

中文題目：心臟節律器置放後之急性心臟衰竭

英文題目：Acute decompensated heart failure after pacemaker implantation

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Background:

Post cardiac injury syndrome (PCIS) is usually an inflammatory pericarditis that develops a few weeks after a cardiac injury, including myocardial infarction, cardiac surgery or trauma. Rarely, it can also occur after minor cardiac procedures. We presented a case of suspected PCIS after pacemaker implantation.

Case presentation:

A 62 years old female had underlying diseases of hypertension and type 2 diabetes mellitus. Due to complete atrioventricular block, she received a permanent pacemaker implantation. About 1 month later, however, she presented with shortness of breath and orthopnea. Chest X ray revealed cardiomegaly with pulmonary congestion and bilateral pleural effusion. Lab data showed elevated NT-pro-BNP (16873 pg/ml). Transthoracic echocardiogram revealed severely reduced left ventricular ejection fraction (LVEF) (21%) and moderate pericardial effusion. Since there was no tamponade sign, pericardiocentesis was not performed. Persantin myocardial perfusion scan revealed no evidence of myocardial ischemia. She then received medical therapy including diuretic, bisoprolol, and sacubitril/valsartan. After about 2 weeks of treatment, her symptoms got relieved and her chest X-ray improved. Echocardiogram 6 months later revealed total recovery of the LVEF (52%) and no pericardial effusion.

Conclusion:

Limited cases of PCIS after pacemaker implantation have been reported. Female gender, old age, and the use of active fixation leads serve as independent risk factors. Despite that the clinical courses are typically benign, PCIS may also induce severe cardiac complication. We confronted a case of acute decompensated heart failure possible related to PCIS following pacemaker implantation. The patient responded well to medical treatment with total recovery of cardiac function.

