, he was implanted a conventional stent with good angiographic results. At that moment, in this hospital were only performed angiographic diagnostic studies, but the chance would have this acute coronary syndrome to happen when doctors Lorenzo Llerena Rojas and Leonardo López Ferrero expanded their experience beyond the borders of the Instituto de Cardiología y Cirugía Cardiovascular (Institute of Cardiology and Cardiovascular Surgery) –Cuban national reference center for these specialties–, in a planned week of hard work for performing elective percutaneous coronary interventions to selected patients. Thanks to that, Chochó continued to work on his little garage at Villa Josefa (supplementary material, in Spanish) and died 17 years later.
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