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Ventricular tachycardia with epicardial and pericardial fibrosis 6 months after resolution of subclinical COVID-19: A case report

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Background: Coronavirus disease 2019 (COVID-19) has been shown to have extensive effects on the cardiovascular system. Its long-term cardiac manifestations, however, remain unclear.

Case presentation: We report the case of a Caucasian patient with a mild and self-limited presentation of COVID-19, with subsequent development, months later, of exertional dyspnea and non-sustained ventricular tachycardia, long after resolution of his illness and after returning to aerobic exercise. The patient had normal screening tests including electrocardiogram (ECG) and echocardiogram 4 months after his illness. Cardiac magnetic resonance imaging demonstrated epicardial and pericardial fibrosis of the right ventricle free wall and outflow tract and the pericardium over the anterior wall, 6 months following the initial infection. First abnormal ECG was recorded at month 7 following illness.

Conclusions: This case suggests an insidious and possible long-term cardiac involvement and reflects the challenges in traditional workups and screening modalities in identifying cardiac involvement in COVID-19.

Biography

Michael R. Sood is a cardiologist in East Atlantic Beach, New York and is affiliated with multiple hospitals in the area, including Mount Sinai Hospital and Northport Veterans Affairs Medical Center. He received his medical degree from Saba University School of Medicine and has been in practice between 11-20 years.