AN UNUSUAL CASE OF INFECTIVE ENDOCARDITIS PRESENTING AS ACUTE MYOCARDIAL INFARCTION

N. Gultekin, E. Kucukates, G. Bulut, K. Kılıçkesmez, E. Kansız
Istanbul University Cardiology Institute, Istanbul, Turkey

A 42 year-old man was admitted with symptom for 30 minutes of severe chest pain complaint at emergency room. In the patient's history was underwent prosthetic aort and mitral valve replacement passed nine years ago. He has been reported orderly warfarin used. In the patient's physical examination which was admitted to coronary intensive care unit (CICU) was showed blood pressure:120/80 mmhg; cardiac apex beat:90/minute arhytmic; temperature:36.5 ºC. There was a grade 3/6 systolic ejection murmur at aortic and mitral area in same focus associated with prosthetic valves voices. The electrocardiogram showed atrial fibrillation as basic rhythm. Also, there was ST elevations with 6 mm at V1-V4 derivations. His chest pain and electrocardiography changes resolved subsequent to nitrate within ten minute and remained hemodynamically stable. The 6-hour troponin was increased at 14.7. The patient's fever on 4 th day of its height was developed to 38.5°C. After blood cultures were taken, as empirical parenteral ampicillin +sulbactam treatment was administrated. Coagulase negative staphylococci were identified from his blood cultures. His temperature was dropped after 48 hours following antibiotherapy. In the transthoracic echocardiography (TTE) was not determinated meaningful in favor of finding infective endocarditis. His physician decided on coronary angiographic (CAG) examination. In CAG was established a septic lobulated contours embolus in the region mid left anterior descending artery. Therefore, transeogageal echocardiography (TEE) established. In TEE was determinated on the prosthetic aort and mitral valves 0.24x0.26 and 0.30x0.40 mm vegetations, respectively. After four week antibiotherapy, the patients was full healed and discharged from hospital.

The transmural myocardial infarction that occured as a result of infective endocarditis is very rare and is around %0.1. Our case report is an interesting extremely rare one.