



## Unusual Non-ST-Elevation myocardial infarction presentation in a 75-year-old male with diabetes

**Authors:** Antonio Radović<sup>1</sup>, Toni Radić<sup>2</sup>, Eva Pleško<sup>3</sup>, Mladen Pospišil<sup>4</sup>, Tea Tuškan<sup>5</sup>

<sup>1</sup> Zagreb County Community Health Center, Sv. Ivan Zelina, Croatia

<sup>2</sup> General Hospital Zabok, Zabok, Croatia

<sup>3</sup> Krapina-Zagorje County Community Health Center, Gornja Stubica, Croatia

<sup>4</sup> Krapina-Zagorje County Community Health Center, Sveti Križ Začretje, Croatia

<sup>5</sup> Institute of emergency medicine of Sisak-Moslavina County, Sisak, Croatia

### Background:

Acute myocardial infarction is a common emergency condition split into myocardial infarction with ST elevation (STEMI), non-ST elevation myocardial infarction (NSTEMI) and unstable angina. NSTEMI patients usually present with classic symptoms of myocardial infarction: chest pain that may radiate to either arm, neck, or jaw, associated dyspnea or nausea. Elderly patients, females or patients with diabetes can present with rare/uncommon symptoms.

### Case presentation:

We report a 75-year-old male that was examined by his family medicine physician for left shoulder pain. The patient had a long-term history of hypertension and diabetes, and reported he had fallen the previous day. Physical examination did not provide any signs of traumatic damage and were all negative for rotator cuff injury. The patient was instructed to ice and rest his shoulder with analgesics as needed and to make an X-ray imaging of the shoulder. The patient returned in a week with a non-deviating x-ray and unmitigated pain in the shoulder. A further anamnesis revealed that the patient had been experiencing dyspnea and shortness of breath in the last few days alongside being unable to handle more laboring activities. An ECG revealed ST-elevations in leads V1-V4, indicative of NSTEMI. The patient was hospitalized through the emergency department and an invasive coronarography was indicated the next morning. The coronarography revealed a near-total stenosis of the LCx and a 50% stenosis of the LAD artery, in the same procedure the LCx was stented. The patient was released after one more day of hospitalization with a new diabetic and hypertension therapy as well as a new diet and other cardiovascular disease recommendations.

### Conclusion:

NSTEMI is a life-threatening condition which can be easily missed due to non-specific symptoms that can be seen in long-term diabetics with advanced neuropathy and the elderly.

### Keywords:

myocardial infarction, NSTEMI, shoulder pain, diabetic neuropathy