

Abstract

Takotsubo cardiomyopathy (TSC) following seizures is reported in the literature. The patient is a 35 year old female with a history of childhood epilepsy and developmental delay. She presented with status epilepticus which followed a respiratory arrest. There were no identified precipitants found the breakthrough seizure. Electrocardiogram (ECG) showed ST depression in the inferolateral leads and 2D-echo cardiography (ECHO) showed left ventricular (LV) wall cardiomyopathy. The coronary angiogram (CA), left heart catheterization and left ventricular angiogram revealed mid LV type TSC with normal coronary arteries. The patient was managed symptomatically. This case illustrates the presence of stress induced cardiomyopathy in patients with acute medical illnesses and emphasizes the importance of performing an ECG in patients with status epilepticus irrespective of cardiac symptoms and signs.