Mock Heart Attack Scenario Held

Scott Taylor (right) and fellow members of the Cardiac Rehabilitation staff at North Mississippi Medical Center’s Heart Institute present a “mock” heart attack scenario during a Christmas breakfast for current and former patients. The staff discussed common signs and symptoms of a heart attack, as well as cardiac catheterization and surgery. Taylor stressed the importance of calling 9-1-1 at the onset of symptoms because “time is muscle” when it comes to heart damage.
Amory Man Gets First Stent of Its Type in Nation

James Haney of Amory recently became the first person in the nation to get a self-expanding bare metal stent designed specifically for heart attack patients.

In August, 60-year-old Haney was home getting ready to go to dinner with his family. “I felt like I was having indigestion,” he said. “At first I was having a hard time swallowing, and then it just progressed to a dull heaviness in my chest. I was having a hard time breathing.”

Soon he began sweating profusely, his breathing became more shallow, and his hands and feet went numb. They drove him to the Emergency Department at Gilmore Memorial Hospital, where tests confirmed that Haney was having an ST-segment elevation myocardial infarction (STEMI), or heart attack caused by a completely blocked artery. STEMI heart attacks are the most serious and cause the most damage. He flew by CareFlight medical helicopter to North Mississippi Medical Center in Tupelo, where doctors met him on the landing pad.

As they rushed to the Cardiac Catheterization Laboratory, cardiologists Benjamin Blossom, M.D., and Barry Bertolet, M.D., told Haney about a new investigational stent they felt may be an option for him to consider. Used in Europe for several years, the STENTYS coronary stent is now being studied in the United States. “Early studies show that this stent works better in heart attack victims because it continues to expand,” explained Dr. Bertolet.

“They felt good about the new stent, and they made me feel good about it,” Haney said. “I asked them if they had ever put one of these in before, and they told me I would be the first in the nation. I said, ‘that’s not really what I wanted to hear.’ But, I thought, God has opened this door for some reason, so I agreed to participate in the study. If not me, maybe it will benefit someone down the road.”

Made of nitinol, this stent’s self-expanding trait makes it unique. “A heart attack is caused by a sudden interruption in the blood supply to the heart because of a blocked vessel. Our goal is to restore blood supply as quickly as possible,” Dr. Bertolet said. “Traditionally in the Cath Lab, we inflate a balloon to re-open the artery where it is narrowed, and oftentimes we implant a stent to keep the blood vessel open.”

Doctors can find it tricky to “size” the stent correctly because of changes in the blood vessel caused by a heart attack. When the heart spasms, blood vessels contract and get smaller. Once the damage begins to resolve, the vessel typically resumes its normal size and can leave a gap between the stent and the vessel wall. Blood clots and plaque can accumulate in these gaps and lead to another blockage and even another heart attack.

Because the STENTYS stent expands on its own without the use of a balloon, it is believed that the stent may have better contact with the heart vessel wall. “The vessels in the heart are not stagnant tubes. They change size and shape, especially after a heart attack,” Dr. Blossom said. “A traditional stent doesn’t adapt to these changes, but this stent takes into account the variability of the blood vessels.”

Haney was awake throughout the procedure and spent three days at NMMC. “We are so blessed to have gotten care as quickly as he did, and that everyone is so good at what they do,” said his wife, Beverly. He recovered at home for a few weeks before returning to the swing shift at Tronox in Hamilton, where he has worked for almost 25 years. “I felt extremely good afterward,” Haney said. “I didn’t realize how bad I was feeling before this.”

The STENTYS stent can also provide a better fit for people whose vessels are “lumpy,” or small in some places but larger in others. Because the STENTYS conforms so well to the blood vessel, it also lowers the risk that blood clots will form in “gaps” between the stent and the blood vessel wall.

NMMC was the first site in the nation enrolled in the study and has implanted nine STENTYS stents since August. Although four sites in the nation are now open to enrolling patients, NMMC remains the only site where the stent has actually been used. Because of this success, Dr. Bertolet was asked to speak to cardiologists and nurses at the international Transcatheter Cardiovascular Therapeutics conference in San Francisco in October 2013.

For more information about the STENTYS coronary stent and other new technology, call 1-800-THE DESK (1-800-843-3375) or visit www.nmhs.net/heart_institute.