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Exercise-induced torsades de pointes as an unusual presentation of cardiac sarcoidosis: A case report and review of literature

Ghafari C *et al.* Unusual presentation of CS

Chadi Ghafari, Frederic Vandergheynst, Emmanuel Parent, Kaoru Tanaka, Stéphane Carlier

## Abstract

### BACKGROUND

Sarcoidosis is a rare multisystem disease characterized histologically by non-caseating granuloma formation in the affected organ. While cardiac sarcoidosis is found on autopsy in up to 25% of sarcoidosis cases, it is still underdiagnosed and is associated with a poor prognosis. Although the etiology of sarcoidosis remains unclear, an antigen triggered exaggerated immune response has been hypothesized. Early detection and prompt management of cardiac sarcoidosis remains pivotal.

### CASE SUMMARY

A 60-year-old female, with pulmonary sarcoidosis in remission, presented to the

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The early after depolarization, which is an interruption of repolarization, can evoke a second upstroke or a salvo of action potentials. It is suggested that the electrophysiological characteristics of the early after depolarization can produce a lengthening of the QT interval and that the second upstroke and salvo of activity that may follow, it can explain many features of torsade **de pointes** ...

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**Takotsubo cardiomyopathy-related** complete heart block and **torsades de pointes**. **Takotsubo cardiomyopathy (TCM)** is a relatively recently recognised clinical entity. It frequently mimics **acute coronary syndrome** and is accompanied by reversible left ventricular apical ballooning in the absence of angiographically significant **coronary artery stenosis**.