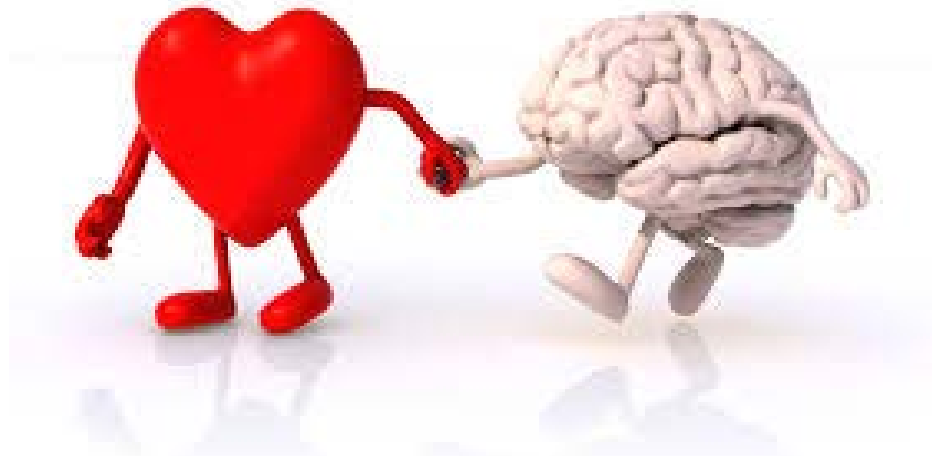


# Liaison between Cardiology & Psychiatry



Dr. Vinod Kaneria

# Case-1 (58/M)

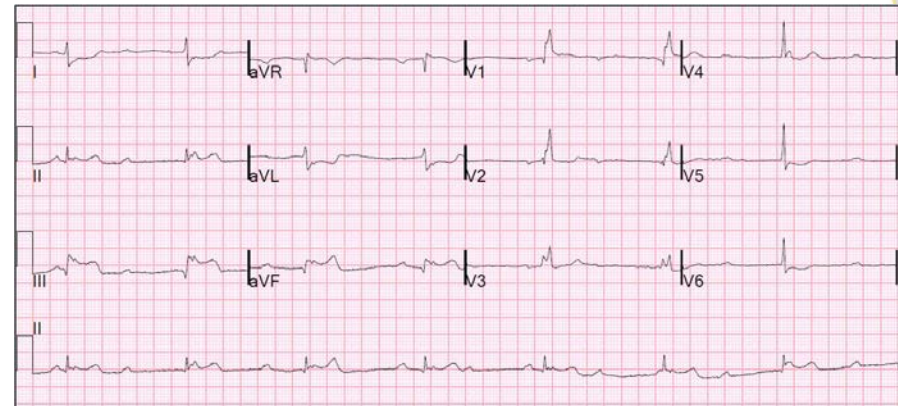
- ❑ Admitted in ICCU for the 5th time
- ❑ Attacks of palpitation, chest pain, difficulty in breathing, choking sensations and feelings of impending doom, lasting for few minutes at a time occurring once in 2-3 weeks since last few years
- ❑ Pulse rate = 43 per minute
- ❑ ECG shows complete A-V block



# Symptoms of heart block

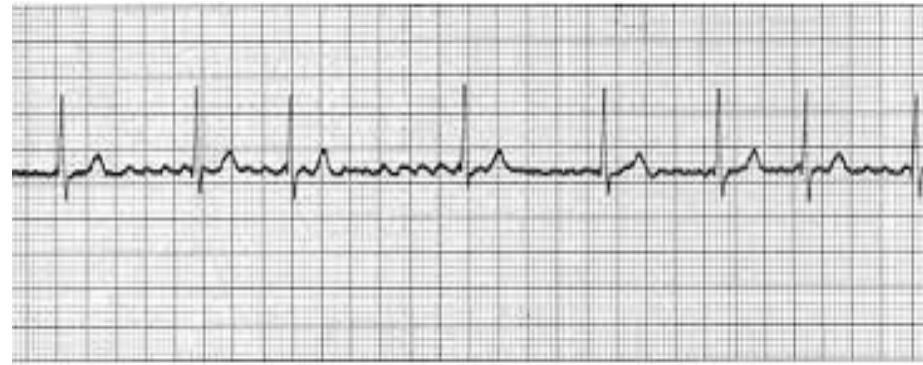
(May be episodic)

