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Phenylephrine induced new electrocardiographic ST- segment elevation (NESTE) mimicking as acute myocardial infarction (STEMI) with normal or near normal coronary arteries

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A 52- years-old Afro American female with past medical history of FIGO stage C Metastatic Ovarian Cancer presented to Medical ICU with Dehydration and Hypotension after a recent Chemotherapy cycle. Patient was found to be in Sinus Tachycardia and persistent Hypotension even after a significant volume resuscitation with Crystalloids. IV Phenylephrine was initiated as 1st presser for Circulatory Shock. 30 minutes after the initiation of the medication, patient complained of severe, crushing, 10/10 sub sternal chest pain. Diagnostic EKG showed ST-Segment elevation in inferior and lateral leads and reciprocal ST-Segment depression in septal leads. A PCI alert was called and patient was taken to Cardiac Catheterization Lab. Interestingly Coronary Angiography showed 90 % Right Coronary Mid Vessel Tubular Stenosis and 80 % Distal RCA stenosis without any significant atherosclerotic lesion. Intra Coronary Artery Spasm presents with a variety of Clinico- pathological disease manifestations including Prinzmetal Angina, NSTEMI, STEMI and Takotsubo Cardiomyopathy. A proper diagnosis of Coronary Artery Spasm is essential as the therapeutic intervention is totally different for majority of ST-Segment elevation syndromes.

Biography

Wajahat Humayun, M.D have completed my M.B.B.S degree from Allama Iqbal Medical College, Lahore, Pakistan at the age of 23 years. He was declared the "Best and The Most Distinguished Graduate of my medical school session 2007-2012" and was awarded with 10 Gold and 5 Silver Medals. He is a First Year Resident, started with Internal Medicine Residency at Abington Memorial Hospital in 2014. Right now he do not have Publications in any Journal but working on different projects which will be published very soon in well reputed Journals including this Conference.

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