

Country cardiograms case 45

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A 53-year-old woman presents to her local emergency department with a 2-hour history of first-episode sharp retrosternal chest pain with associated dyspnea, nausea and diaphoresis. The pain started while she attended a graveside funeral service for a close friend. The patient's cardiac risk factors include lifestyle-controlled hypertension; hypercholesterolemia, for which she has been prescribed pravastatin; and a positive family history. Physical examination reveals a fourth heart sound. The initial electrocardiogram (ECG) is unremark-

able; however, troponin levels are elevated. The pain persists in spite of medical therapy, and a subsequent ECG reveals diffuse T-wave inversions (Fig. 1). What diagnosis is most likely based on this ECG? What areas of the myocardium appear to be involved? What coronary arteries are involved? Based on this history, what other diagnosis should be considered? How should treatment be managed?

For the answer, see page 154.

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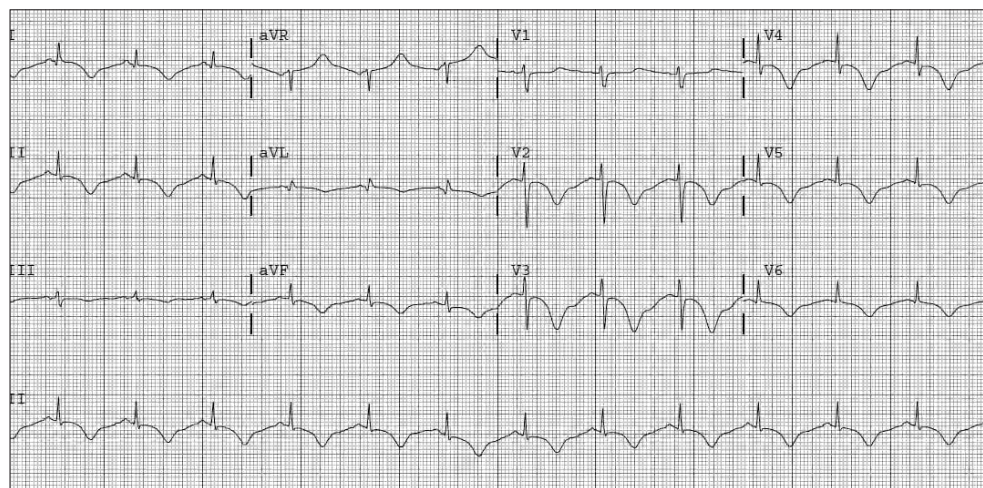


Fig. 1. Electrocardiogram of a 53-year-old woman with a first episode of retrosternal chest pain, showing T-wave inversions.