Patient has first stent procedure in O'Bleness catheterization laboratory

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William Rife did the right thing when he came to the O'Bleness Memorial Hospital emergency department as soon as he thought he was having a heart attack in March 2007. Rife was sent to Riverside Methodist Hospital in Columbus where a heart attack was ruled out. Thankfully Rife did not have a heart attack, but the incident led to Rife being the first patient to receive a vascular stent at O'Bleness catheterization laboratory.

The catheterization laboratory, in the Cornwell Center for Cardiovascular and Diabetes Care at O'Bleness, opened in July 2006. Since opening more than 100 cardiac and vascular catheterization diagnostic procedures have been performed. Recently the lab was certified to perform low-risk peripheral angioplasty and stenting of arteries in the legs as well as angioplasty and stenting of renal (kidney) arteries.

A self-employed carpenter, Rife had been feeling pain in his right leg as well as numbness. He was unable to sit for extended periods of time because of the pain in his leg. He had considerable cramping in his calf when he walked.

"I kind of thought it would go away, but it didn't," Rife said.

After returning from Riverside, Rife was examined by MidOhio Cardiology and Vascular Consultants cardiologist, Mitchell J. Silver, DO, FACC, at his office in the Cornwell Center. Silver is medical director of O'Bleness' catheterization laboratory. Tests were performed – including a diagnostic vascular catheterization in O'Bleness' catheterization laboratory. A blockage was found in Rife's leg and a stent was inserted in the artery in his leg to improve blood flow.

Stenting is a procedure in which a small wire metal mesh tube is inserted during angioplasty to prop open an artery and improve blood flow. The stent is placed over a balloon catheter and threaded through an artery to the blockage, where the balloon is inflated, expanding the stent and locking it in place to hold the artery open.

Mitchell Silver, DO, FACC, a cardiologist with MidOhio Cardiology and Vascular Consultants, shows William Rife a picture of the 100 percent blockage that was causing his leg pain. Silver, medical director of O'Bleness' catheterization laboratory, (shown behind the men) inserted a vascular stent in Rife's leg artery to improve the blood flow.

According to Silver, Rife had 100 percent blockage of the artery in his leg. "That's why when he walked his calf cramped," Silver said. Rife's way of life has greatly improved since the stent was placed in his leg. He said he could feel a difference "almost immediately" after the outpatient procedure.

"If we had not opened the blockage in his leg artery, he would still be quite limited when he tried to walk," said Silver. The stent should be permanent, although 20 percent to 30 percent of patients may require a repeat procedure within the first year.

"Everyone ought to come here [to O'Bleness]," Rife said. "You've got good people here.