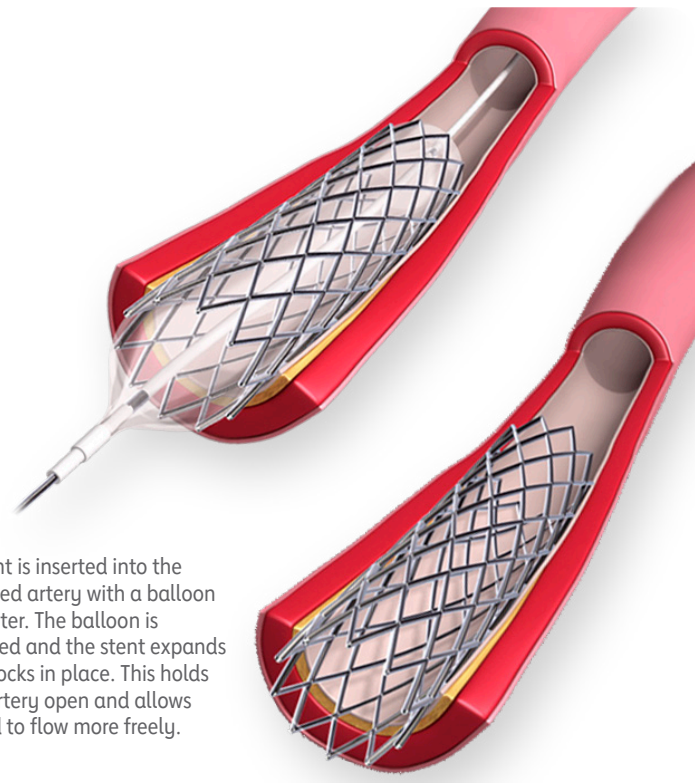




What Is a Stent?

A stent is a tiny wire mesh tube that keeps a coronary artery open to increase blood flow to the heart. This reduces the chance of a heart attack.

Coronary arteries (arteries feeding the heart muscle) can become narrowed by a buildup of fatty deposits called plaque. When this happens, it can reduce blood flow to the heart muscle, causing symptoms like chest pain. If a clot forms and completely blocks blood flow to part of the heart muscle, it will cause a heart attack.



A stent is inserted into the clogged artery with a balloon catheter. The balloon is inflated and the stent expands and locks in place. This holds the artery open and allows blood to flow more freely.

Why do I need a stent?

If an artery is about 70% blocked, you may need a stent to keep the artery open, improve blood flow to the heart and relieve symptoms like chest pain. Stents are a permanent fixture to improve blood flow to your heart and reduce the chance of a heart attack.

Types of stents

There are three main types of stents.

- Bare metal stents are simple, metal mesh tubes.
- Drug-eluting stents are coated with a medicine that releases into the artery over time. This helps prevent the artery from narrowing again.
- Biodegradable stents are temporary stents that dissolve after a few months.

How are stents placed?

Placing a stent is done through a minimally invasive procedure known as a percutaneous coronary

intervention (PCI) or angioplasty. Your doctor will insert a long, thin, flexible tube called a catheter into the blood vessels to your heart. This tube has an empty balloon at the end of it, which will be inflated with air to open the narrowed artery and place the stent. The stent expands and locks in place to hold the artery open.

What medications will I need to take after my procedure?

After the procedure, you'll probably be prescribed antiplatelet agents (blood thinners). These medicines help keep your stented artery open by preventing platelets from clumping together and forming blood clots in the stent and blocking the artery.

One blood thinner, aspirin, almost always is used indefinitely. A second type is called a P2Y₁₂ inhibitor. These include clopidogrel, ticlopidine, ticagrelor, prasugrel and cangrelor. Your health care professional will prescribe the one they feel is best for you, based

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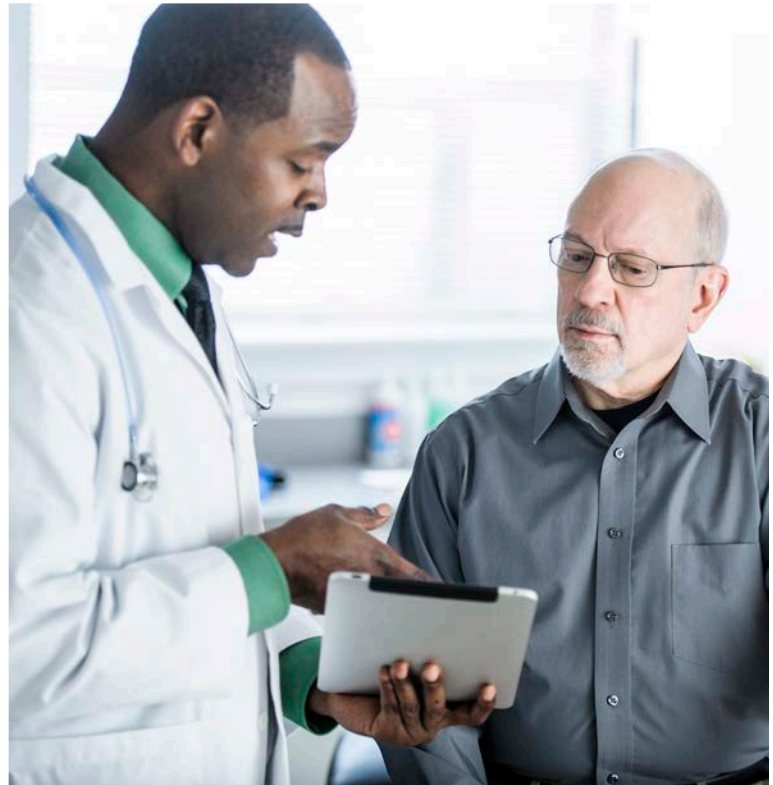
on your risk of blood clots and bleeding. How long you need to take this medicine depends on why it's being prescribed and your future risk of blood clots and bleeding.

When aspirin and a P2Y₁₂ inhibitor are used together, it's called dual antiplatelet therapy.

It's important for you to take your medication as prescribed. Stopping it on your own can lead to an increased risk of clots forming inside the stent, particularly in the first few months after stent placement.

How long will it take to recover?

You should discuss your recovery time with your health care professional. Most people need a few days to a week before they can return to work and resume physical activity.



HOW CAN I LEARN MORE?

- 1 Call 1-800-AHA-USA1 (1-800-242-8721) or visit [heart.org](https://www.heart.org) to learn more about heart disease and stroke.
- 2 Sign up for our monthly *Heart Insight* e-news for heart patients and their families at [HeartInsight.org](https://www.heartinsight.org).
- 3 Connect with others sharing similar journeys with heart disease and stroke by joining our Support Network at [heart.org/SupportNetwork](https://www.heart.org/SupportNetwork).

Do you have questions for your doctor or nurse?

Take a few minutes to write down questions for the next time you see your health care professional.

For example:

What are potential complications from this procedure?

MY QUESTIONS:

We have many other fact sheets to help you make healthier choices to reduce your risk for heart disease, manage your condition or care for a loved one. Visit [heart.org/AnswersByHeart](https://www.heart.org/AnswersByHeart) to learn more.