





An oncological patient and an implanted implantable cardioverter-defibrillator: a case report

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Introduction: Cancer and heart failure represent serious health issues that are interconnected, as certain types of cancer and their treatments can significantly impact cardiovascular health. Heart failure may occur because of the toxic effects of chemotherapy, radiation therapy, or the tumor itself, leading to decreased cardiac function and an increased risk of severe cardiac arrhythmias. In such cases, the implantation of an implantable cardioverter-defibrillator (ICD) can be a crucial preventive measure against sudden cardiac death.¹

Case report: This case involves a 44-year-old female patient with an implanted subcutaneous ICD due to toxic cardiomyopathy and reduced ejection fraction, a consequence of a primary breast cancer diagnosis. The patient presented at the electrophysiology clinic feeling anxious, frightened, and distracted, reporting a possible ICD activation while dancing. This case emphasizes the importance of a multidisciplinary approach and holistic care for patients with complex health issues. To rule out potential complications, we first tested the ICD device. The memory of the intracardiac ECG showed no shock activation, confirming that there was no actual cardiac arrhythmia when the patient experienced her symptoms. Additional examinations were conducted, including cardiac MRI, chest X-ray, laboratory tests, and ECG.² Through conversation with the patient, we assessed her anxiety level, which was primarily related to the fear of unexpected ICD activation in everyday situations. Education played a crucial role in our approach: we explained in detail how the device works and under what conditions it might activate. We also reiterated proper behavior and emphasized that she could continue her activities, including dancing, without fear. Additionally, we recommended further psychological support to help her cope with her fears.

Conclusion: This case highlights the importance of a holistic approach to patients with ICDs. Along with technical device checks, it is equally important to understand the patient's emotional needs. Education, clear communication, and providing support are crucial for reducing anxiety and enabling a safe return to daily activities. A multidisciplinary team, including nurses, cardiologists, oncologists, and psychologists, can significantly contribute to optimizing care and long-term outcomes for patients with subcutaneous ICDs.

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LITERATURE

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