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Platypnea Orthodeoxia Syndrome: The consequential inconsequential PFO, a look at 4 cases cured with PFO closure

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Clinically, Platypnea Orthodeoxia Syndrome (POD) is rarely diagnosed and associated with various cardiac and non-cardiac conditions. Yet there are increasing case reports in the medical literature as awareness of the entity increases amongst clinicians. In this series, we will focus on cardiac etiologies of POD. We will review the clinical course of four patients affected by this syndrome between March 2008 and September 2013. Additionally, we will explore the potential mechanisms for positional shunting in such patients. The (three females and 1 male) patients were average aged 63+/- 12. All had a Patent Foramen Ovale (PFO). The main complaint was dyspnea and dyspnea on exertion. Two patients were already committed to long term oxygen therapy. All improved after percutaneous closure of the PFO with complete resolution of all symptoms. Post PFO closure, none required oxygen supplementation. We postulate that POD is under diagnosed and there are more patients out there yet to be diagnosed with this entity. We will provide an algorithm for correctly diagnosing potential patients. Continued education of our colleagues to raise awareness of this condition is needed to allow proper identification and treatment of POD patients.

Biography

Nassir Azimi is a graduate of Columbia University in New York City. Then, he transitioned to medical school at Dartmouth in New Hampshire. After completing an internal medicine internship in residency at University Colorado, he went on to Yale University to train in cardiology, nuclear cardiology and interventional cardiology and vascular medicine. Currently, he is practicing cardiology at La Mesa Cardiac Center with a focus on the patient rather than any one organ system.

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