- ❑ Chest pain
- ❑ Shortness of breath
- ❑ Dizziness or light-headedness
- ❑ Fainting
- ❑ Fatigue (tiredness)



# Symptoms of arrhythmias

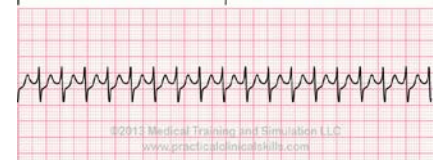
- ❑ Palpitations (feelings that your heart is skipping a beat, fluttering, or beating too hard or fast)
- ❑ Chest pain
- ❑ Shortness of breath
- ❑ Weakness, dizziness, and light-headedness
- ❑ Fainting or nearly fainting
- ❑ Sweating
- ❑ Anxiety



# Symptoms of paroxysmal supraventricular tachycardia

## Paroxysmal attacks of

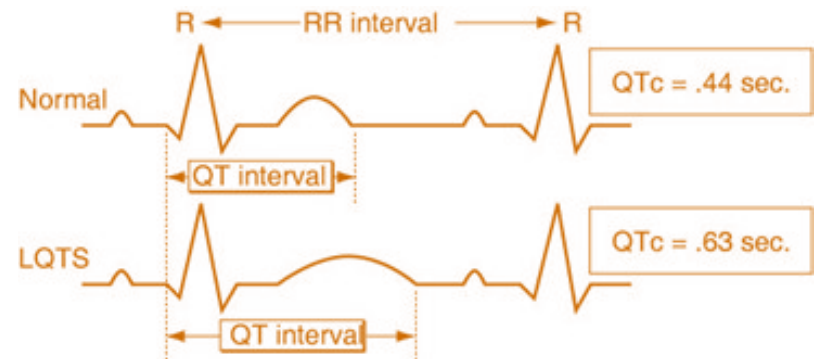
- ❑ A racing or fluttering feeling in the chest, palpitations, Chest discomfort (pressure, tightness, pain)
- ❑ Light headedness or dizziness, Fainting (syncope)
- ❑ Shortness of breath, tightness or fullness in the throat, choking sensation
- ❑ A pounding pulse (You may feel or see your pulse beating, especially at your neck, where large blood vessels are close to the skin)
- ❑ Sweating, Tiredness (fatigue), urge to pass urine or stool



