

Long-term cardiac ischemia leading to coronary artery bypass grafting in a tetraplegic patient

Abstract: With increasing survival in the spinal cord injury (SCI) population, coronary heart disease (CHD) is becoming a leading source of morbidity and mortality. Known risk factors and characteristic signs and symptoms of CHD in the general population may be altered or absent in SCI. This report describes the long-term cardiovascular course and outcome of an man with C6 American Spinal Injury Association Impairment Scale A tetraplegia secondary to a motor vehicle crash. Cardiac risk factors included male gender, mild hypercholesterolemia, and sedentary lifestyle. In retrospect, intermittent tooth pain for 13 years was likely an atypical presentation of angina. Because of severe diffuse coronary and carotid atherosclerotic disease, he underwent simultaneous four-vessel coronary artery bypass graft and carotid endarterectomy. This case demonstrates the challenges to the physiatrist in the diagnosis and management of concurrent CHD and SCI, as well as the benefit of appropriate treatment in individuals with SCI.

[Archives of Physical Medicine and Rehabilitation](#)