Tako-tsubo cardiomyopathy: findings on cardiac CT and coronary catheterisation

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An elderly subject (age 70s) without previous cardiac history but whose spouse had recently died presented with acute chest pain. Cardiac CT was performed, which revealed normal coronary arteries (panel A). However, functional analysis showed left ventricular (LV) apical hypokinesis with systolic ballooning (panel B, online video 1) prompting a diagnosis of tako-tsubo cardiomyopathy. Echocardiography 12 h later demonstrated interim formation of a LV apical thrombus. Subsequent left heart catheterisation again showed normal coronary arteries and persistent LV apical hypokinesis with systolic ballooning (panel C, online video 2). On day 3, the patient was clinically stable and discharged under anti-coagulation. Follow-up echocardiography 1 week later showed resolution of the thrombus and normalisation of cardiac function. This case illustrates the classic presentation, imaging findings and clinical course of tako-tsubo cardiomyopathy with new-onset heart failure in the absence of coronary artery disease in the context of emotional stress (“broken heart syndrome”) followed by rapid recovery.1 2

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Supplementary Online Videos 1 and 2 are published online only at http://heart.bmj.com/content/vol96/issue5.

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REFERENCES