Vol.16 No.4





Case Report: A Deadly Crossing-Time to Burn the Bridge

Debbie Falconer University of Cambridge, UK

Abstract

Insiaht

Medical Publishing

Background: Myocardial bridges are congenital anomalies. When a segment of an epicardial artery intramyocardially, the muscle overlying it forms the "myocardial bridge". This case highlights the important of multi-modality imaging in diagnosing and planning treatment for patients with myocardial bridges.

Case Summary: 33-year-old previously healthy male, with no significant family history, was admitted after an out-of- hospital VF arrest that occurred whilst running. The patient recalls lightheadedness immediately before collapsing. ROSC was achieved after 1 shock with subsequent normal GCS. Initial ECG (figure 1) showed benign early repolarization in V1-4. Coronary angiography revealed myocardial bridging affecting a 2cm portion of the left anterior descending artery, with atherosclerotic plaque proximal to the bridge.

Resting echocardiogram and non-perfusion CMR were normal. However, exercise TTE demonstrated marked LAD territory hypokinesis and apical ballooning Figures 2 and 3) at peak exercise accompanied by ST elevation in V3-V6. After multidisciplinary discussions the patient was offered singlevessel CABG with LIMA to the LAD, but he declined. Fully informed of the risks, he opted instead for medical management and will further consider the need for surgical intervention in the future.

Discussion: Management of patients with symptomatic bridges remains controversial due to the absence of prospective multicentre data.. First line pharmacological therapy is with betablockers +/- calcium channel blockers. Revascularisation by intracoronary stent placement can be done, but complications include in-stent restenosis. Surgical options include bridge myectomy and bypass grafting. There is currently no data confirming which approach leads to the best outcome.



Biography:

Debbie Falconer graduated in 2014, studying at the University of Cambridge and University College London. She works at the Royal Free Hospital in London and has an interest in cardiac imaging..

Speaker Publications:

- 1. "Effect of tricuspid regurgitation and right ventricular dysfunction on long-term mortality in patients undergoing cardiac devices implantation: >10-year follow-up study"; International Journal of Cardiology/ 2020.
- 2. "Predictive Role of BNP/NT-proBNP in Non-Heart Failure Patients Undergoing Catheter Ablation for Atrial Fibrillation: An Updated Systematic Review"; Current Medicinal Chemistry/ 2020/Vol 27-Issue 27.
- 3. "Full blood count as potential predictor of outcomes in patients undergoing cardiac resynchronization therapy"; Scientific Reports/ 2019/13016.
- 4. "Biological therapies targeting arrhythmias: Are cells and genes the answer?"; Expert Opinion on Biological Therapy/2017/ Vol 18- Issue 3/Pages 237-249.
- 5. "Dual-site right ventricular pacing in patients undergoing cardiac resynchronization therapy: Results of a multicentre propensity matched analysis"; PACE/ 2017/ Vol 40-Issue 10: Pages 1113-1120.
- 3rd International Conference on Cardiovascular Diseases and Therapeutics; Paris, France-April 01-02, 2020.

Abstract Citation: Debbie Falconer, Case Report: A Deadly Crossing- Time to Burn the Bridge, CVDT 2020, 3th International Conference on Cardiovascular Diseases and Therapeutics; Paris, France-April 01-02,2020 (https://cardiovasculardiseases.cardiologymeeting.com/ abstract/2020/case-report-a-deadly-crossing-time-toburn-the-bridge)