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IMAGES IN INTENSIVE MEDICINE

Massive pseudoaneurysm complicated with cardiac arrest after COVID 19 related myocardial infarction.

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The importance of comprehensive imaging study by multiple techniques in the hyperacute clinical setting is highlighted. A paradigmatic example of massive cardiac pseudoaneurysm with mitral valve's papillary muscle rupture due to myocardial infarction complicated with cardiogenic shock that required VA-ECMO support is shown. (A) *White triangle identifies left circumflex occlusion on coronary angiography.* (B) *Yellow triangle (YT) identifies massive pseudoaneurysm on scanner with the anatomical neck in blue line.* (C) *YT identifies massive pseudoaneurysm on scanner's orthogonal view.* (D) *Massive pseudoaneurysm (YT) on transesophageal echo (TE).* (E) *Red triangle identifies mitral regurgitation during in-surgery-TE.* (F) *Green triangle identifies pericardial patch over the repaired tissue.* Twelve hours after first symptom a successful surgical reparation with pericardial patch, mitral bioprosthesis implantation and venous bypass graft to the circumflex coronary artery was performed. To guarantee accurate emergent cardiovascular assistance, imaging, mechanical circulatory support options and neurological tests skills must be familiar to intensive care physicians.

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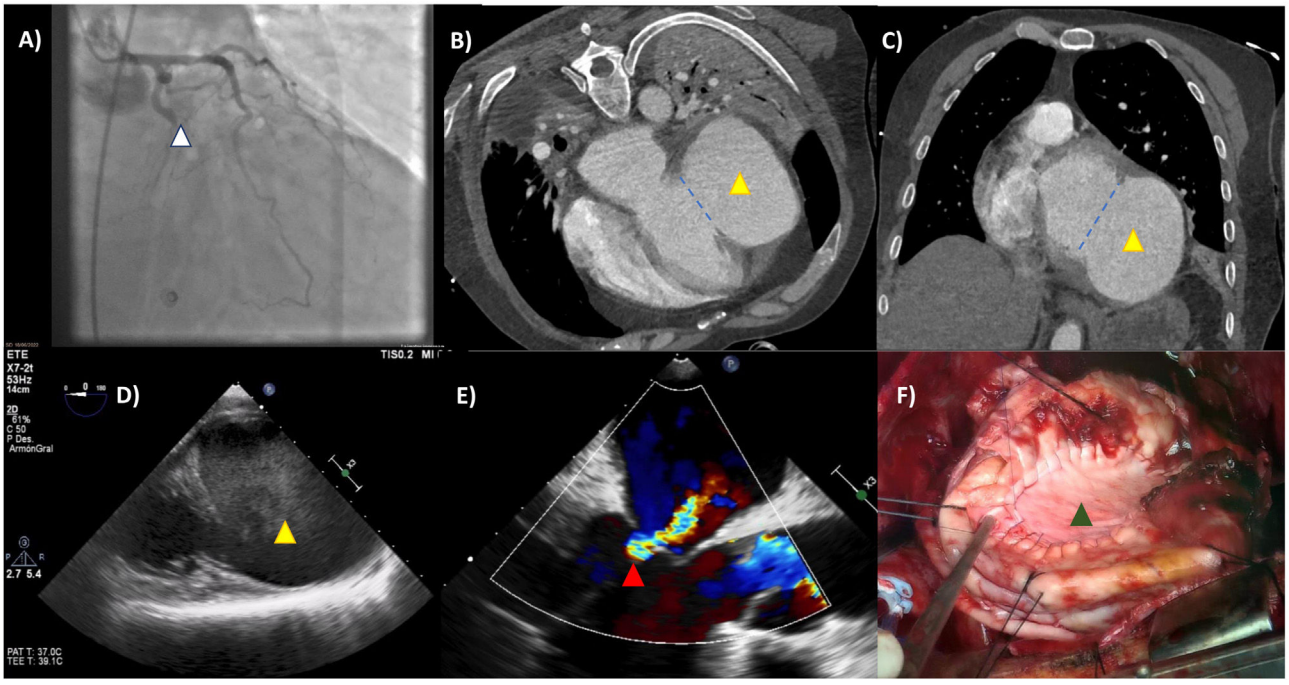

Figure 1

Authorship

Dr. CRG and Dr. RA prepared the original manuscript. Dr. AAL helped with imaging processing and paper review. All authors are responsible for this manuscript's content.

Conflict of interest

Authors do not have any conflict of interest to disclose related to the matter discussed in this manuscript.