Acute coronary syndrome (ACS) is frequent presenting with hyperglycemia. The preferred reperfusion strategy of ACS with ST-elevation myocardial infarction is Primary PCI. However, starting fibrinolysis is considered, especially in a non-PCI center hospital and located in areas far from PCI center.

CASE ILLUSTRATION

A 48-years-old female came to the emergency room due to atypical chest pain 1 hour prior to admission. BP 120/80 mmHg, RR 24, Pulse 80 bpm. ECG showed ST-elevation on II, III, aVF. Blood glucose level is 557 mg/dL. CK-MB 208 u/L, Troponin I >10 ng/mL. A loading of dual antiplatelet, streptokinase 1.5 million units in 100 cc normal saline, rapid-acting insulin 2 units/hour. After 2 hours observation, ST segments returned to baseline and the symptoms alleviated.

REFERENCES

