

TURIN, 20TH-21ST NOVEMBER 2008

# GREAT INNOVATIONS IN CARDIOLOGY

4TH JOINT MEETING WITH MAYO CLINIC

4TH TURIN CARDIOVASCULAR NURSING CONVENTION



#### SESSION I:

PERSPECTIVES IN ISCHEMIC HEART DISEASE (PART I)

S. Battista (Torino)

Short case presentation

# 4<sup>th</sup> JMMC Meeting in Turin Great Innovations in Cardiology

### **Short case presentation**

Stefania Battista

S.C.D.U. Medicina d'Urgenza – Pronto Soccorso di Medicina

Direttore Prof. Valerio Gai

Azienda Ospedaliera Universitaria San Giovanni Battista di Torino

#### A 76-year old woman

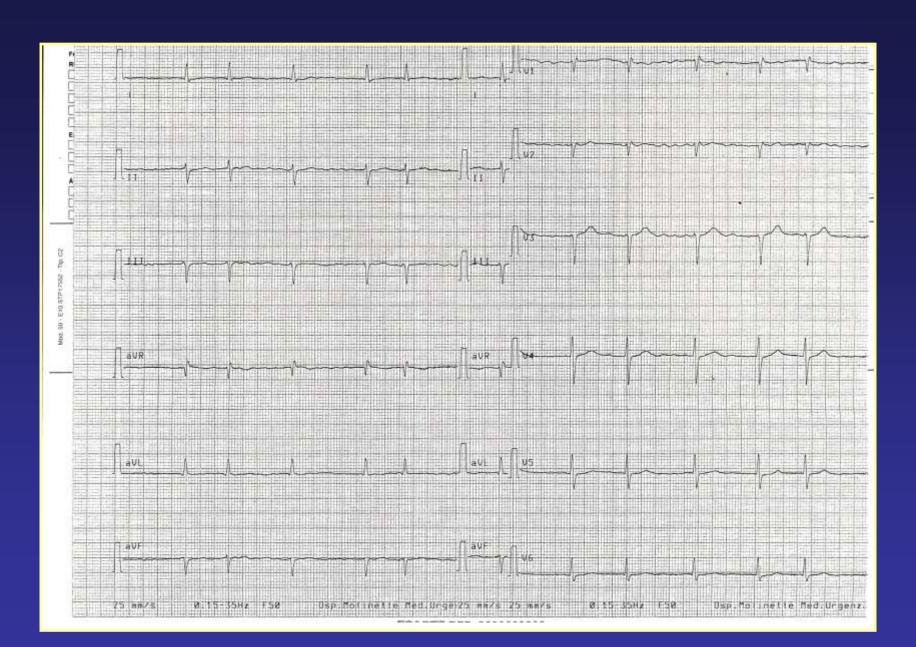
#### **Clinical History**

- Obesity
- Type 2 diabetes
- Arterial hypertension
- Chronic atrial fibrillation
- Five years before admission: acute myocardial infarction
- During the last year severe weight loss associated with the finding of anemia
- Gastroscopy and two colonscopies, were all negative

The patient reported weakness and recurrent episodes of chills in the previous two months

and the onset of thoracic pain during the last week radiating to the back and the left arm

