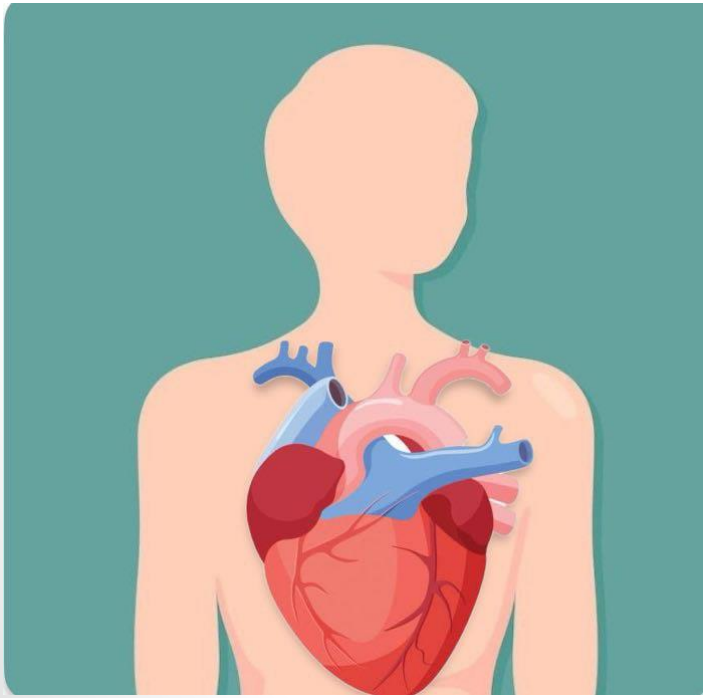
COMPENSATED LEFT VENTRICULAR ANEURYSM



PRESENTER : Dr K.Prathyusha
First year postgraduate
Dept of Anaesthesiology

MODERATOR : Dr Mastan Saheb
Professor and Director
Dept of Anaesthesiology &
Organ Transplantation

Presenting Complaints

PATIENT DATA

Age : 64 yrs

Gender : Female

Occupation :House wife

Address : Macherla

CHIEF COMPLAINTS

Breathlessness

Chest pain

Palpitations

History of present illness

- Shortness of breath
  - Since 2 months
  - Insidious in onset
  - NYHA Grade III
- Chest pain
  - Since 20 days
  - Sudden in onset,
  - Intermittent and
  - Associated with exertion
- Palpitations

Past history

- Thyroidectomy

  11 yrs ago and is on Tab THYROXIN 100 mcg once daily since 11 yrs

- Hypertension

  since 7 yrs and is on

  Tab METOPROLOL 25 mg once daily

- Diabetes type 2

  since 1 yr and is on

  Tab METFORMIN 500mg once daily

Personal history

Nil

Family history

CAD

Physical examination

- Patient is conscious , coherent
- Well oriented
- Built normal
- Weight : 53Kgs
- Height : 154Cms
- BMI : 22.4Kg/m

No pallor ,
Cyanosis ,
Icterus,
Lymphadenopathy ,
Pedal edema,
No jvp

COMPENSATED
5 VASCULAR SYSTEMS

Vitals

- Blood Pressure :

  140/90 mmHg

  Right brachial artery
  Sitting position

- Pulse :

  90 bpm ,regular , adequate volume
  all peripheral pulses felt

- RR : 20cycles/min
- SpO_2 : 98% @ RA
- Temp : Afebrile

Systemic Examination

- CVS :

  First and Second heart sounds(S1 , S2) are heard , no added sounds and no murmurs

- Respiratory System :

  Chest Expansion is equal,normal vesicular breath sounds and no added sounds

- Abdomen :

  soft and non tender, bowel sounds +

- CNS :

  No focal,central and peripheral neurological deficits

- Spine :

  Normal

Airway examination

- Oral cavity : adequate with
- Tongue :normal size
- Dentition : normal
- Mouth opening > 3 finger breadths
- Neck – normal range movements
- Mallampati grading - class 1
- Thyromental distance Adequate

