

80 years-old gentleman

Mild asthma

2002- SOB evaluated and found to have a cardiomyopathy (?).

5/2006 Complaint or finding of cardiac heart block (years ago “skipped beats”). Underwent PPM implantation.

Around that time he developed Atrial flutter.

9/6/2006 Successful ablation of his atrial flutter.

29/6/2006 Angioplasty and stenting of mild obstruction (40%) in the proximal LAD. Two days later acute thrombosis of the stent.

7/2006- Two cardioversions for atrial flutter/fibrillation, and multiple admissions for CHF. PROCOR Tx.

Easy fatigue and complains of SOB with minimal exertion. No orthopnea, no PND, abdominal distension++

11/4/07 ECHO: Moderately dilated LV

Moderate LAE and mild RAE

Moderate to severely reduced LV systolic function (LVEF=25%)

Segmental wall motion abnormalities (LAD territory)

RV normal in size and systolic function.

Mild MR

9/2006- CRT implantation

4/2007 Consultation at the Cleveland Clinic

Exchange of CRT to CRTD (ICD)

Lab: Increased level of PSA

Lytic lesions in bones. Metastatic CA of prostate

10/2008 Worsening of symptoms: severe dyspnea on effort and abdominal distension.

Px BP 95/70, 75/min, No pulmonary crackles, mild pedal edema

Tx: Plavix 75 mg/day

Metolazone 2.5 mgX1 occasionally

Candesartan 2 mg/day

Zocor (Simvastatin) 20 mg/day

Warfarin per INR

Digoxin 0.0625 mg/day

Bumetanide 1 mg/day

Spironolactone 25 mg/day

Simbicort and Tiotropium puffx2/day

Lab: WBC 8410

Hb 12.4

Plts 253

INR 1.87

Creatinine 1.62

Urea 63

Cholestesrol 152

Iron 84 (49-181)

Ferritin 250 (18-370)

Digoxin 0.3

Points for Tx

Beta blockers?

Increase ARB?

Digoxin level?

CRT evaluation

IV Venofer or c/Erythropoetin

Points for Tx

Beta blockers?

Increase ARB?

Digoxin level?

CRT evaluation

IV Venofer or