The night prior to admission the pain acutely worsened



### **Diagnostic hypotheses**

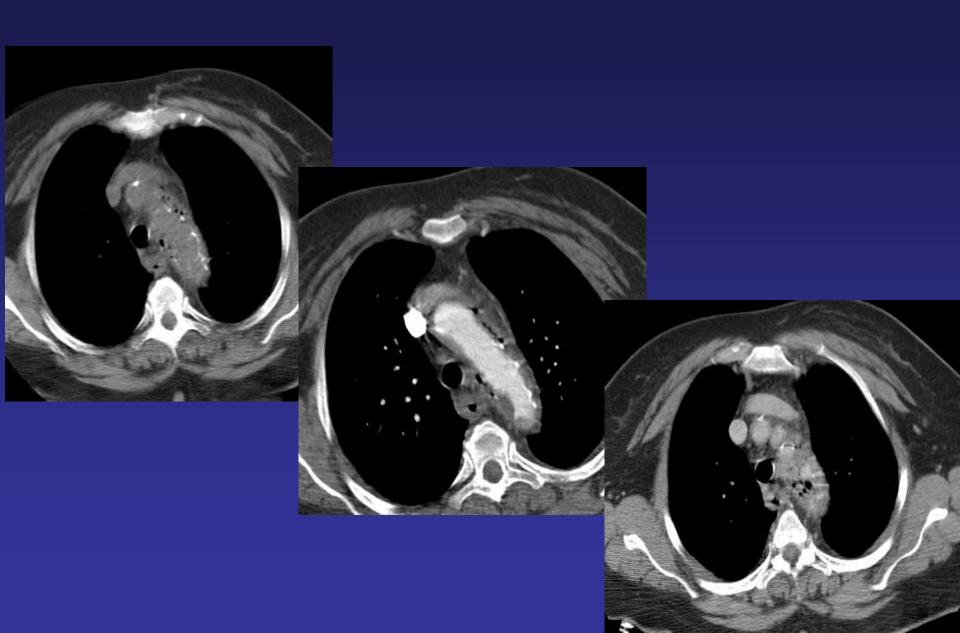
Ischemic cardiac origin

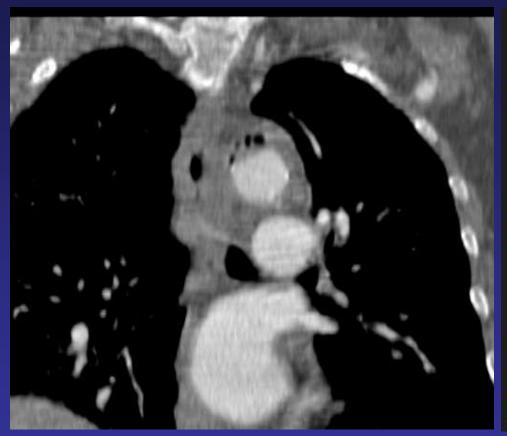
**Acute chest pain** 

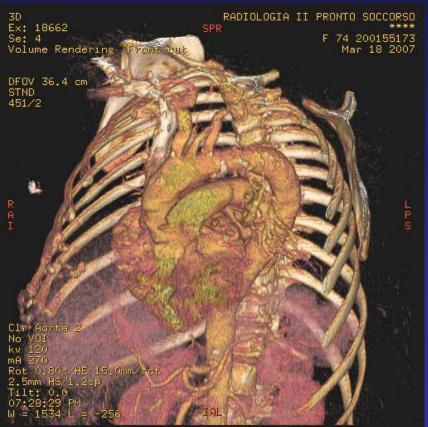
Non cardiac origin (probably vascular)

**Other** 

## **CT** on admission









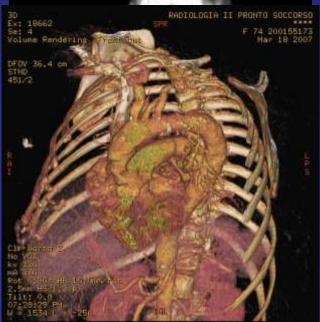
- β blockers
- Antibiotic therapy

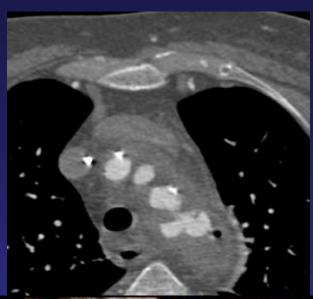
## Blood coltures yielded positivity for Clostridium septicum

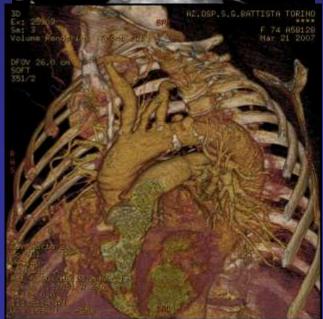












JAMA. 1969 Jul 21;209(3):385-8.

Clostridium septicum infections and malignancy

Alpern RJ, Dowell VR Jr.

### **Abdominal CT and colonscopy**

A substenotic tract in the right colon near the hepatic bend was found and the histological findings suggested an adenocarcinoma of the colon



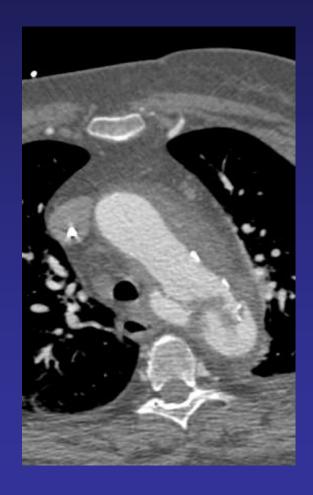




While hospitalized, the patient developed severe back and lumbar pain associated with lower limbs hypostenia rapidly progressing to paraplegia

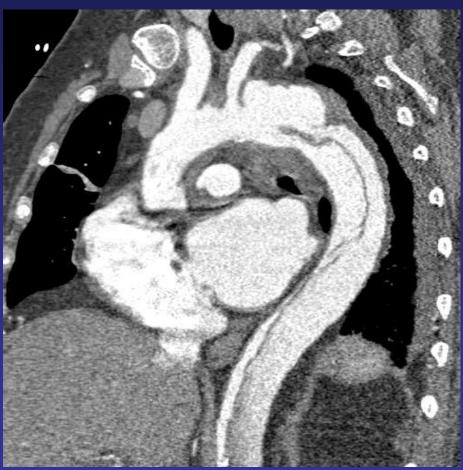
## Angio CT Type B aortic dissection





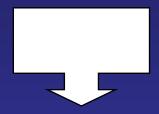
# Angio CT Type B aortic dissection







The patient underwent axillobifemoral by-pass surgery



with prompt and full recovery of lower limbs motility

#### **Acute chest pain**



## Type of pain - Clinical history - Comorbidity -



## Differential diagnosis Sepsis – Aortitis

A. Laudito, V. Gai, S. Battista, D. Garabello, G. Limerutti, M. Rinaldi *Circulation* 2008; 117(12): 1609

V Gai et al. Gastroenterology, 2008 in press