

CONCLUSION

A high index of suspicion of PE should always be raised in patients with ECG changes suggestive of a myocardial ischemia whom the clinical presentation does not tally with a possible cardiac event.

PP 15

SPONGEBOB HEART

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INTRODUCTION

Cardiomyopathy can go undetected with grave consequences, especially in young active adults. Non-compacted ventricular myocardium (NVM) is a unique disease where there is incomplete compaction of the ventricular wall during intrauterine life. As a result, the heart becomes sponge like, thickened, with poor reserve. Complications include arrhythmia, heart failure and systemic embolic event.

CASE REPORT

21 years old, collapsed after playing futsal. There was no bystander CPR. He was brought to nearby private hospital and was resuscitated for 50 minutes, during which he had persistent VF. ROSC achieved. He was then transferred to our facility 2 hours later. He had a history of syncope one week prior after playing futsal, but did not seek medical attention. On arrival to our centre, the patient was ventilated, supported with double inotropes. There was a severe acidosis, with pH 6.4, pCO₂ 104, HCO₃ 11.6,

lactate 7. He arrested shortly after arrival and had 4 cardiac arrest events. Bedside echo showed thickened ventricles bilaterally with trabeculation, poor contractility and enlarged right ventricle. He succumbed 2 hours later despite maximum resuscitation. Post mortem findings showed myocardial infarction secondary to noncompacted biventricular cardiomyopathy.

DISCUSSION & CONCLUSION

Syncope in young patients should warrant further investigation to rule out several important diagnosis such as aortic insufficiency and cardiomyopathies. Therefore, we recommend bedside echocardiography by emergency physician. The management of collapsed patient with NVM is even more challenging. The non compaction of the heart with thickened ventricular wall lead to ineffective contraction. The numerous trabeculation can lead to both abnormal relaxation and restrictive filling, hence diastolic dysfunction. This patient most likely has both systolic and diastolic dysfunction. Fluid, inotropic and vasopressor management is difficult. Physician requires multidisciplinary input as well as other adjuncts including bedside echo and cardiac output monitoring.

PP 16

HEAT STROKE FATALITY DURING EL-NINO: EXPERIENCE IN HOSPITAL SEGAMAT

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INTRODUCTION

Heat stroke is a life threatening illness characterized by hyperthermia and altered mental status after

exposure to the hot weather. The global heat wave caused by El Nino phenomenon recently affected Malaysia with many suffering health consequences. We report the case of the first victim, a 23-year-old young trainee policeman who died of heatstroke after exposed to the hot environment during his training.

CASE REPORT

A 23 years old Malay man, who just enrolled in police training program, has been brought to Emergency & Trauma Department (ETD) Hospital Segamat after fainted during his training session. He was initially brought to nearby public health clinic. Unfortunately, it took nearly two hours for patient to arrive in ETD Hospital Segamat. His GCS upon arrival was 9/15 with the temperature of 40.2°C. Without delay, patient was intubated to secure the airway. With the working diagnosis of heat stroke at that moment, aggressive cooling therapies were started in the ETD. After three hours of resuscitation in emergency department, he was admitted to ICU for definitive care. His condition was further complicated by disseminated intravascular coagulation (DIVC) and refractory hypotension. He died on day two of admission with the cause of death of heat stroke complicated with DIVC and severe lactic acidosis.

DISCUSSION & CONCLUSION

This unfortunate case demonstrates the fundamental importance of early recognition and prompt treatment of heat stroke. In this case, failure to recognize with the delay of first aid and cooling, lead to poor outcome. With the relatively uncommon El Nino phenomenon, several preventive measures should have be taken, these involve

identification of vulnerable individuals like police and military trainees, dissemination of information about dangerous heat waves may help to prevent life-threatening heat stroke.

PP 17

ERYTHRODERMIC PSORIASIS – A POTENTIALLY LIFE-THREATENING DERMATOSIS : A CASE REPORT

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INTRODUCTION

Erythroderma is a dermatological emergency defined as erythema and scaling occurring in a generalized distribution involving more than 90% of the total body surface area. Widespread alterations of the skin functions could result in a number of complications which are known collectively as acute skin failure.

CASE REPORT

We report a case of erythrodermic psoriasis in a 37 year old Malay male prisoner with underlying Hepatitis C Virus infection and unstable plaque psoriasis. He presented with rapid worsening of his psoriatic lesions which eventually affecting his entire body surface area associated with pruritus and erythema within one week duration. Patient was admitted for medical stabilization. He was eventually discharged well at day 13 of admission and PASI was reduced from 72.0 to 2.7. (PASI: Psoriatic Area Severity Index)

DISCUSSION & CONCLUSION

Erythroderma can be life-threatening, primarily because of its metabolic burden and complications. Hence, it is mandatory to establish it's