

Image in cardiology

Massive Myocardial Necrosis due to Churg-Strauss Syndrome

Necrosis miocárdica masiva por síndrome de Churg-Strauss

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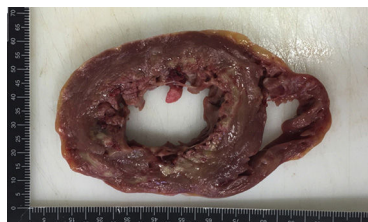


Figure 1.

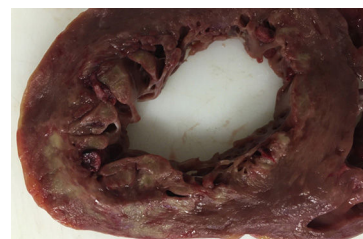


Figure 2.

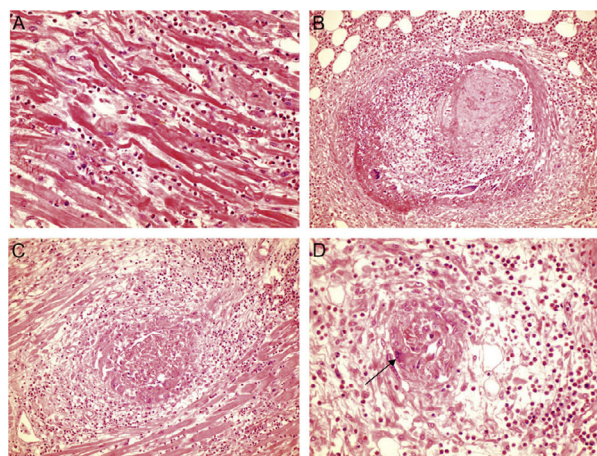


Figure 3.

Churg-Strauss syndrome has been described as a type of disseminated necrotizing vasculitis with extravascular granulomas that occurs in patients with asthma and eosinophilia. Several organs may be involved and its incidence is low. Cardiac complications can be varied and are associated with a worse prognosis.

We present the case of a 38-year-old Spanish man with a history of asthma and cannabis consumption. After several days of general malaise, weight loss, and asthenia, he had a cardiorespiratory arrest and died after advanced cardiopulmonary resuscitation. Forensic autopsy revealed, among other findings, pericarditis and pericardial effusion of a purulent appearance, cardiomegaly, and findings consistent with left ventricular and papillary muscle necrosis (Figure 1 and Figure 2). The provisional diagnosis was sudden cardiac death due to myocarditis.

Histopathology study showed necrotizing vasculitis with disseminated extravascular granulomas and hypereosinophilia, with involvement of several organs. From the cardiological point of view (Figure 3), a massive ongoing heart attack was detected with intracardiac thrombosis. Interstitial eosinophilic infiltrate and myocardial fiber necrosis (Figure 3A, hematoxylin-eosin $\times 40$), necrotizing vasculitis with intraluminal thrombosis (Figure 3B, hematoxylin-eosin $\times 40$), and presence of extravascular granulomas and giant cells (Figure 3C and D, arrow; hematoxylin-eosin $\times 40$) were observed. The final diagnosis was death caused by massive myocardial necrosis due to Churg-Strauss syndrome.

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