Investigations

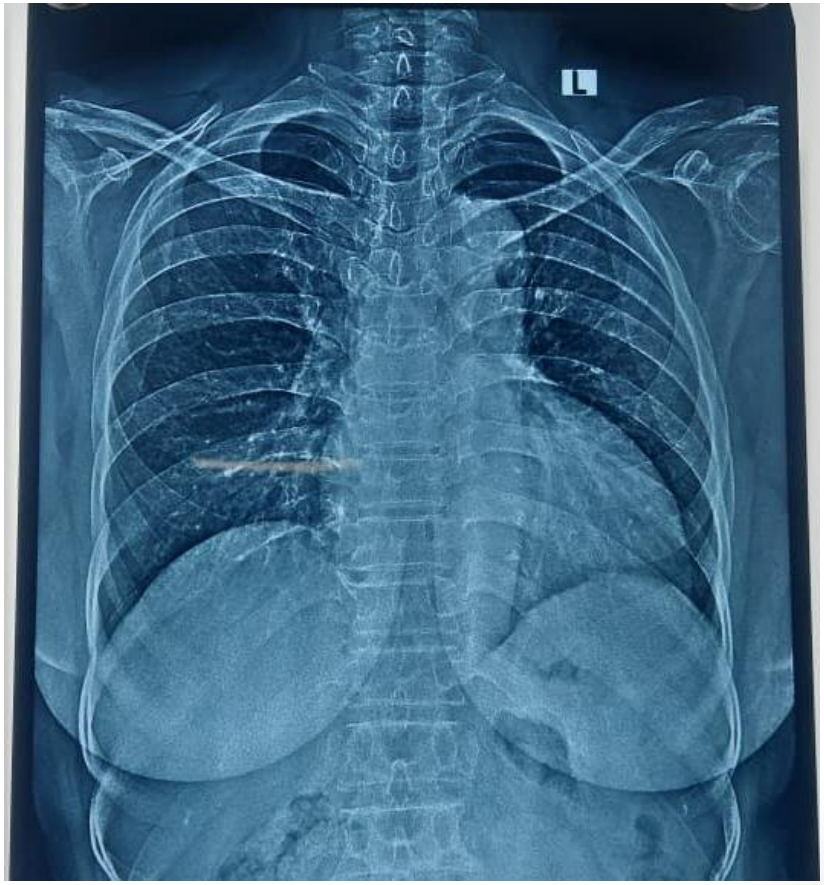
- **Haematological**

  within normal range

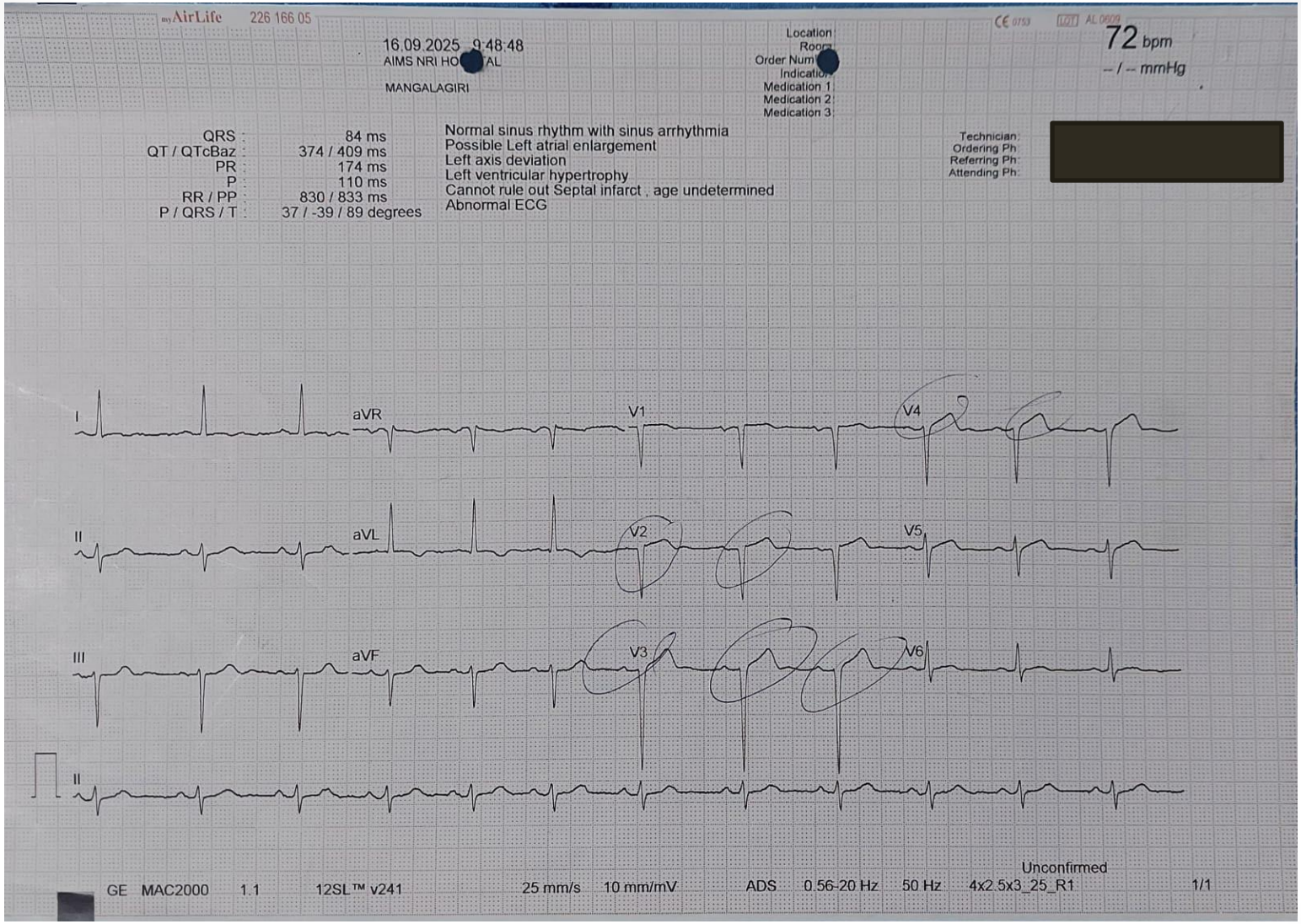
- **CHEST X RAY PA view** :

  cardiomegaly

  normal lung fields



ECG :



