



Ephemeral Heart Failure - A Case Report

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Abstract:

I am presenting an interesting case report of a 45 year old woman who presented to the emergency department with complaints of acute onset of breathlessness shortly after a stressful event. ECG taken showed ST segment depression in anterior leads with elevated troponin I levels. Trans Thoracic echocardiography showed hypokinesia of the Left ventricle. Patient was started on Acute heart failure management. There was reversal of ECG changes on the third day of hospitalisation and repeat 2D echocardiography showed improvement of ejection fraction. Other causes like Acute coronary syndrome ,pheochromocytoma was ruled out and was provisionally diagnosed as Stress(Takotsubo)cardiomyopathy. It is a recently described heart syndrome accounting for upto 2% of Acute Coronary syndrome presentations probably due to direct toxic effects of excessively released catecholamines on cardiac adreno receptors during emotional or physical stress. Coronary Angiography reveals normal coronaries. Combination of ACE inhibitors and beta blockers are considered to be the treatment of choice.

Keywords: Stress ,Cardiomyopathy,Broken heart syndrome ,Takotsubo

