



IMAGES IN INTENSIVE MEDICINE

Utility of the strain in the management of acute coronary syndrome: Report of clinical case of a spontaneous hematoma of coronary artery Utilidad del strain en el manejo del síndrome coronario agudo: a propósito de un caso de hematoma espontáneo de arteria coronaria



J. Navarro Martínez*, M. García Valiente, I. Keituqwa Yáñez

Unidad de Cuidados Intensivos y Electroestimulación Cardíaca, Hospital General Universitario Rafael Méndez, Lorca, Murcia, Spain

Received 20 December 2020; accepted 14 February 2021

Available online 13 August 2022

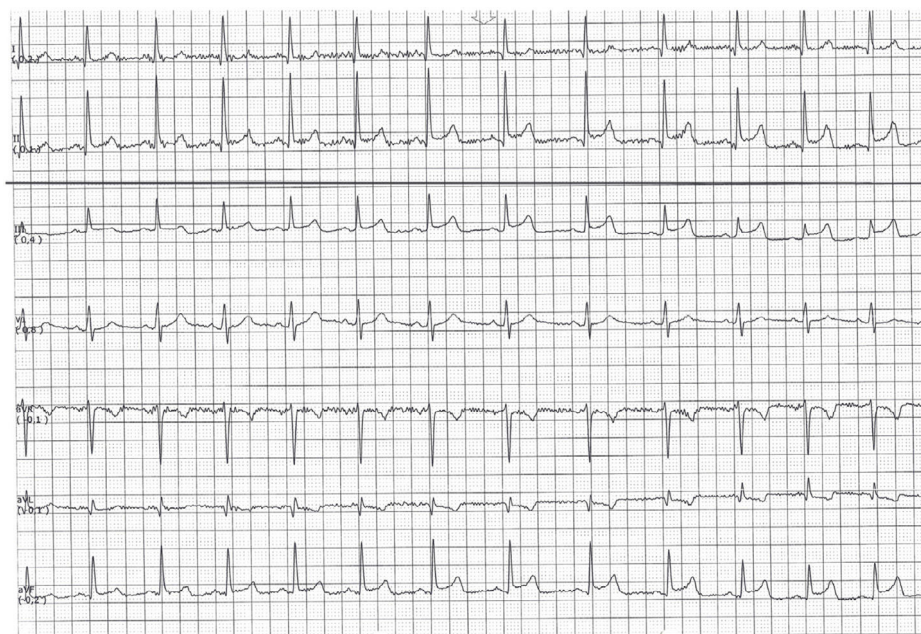


Figure 1 Electrocardiogram of the patient in the emergency room.

DOI of original article: <https://doi.org/10.1016/j.medin.2021.02.005>

* Corresponding author.

E-mail address: julian.navarro@um.es (J. Navarro Martínez).

<https://doi.org/10.1016/j.medic.2022.07.021>

2173-5727/© 2021 Elsevier España, S.L.U. and SEMICYUC. All rights reserved.

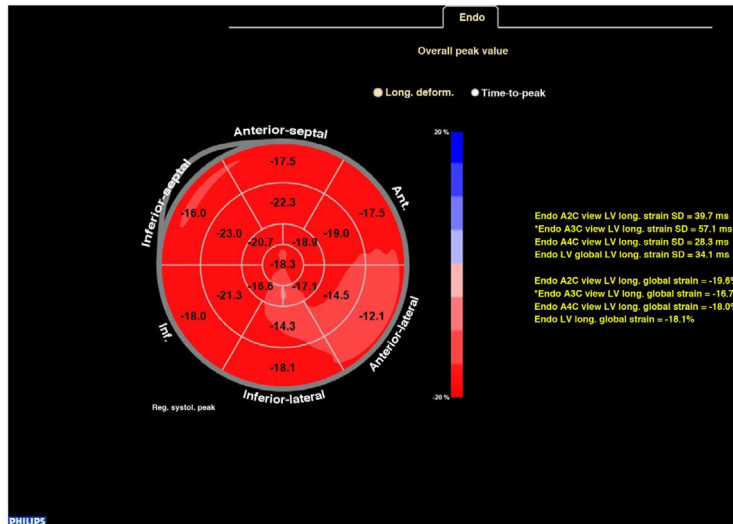


Figure 2 Patient's strain.

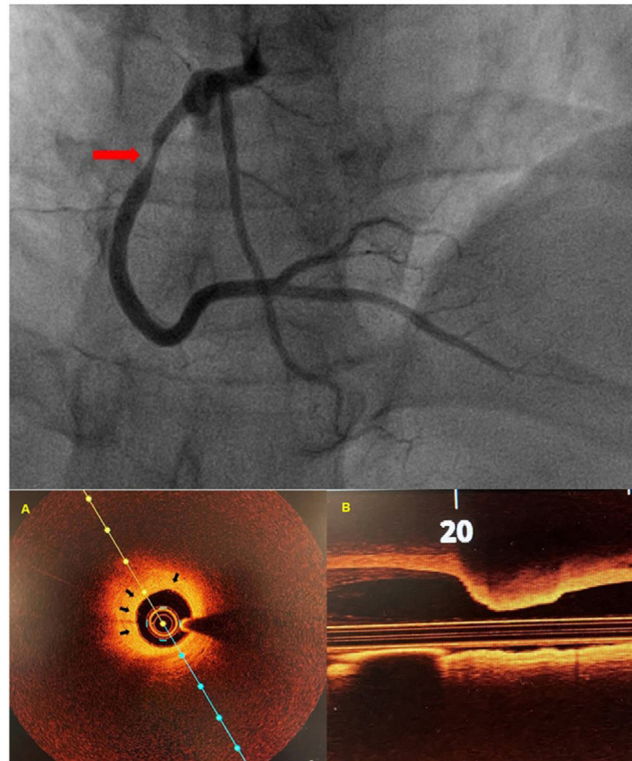


Figure 3 Cardiac catheterization and Optical coherence tomography (OCT).

This is the case of a 42-year-old man with chest pain with negative T waves in both III and aVF leads on the EKG (Fig. 1). The patient was admitted to our intensive care unit where he presented with a new episode of central-thoracic pain with transient ST-segment elevation in the inferior leads of the EKG (Fig. 1) and negative high-sensitivity troponin. The echocardiogram performed revealed a left ventricular ejection fraction of 58% (Appendix B; videos 1, 2, and 3) without contractility alterations. However, the study of the left ventricular (LV) longitudinal strain of the inferior side was impaired with a LV longitudinal global strain of -18% (Fig. 2). The coronary angiography performed revealed the presence of severe stenosis on the right coronary artery middle segment (Fig. 3; Appendix B; video 4) due to intramural hematoma without dissection as seen on the optical coherence tomography (Fig. 3). A stent was implanted in such artery (Appendix B; video 5) with favorable progression.

Appendix A. Supplementary data

Supplementary material related to this article can be found, in the online version, at doi:<https://doi.org/10.1016/j.medin.2021.02.005>.