

Vasospastic angina as a cause of cardiac arrest: a case report

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KEYWORDS: cardiac arrest, coronarography, vasospastic angina.

CITATION: *Cardiol Croat.* 2024;19(11-12):375. | <https://doi.org/10.15836/ccar2024.375>

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Introduction: Vasospastic angina is a clinical condition that occurs as a result of an abnormal spasm of the coronary arteries. It includes chest pains during rest, transitory ST-T segment changes, and adequate response to nitrates.¹

Case report: We report the case of a 44-year-old male who presented to the Emergency Department by ambulance due to chest pain that woke him during the night. The pain was localized in the middle of the chest, without any propagation. He complained of nausea and sweating. During the transport, he suffered cardiopulmonary arrest with the initial rhythm being ventricular fibrillation. He was defibrillated successfully. Upon arrival to the emergency room, his symptoms subsided. Electrocardiogram showed ST-elevations in leads V1-V6. Laboratory results revealed elevated troponin T levels of 108 ng/L. He was admitted to the Intensive Care Unit. Coronarography established atherosclerotic disease of the left coronary artery without significant stenosis, so an acetylcholine test was indicated. During the test, upon administration of acetylcholine, the patient developed chest pain followed by vasospasm of coronary arteries. The vasospasm subsided after the application of nitroglycerin and the diagnosis of vasospastic angina was confirmed. He was prescribed diltiazem and discharged home.

Conclusion: Although vasospastic angina is a rare form of angina, it should always be considered as a potential diagnosis because in a small percentage of cases, it can lead to sudden cardiac death.

RECEIVED:
October 12, 2024

ACCEPTED:
October 31, 2024



LITERATURE

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