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Severe fibrosing mediastinitis with atypical presentation: Effective control with novel therapeutic approach

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Fibrosing Mediastinitis (FM), also known as sclerosing mediastinitis, is an uncommon but serious disease involving the mediastinal structures. A high index of suspicion is essential to establishing the diagnosis of FM and starting the appropriate therapy for patients. Here, we report a case of a young female who presented with chest symptoms and subsequently underwent different laboratory and radiologic investigations and an excisional biopsy. The findings of these investigations were consistent with the diagnosis of idiopathic FM. Her disease was associated with complete occlusion of three pulmonary veins and the left main pulmonary artery. The patient was treated with initial high-dose steroids followed by maintenance steroid and methotrexate therapy with very good long-term disease control. Clinical response, High-Sensitivity C-Reactive Protein (Hs-CRP) and Erythrocyte Sedimentation Rate (ESR) were used to monitor disease activity and response to therapy.

Biography

Abdulaziz Joury has completed his medical degree in 2014 obtained from King Saud University, Riyadh, Saudi Arabia. He got his scholarship in internal medicine and cardiology sciences from Ministry of Health, Saudi Arabia. Currently he is working as a research fellow and clinical observer in the George Washington University, Washington, DC. He has been awarded as the best moderated presenter in the European Society of Cardiology Congress that held in Barcelona, Spain in 2014. He specializes in Cardiology and Cardiac Sciences and interested to be one of the leaders in future of cardiology.

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