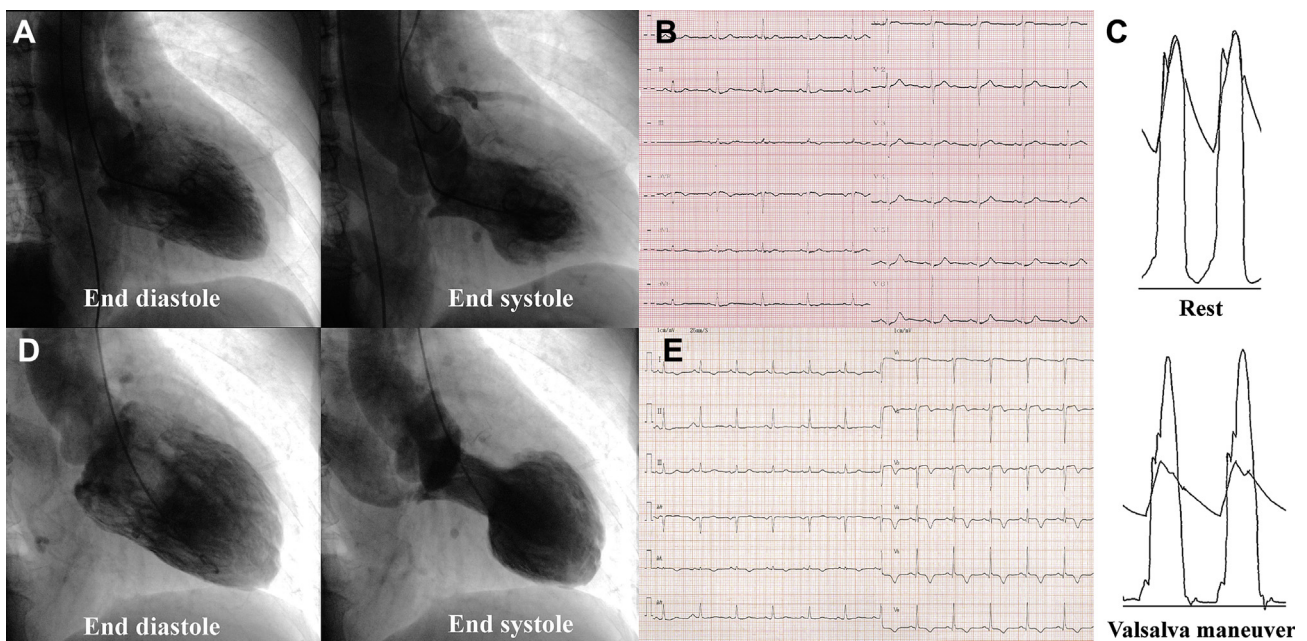


IMAGES IN CARDIOLOGY

Recurrent Takotsubo Cardiomyopathy With Variable Left Ventricular Obstruction and Morphologies

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A 60-year-old woman presenting with chest pain with elevated troponin T had different patterns of electrocardiogram and left ventricular (LV) morphologies associated with Takotsubo cardiomyopathy. Each coronary angiography was revealed to be essentially normal. The first episode demonstrated midventricular ballooning with hypercontractile apex and base (A, [Online Video 1](#)) and nonspecific ST-T changes (B). Left ventricular obstruction was documented after Valsalva maneuver (C). Eighteen months later, the second episode showed typical apical ballooning (D, [Online Video 2](#)) with inverted T-wave (E) and no LV obstruction. Both episodes followed emotional stress. Variability of beta-adrenergic receptor sensitivity might associate with recurrent cardiomyopathy with different LV obstruction and morphologies.