

Cardiomyopathy following a ruptured ectopic pregnancy: A case report

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ABSTRACT

Introduction: Takotsubo cardiomyopathy is a transient left ventricular dysfunction following acute emotional or physical stress that has been reported in peri-operative period in cardiac and non-cardiac surgeries. **Case Description:** A 35-year-old woman presented to the emergency department with sudden onset of generalized abdominal pain and per vaginal bleed. Blood investigations showed a haemoglobin of 4.5g/dL with a positive urine pregnancy test. Bedside ultrasound abdomen revealed floating uterus, free fluid up to Morrison's pouch and left adnexal mass 4.4cm x 4.9cm. Fluid resuscitation and massive transfusion protocol was started and the surgeons subsequently proceeded with emergency laparotomy and salpingectomy. 16 hours post operatively, she developed acute pulmonary oedema requiring high ventilatory support and diuretics. Urgent echocardiogram showed poor left ventricular function with ejection fraction 15% with dilated left ventricle, regional wall motion abnormality over interventricular septum, septal, anterior, and apical akinesia with hypokinesia over other walls. Otherwise, no valvular lesions or intramural thrombus was seen. Case was referred to the cardiac centre for extracorporeal membrane oxygenation (ECMO) in view of multiorgan failure, needing double inotropic support. Patient recuperated well with the treatment given. Her repeated echocardiogram one month later showed recovered left ventricular ejection fraction of 60% with no wall motion abnormality. **Discussion:** Further investigations need to be done to explain the exact aetiology of transient cardiomyopathy. However, it is possible that the patient had Takotsubo cardiomyopathy following the ruptured ectopic pregnancy.

Keywords: cardiomyopathy, ectopic pregnancy, ECMO