中文題目:猛爆性章魚壺心肌症併發重度心源性休克、與危及生命心室心律不整,藉由主動脈氣球幫浦支持後存活

英文題目: Fulminant Takotsubo cardiomyopathy complicated with profound cardiogenic shock and life-threatening ventricular arrhythmia survived by intra-aortic balloon pumping support

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Abstract

Takotsubo cardiomyopathy (TCMP) is known as stress cardiomyopathy, and long-term prognosis is generally excellent. However, cardiogenic shock complicated by TCMP was a rare complication and intra-aortic balloon pumping (IABP) usage in this status was also rarely reported. Herein, we reported a 74-year-old female with urosepsis post incomplete antibiotic treatment. She suffered from intermittent fever and conscious change and was brought to our emergency department for help. However, electrocardiography showed ST elevation over precordial and inferior leads (Figure 1) and emergent coronary angiography was arranged but result showed normal finding. Left ventriculography revealed TCMP with impaired LV systolic function (Figure 2). Dual vasopressors were used due to profound cardiogenic shock status and cardioversions were performed for ventricular tachycardia (VT) episode. Then IABP was inserted for maintain poor hemodynamic. Fortunately, no further VT noted and dual vasopressors were tapered off after IABP insertion. Later this patient was discharged uneventfully with improved heart function. This case reminds physicians that cardiogenic shock was still a possible complication after fulminant TCMP and IABP usage was a simple and useful mechanical support to decrease the lifethreatening ventricular arrhythmia and maintain the hemodynamic.

Figure 1. Electrocardiography showed ST elevation over precordial leads and inferior leads.

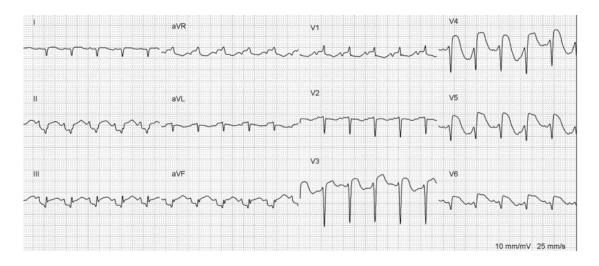


Figure 2. Left ventriculography showed Takotsubo cardiomyopathy with poor LV systolic function.

