A tablet of clopidogrel remaining in the lower esophagus after primary percutaneous coronary intervention for acute myocardial infarction

A 70-year-old woman with ST-segment elevation myocardial infarction (STEMI) underwent primary percutaneous coronary intervention (pPCI). She did not have a past history of either gastrointestinal disease or pemphigoid. Before the pPCI, she received dual antiplatelet therapy (a total of six tablets taken as a loading dose without much water) and maintained a supine position for several hours. The patient experienced back pain during the pPCI procedure, and blood testing showed a hemoglobin level of 10.0g/dL. During gastroscopy after the pPCI, a thin white coat of esophageal erosion was noted (Fig. 1a, b). A clopidogrel tablet (red arrow) remained in the esophagus (Fig. 1c). A gastroscopic image obtained 1 week after pPCI shows healing of the epithelial membrane (Fig. 1d).

To avoid such undesirable situations, a patient with STEMI who is undergoing pPCI should take an adequate amount of water with the pills and should maintain a right lateral decubitus position for a few minutes in the emergency room before going to the catheter laboratory.

Competing interests: None

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