

**PP17 DO NOT STRESS OVER
YOUR HEART!: A CASE REPORT
OF TAKOTSUBO
CARDIOMYOPATHY**

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INTRODUCTION

Takotsubo cardiomyopathy (TCM), known as stress-related cardiomyopathy, transient apical ballooning and broken heart syndrome, is a transient wall motion abnormality of the left ventricular (LV) apex following an emotionally or physically stressful event. We present a case of a lady with atypical presentation of acute coronary syndrome following a stressful life event.

CASE DESCRIPTION

A 48 years old diabetic Malay lady presented to the Emergency Department (ED) with syncopal episode preceded by giddiness. She denied having chest pain, shortness of breath or vestibular symptoms. She was alert, not in respiratory distress with stable vital signs. Her ECG showed an Acute Lateral Myocardial Infarction and she was served double antiplatelets prior to an urgent primary percutaneous intervention (PCI). Coronary angiography (COROS) findings were normal coronaries with no abnormal cardiac wall movement. An MRI later on showed hypokinesia of the mid to apical segments of her left ventricle, suggestive of Takotsubo cardiomyopathy. Patient later revealed she was under significant duress as she was taking care of her special needs son and mother in law. Patient was discharged well and during a

follow-up cardiac MRI weeks later the Takotsubo cardiomyopathy had resolved.

Discussion

Diagnosis of TCM is challenging and its' presentation resembles acute coronary syndrome (ACS). The unique feature of TCM is its' relation with stressful life events. Although the exact pathophysiology of TCM is unknown, various hypotheses suggest a catecholamine-induced cardiotoxicity and microvasculature dysfunction. COROS' will show normal coronaries with apical hypokinesia and a systolic balloon-like dilation pattern.

CONCLUSION

TCM is easily missed as its' indistinguishable from other ACS'. Clinicians should have a high index of suspicion for TCM and consider it as a differential diagnosis especially if patients' volunteer a stressful event recently. The prognosis is also favorable with almost perfect recovery within weeks.

Keywords: Cardiomyopathy, Stress, Catecholamine