Normal sinus Rhythm with persistent concave ST elevations in V2,V3,V4 leads with deep Q waves

2D ECHO :

Dilated LV with large Aneurysmal sac

EF 34 % means severe LV systolic dysfunction

RWMA to LAD territory

LV aneurysm

occupied with clot

Mild MR,TR and PAH

USG ABDOMEN :

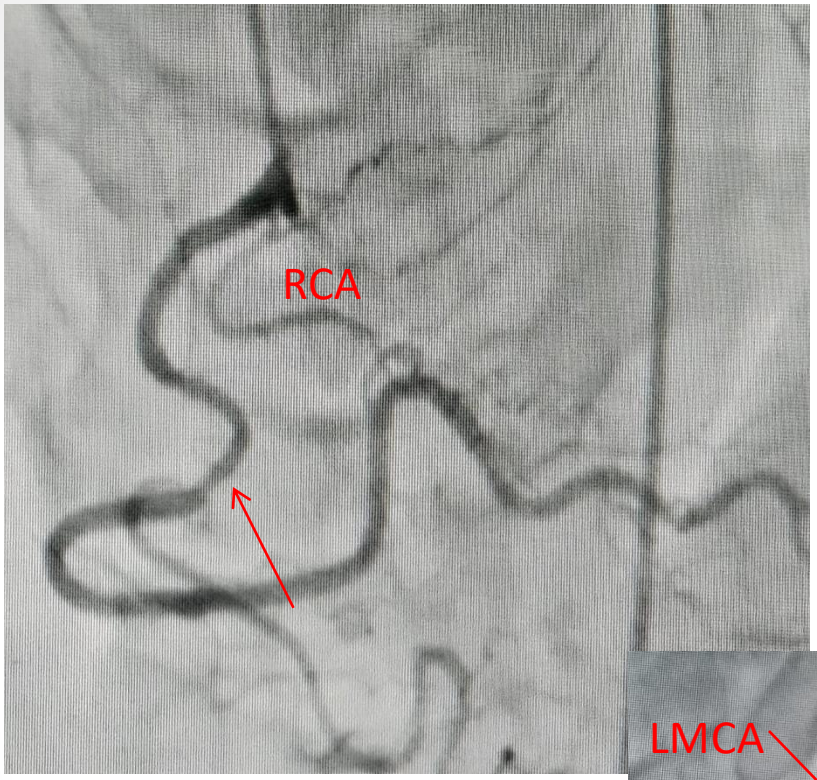
No abnormality detected

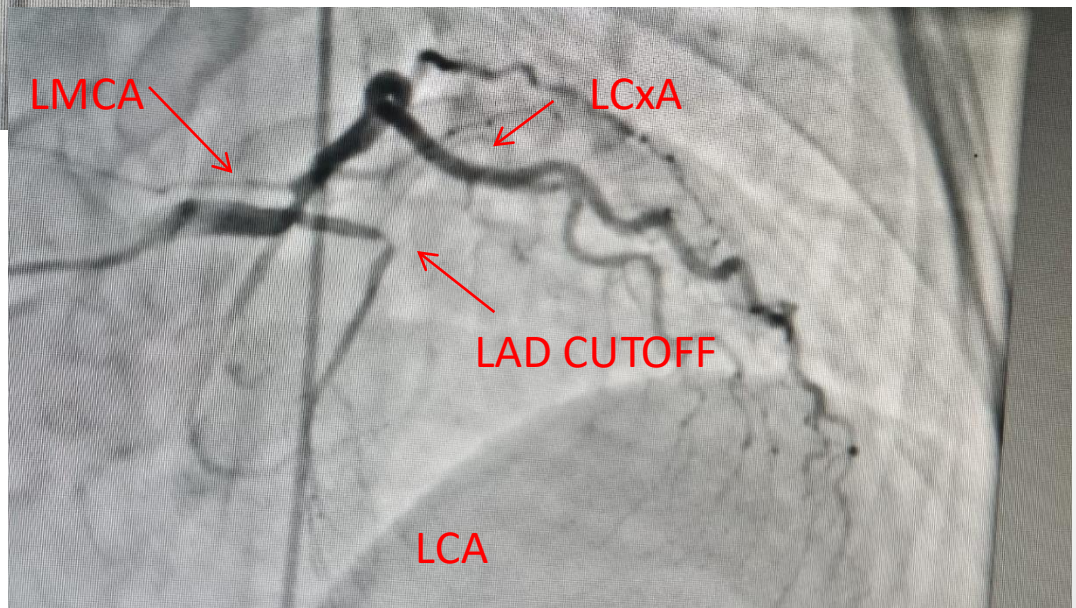
CAROTID DOPPLER :

normal in course

normal flow velocities

CORONARY ANGIOGRAM





CLINICAL DIAGNOSIS:

CRITICAL TVD
LV ANEURYSM
LV CLOT

SURGERY

CABG
LV REMODELLING
CLOT EVACUATION

THANK YOU