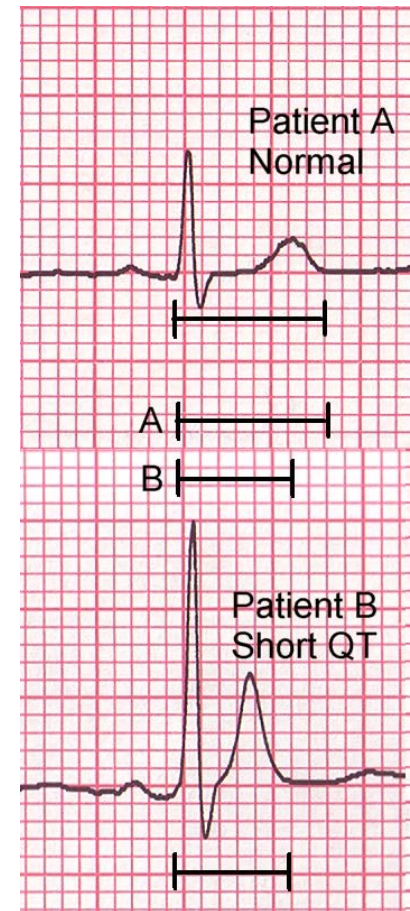
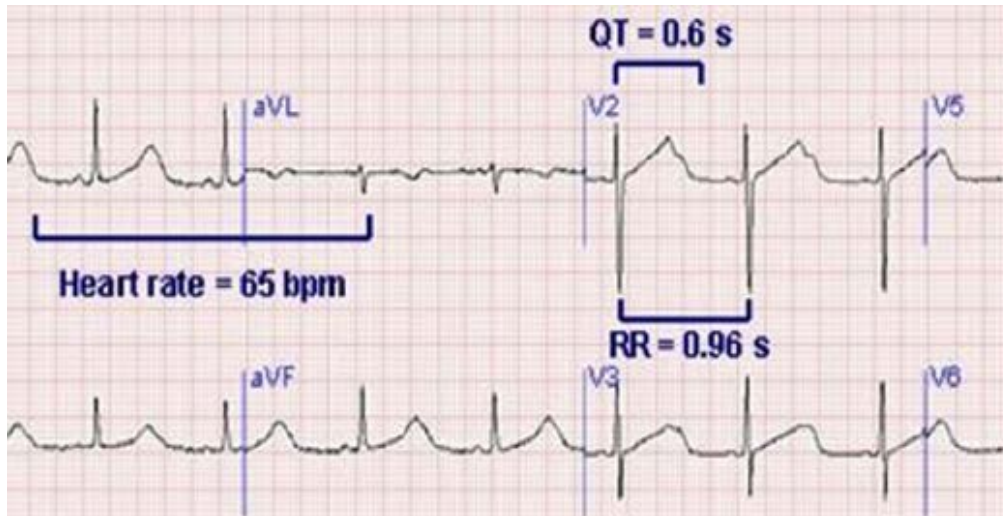
- ❑ How do you differentiate clinically between panic disorder and various cardiac disorders such as
  - Heart blocks
  - Paroxysmal Supraventricular Tachycardia (PSVT)
  - Arrhythmias
- ❑ What investigations would you recommend in such cases?
- ❑ What about Mitral Valve Prolapse (MVP)?

# Case-2 (23/F) A case of Borderline Personality Disorder

- ❑ On Tab Ziprasidone (20 mg) twice a day
- ❑ Presented with discomfort in chest (pressure, tightness, constriction) since 2 days
- ❑ ECG – QTc interval  $> 500$  msec
- ❑ Admitted in ICCU for 2 days
- ❑ Stopped Ziprasidone

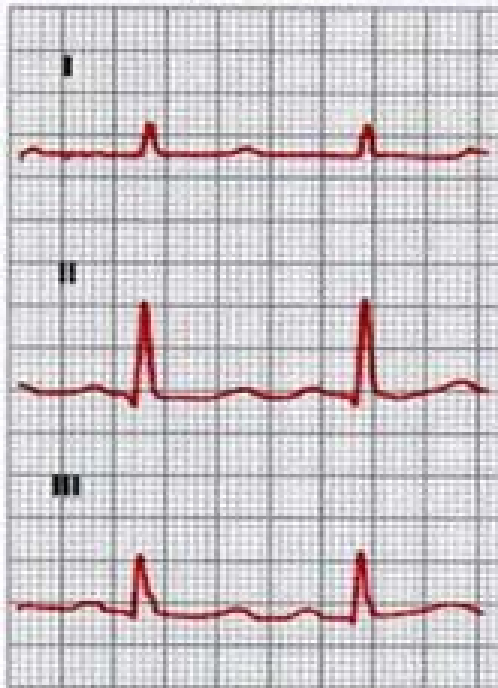


- ❑ What is Long QT syndrome (LQTS)?
- ❑ What is short QT syndrome (SQTS)
- ❑ What are the symptoms of LQTS and SQTS?



