Sudden cardiac death: clinical perspectives from the University of Maiduguri Teaching Hospital, Nigeria

Aimé Bonny¹ (1), Ma Talle (2), B. Bakki (2), Faruk Buba (2), Co Anjorin (2), H. Yusuf (2)
(1) University of Douala, Douala, Cameroun – (2) University of Maiduguri, Maiduguri, Nigeria
*Corresponding author: aimebonny@yahoo.fr (Aimé Bonny)

Background Despite tremendous advances in the management of cardiovascular diseases and cardiac arrest, there is paucity of information regarding sudden cardiac death in sub-Saharan Africa. We present a two-year review of sudden cardiac death cases among patients managed at a Nigerian tertiary hospital.

Material and Methods Patients admitted from January 2012 to December 2013 were prospectively followed-up and cases of sudden cardiac death identified. Diagnosis was based on records of events preceding death, direct interview of attending physician/nurses, and family members/eye witnesses for out-of-hospital sudden cardiac death. Causes of death were obtained from the death certificates for cases of in-hospital events.

Results Three hundred and eighty eight (M:F=1:1.3) patients with a mean age of 42.2±19.30 years were admitted into the cardiac unit during the period, out of whom 56 (14.4%) died. Twenty three (41.1%) were classified as sudden cardiac death. The predominant etiology was ischemic cardiomyopathy (39.1%), followed by peripartum cardiomyopathy (21.7%) and dilated cardiomyopathy (17.4%). Rheumatic heart disease was diagnosed in 17.4%, while 4.3% had pulmonary hypertension. Nineteen (82.6%) of the subjects had congestive cardiac failure. Hypokalemia and hypocalcaemia were recorded in 2 (8.7%) patients who developed prolongation of the QT interval following commencement of diuretics. Chest-compression-only cardiopulmonary resuscitation was attempted in 12 (52.1%) with a success rate of 8.3%.

Conclusion Sudden cardiac death is common among our patients admitted with cardiovascular diseases. The most common etiology is ischemic cardiomyopathy, followed by peripartum cardiomyopathy. Most of the victims were young, and there were no optimum resuscitative measures.

The author hereby declares no conflict of interest

Prognostic value of heart rhythmic events in systemic sclerosis

Nadera Methia¹, Samia Latreche, Messaouda Djobhi, Salim Benkhedda
CHU Mustapha Pacha, Alger, Algérie
*Corresponding author: methia_nad@yahoo.fr (Nadera Methia)

Background Systemic sclerosis (SSc) is a multi-systemic disease, responsible for the occurrence of fibrosis interesting skin and some organs such as the heart. The rhythm and conduction disturbances are probably one of the main prognostic factors for heart involvement in systemic sclerosis. Conduction disorders are common and generally not serious, and arrhythmias, especially ventricular ones are more threatening. Performing Holter ECG shows significant abnormal Heart rhythm disturbances percentage.

Conclusion Rhythm and conduction disorders are frequently encountered in systemic sclerosis and constitute one of cardiac manifestations affecting the vital prognosis.

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Elderly patients and preexcitation syndrome. Why they should be managed as young patients?

Arnaud Olivier (1), Nicolas Girerd (2), Béatrice Brembilla-Perrot(3)
(1) CHU Nancy, Brabois, Cardiologie, Vandoeuvre Les Nancy, France – (2) Université de Lorraine, INSERM, Centre d’Investigations Cliniques 9501, Vandoeuvre Les Nancy, France – (3) CHU Nancy, Brabois, Vandoeuvre Les Nancy, France
*Corresponding author: b.brembilla-perrot@chu-nancy.fr (Béatrice Brembilla-Perrot)

Introduction Few data are reported on pre-excitation syndrome (PS) in the elderly. The aim was to investigate the influence of advancing age on clinical presentation, treatment and long-term outcome of PS.