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CLINICAL FEATURE ANALYSIS OF TAKO-TSUBO CARDIOMYOPATHY

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Objectives To discuss the clinical features of Tako-Tsubo cardiomyopathy.

Methods The data of 7 cases of Tako-Tsubo cardiomyopathy patients that were admitted to the first hospital of China Medical University between January 2008 and March 2012 were retrospectively analysed.

Results Five patients were female (3 cases were postmenopausal women and their age was over 60 years old), while two cases were male. 4 cases were related to stressful factors before the onset of the disease. The initial symptoms: six cases had chest pain and chest stuffiness simultaneously, while one case had chest stuffiness alone. Other concomitant symptoms include: 4 cases had profuse sweating, five cases had nausea and vomiting, four cases had heart failure. The admission electrocardiogram changes of six patients were ST-segment elevation. The troponin I level: five cases were only slightly elevated, one case was increased significantly (22.78 μ g/l), while 1 case was normal (0 μ g/l). The coronal artery angiographies of all seven cases didn't show coronary artery stenosis which was >50.0%. The left ventricular angiography and colour Doppler echocardiography of seven cases were systolic apical ballooning of the left ventricle.

Conclusions Tako-Tsubo cardiomyopathy should be considered as a differential diagnosis of acute myocardial infarction. When the following conditions appears: postmenopausal women, psychological or physical stressful factors before the onset of the disease, inconsistent electrocardiogram and cardiac enzyme changes, we should pay highly attention to the possibility of Tako-Tsubo cardiomyopathy. Colour Doppler echocardiography, coronal artery angiography and left ventricular angiography are the strong basis for differential diagnosis.

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