





## Kounis syndrome or just coincidence

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**Introduction:** Kounis syndrome is described as an acute coronary syndrome related to allergic reaction<sup>1,2</sup>. The syndrome is caused by inflammatory mediators released in the event of hypersensitivity and allergic reaction to food, drugs, or insect sting. The syndrome is poorly described and often underdiagnosed, while its etiology is hard to determine due to numerous possible causes.

**Case report:** We describe 51-year-old male patient with arterial hypertension and diabetes, who reported flushing, malaise, and lightheadedness immediately after hornet sting. Upon Emergency Ambulance arrival, the patient was pale, diaphoretic, and hypotensive. Treatment for severe anaphylactic reaction was initiated. However, during the Emergency Department workup, patients reported anginal chest pain and sinus tachycardia was recorded. A 12-lead electrocardiogram showed ST segment elevation. The diagnosis of acute coronary syndrome was established and admission to the Cardiac Intensive Care unit was arranged. Urgent coronary angiography and successful percutaneous coronary intervention LAD using right trans radial approach was performed with one stent implantation in the responsible thrombotic occlusion of the proximal segment. After 6 days the patient was discharged. Moderate physical activity and a 12-month course of dual antiplatelet therapy were recommended.

**Conclusion:** Beside the case report, we here emphasize the importance of nurse practitioner care, as well as the importance of early recognition of acute coronary syndrome. One of the most important tasks of a nurse is observing the general condition of the patient and identifying pathological changes. Providing a high level of health care requires continuous education on new knowledge and skills.

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### LITERATURE

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