

中文題目:台灣一名確診新冠肺炎 Delta 變異株患者非 ST 段抬高心肌梗塞的處置

英文題目: Management of A 73-year-old patient with confirmed Delta variant of COVID-19 who diagnosed as Non-ST Segment Elevation Myocardial Infarction in in Taiwan

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Abstract:

Coronavirus disease 2019 (COVID-19) is associated with a wide spectrum of cardiovascular (CV) manifestations. Clinical cardiac manifestations of COVID-19 disease include acute myocardial infarction, arrhythmias, and myocarditis, acute myocardial injury or heart failure. Elevated cardiac biomarkers sometimes provided in-consistent information and Health-care systems may need to re-construct strategies of COVID-19 on the CV system and to manage infected patients with CV disease.

Therefore, we report a case of a 73-year-old male patient, who presented with documented COVID-19 infection in the first outbreak of Delta variant in Pingtung, developing chest pain during hospital stay in Pingtung. The patient had a history of hypertension and chronic kidney disease. During the initial course of treatment, he received Casirivimb, Imdevimab and Dexamethasone. However, he developed chest tightness and dyspnea with elevated cardiac enzymes and sequential changes in electrocardiogram. Under the impression of non-ST segment elevation myocardial Infarction (NSTEMI), dual-antiplatelet and low-molecular weight heparin were prescribed. Then he was transferred to our hospital where coronary angiogram was performed and myocardial bridge was accidentally found. The patient had a favorable outcome with excellent recovery from the disease and discharged .

Conclusions:

Management of CV manifestations of patients with documented COVID-19 infection with Delta variant needs multidisciplinary teamwork and collaboration.