

A 55-year-old male patient came to the hospital with severe angina and breathlessness with ECG changes (heart attack). The patient is given emergency care, medication, and Intubation with IABP (Intra-Aortic Balloon Pump), With ventilation, he was taken to CATH LAB for a primary angiogram followed by PTCA. During an angiogram, the patient became unstable and had a cardiac arrest. CPR was done and immediately patient was put on Peripheral VA ECMO, which stabilized the patient, after two days angiogram was done. The result was TVD (Triple vessel disease) cardiologist wanted to do a primary angioplasty, because of his poor clinical condition. Due to calcified coronaries, it was unsuccessful so, the patient was then referred for CABG (coronary artery bypass grafting) surgery. The next day the patient was taken for surgery, 3 vessel grafting was done with a beating heart with ECMO support.

The post-surgery patient was kept on VA ECMO for 9 more days in CTICU. From 7th day onwards, the patient started showing improvement with inotropic supports. We started weaning off ECMO slowly, it took 48hrs to wean completely from ECMO.

On 9th day we weaned off ECMO, the patient was extubated 15th day, shifted to a room on 26th day, and later discharged from the Hospital. He is back to his own business now.