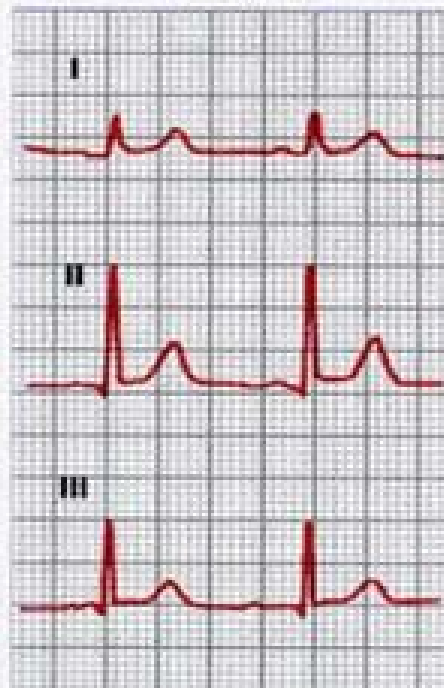


### Hypocalcemia



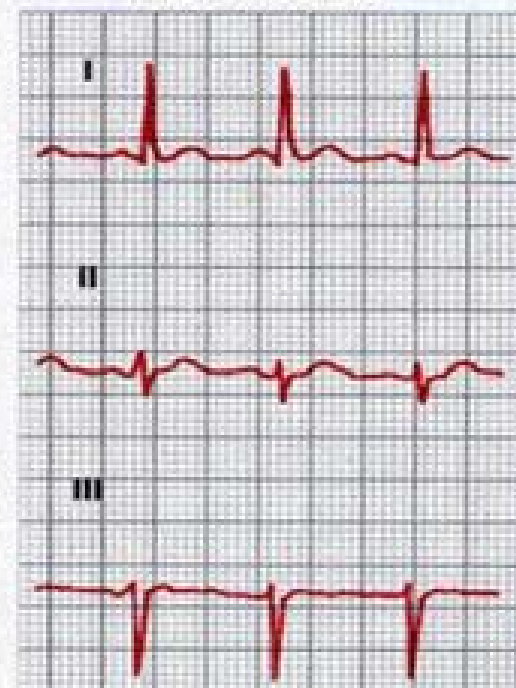
QT 0.48 sec  
QT<sub>c</sub> 0.52

### Normal



QT 0.36 sec  
QT<sub>c</sub> 0.41

### Hypercalcemia



QT 0.26 sec  
QT<sub>c</sub> 0.36

## Case-3 (57/M) A case of Bipolar Depression

- ❑ Presented with severe depression, suicidal ideation and poor response to pharmacological treatment
- ❑ Was given an ECT under general anaesthesia after taking a fitness from medical and anaesthesia department
- ❑ After about 10 minutes of ECT in recovery room relatives noticed that he had stopped moving and stopped breathing
- ❑ Anaesthetist tried resuscitation and was transferred to ICCU, but in spite of the best efforts he could not be revived

# Cardiac complications and ECT

## Risk of death related to ECT (and anaesthesia):

- ❑ 1 in 80,000 treatments & 1 in 10,000 patients  
(<http://www.rcpsych.ac.uk/healthadvice/treatmentswellbeing/ect.aspx>)
- ❑ What precautions should be taken to avoid cardiac complications associated with ECT
- ❑ Following ECT, what can be done for the patients who develop
  - Tachycardia (HR > 180 bpm)
  - Arrhythmias
  - Ischaemia



## Case-4 (48/M) A case of suspected cardiomyopathy

- ❑ A case of schizophrenia on Clozapine (400 mg/day)
- ❑ Referred for probably cardiomyopathy as he complained of dyspnoea on exertion and oedema feet
- ❑ Cardiologist examined and found no evidence of cardiomyopathy

- ❑ What are the symptoms of Cardiomyopathy
- ❑ How frequently the patients on Clozapine be monitored and what investigations should be carried out to check for cardiomyopathy?
- ❑ Is it reversible on stopping Clozapine or can we prevent further progress by stopping Clozapine?
- ❑ What is the treatment of Clozapine induced cardiomyopathy?



Thank You