

**Title** - Cardiac sarcoidosis with ventricular aneurysm in a 54-year-old man with dyspnea and chest pain

**Program of Study** - Doctor of Osteopathic Medicine

**Presentation type** – PowerPoint and Print Poster

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**Category** - Applied

**Background:** Cardiac sarcoidosis is a rare and dismal manifestation of sarcoidosis. 25% of sarcoidosis patients may have cardiac involvement. Though it can be benign, it can be associated with sudden cardiac death due to atrioventricular blocks or arrhythmias such as monomorphic ventricular tachycardias. Arrhythmias are largely due to granuloma interruption of conduction pathway or ventricular aneurysms. A combination of imaging modalities may have to be used as diagnosis can be difficult. Cardiac magnetic resonance or PET guided biopsy tend to be given preference. Initial treatment involves corticosteroids especially when ejection fraction is greater than 30 %.

**Case description:** Here we describe a case report of cardiac sarcoidosis in a 54-year-old male with the corresponding clinical and imaging characteristics. He first presented with dyspnea and chest pain and his subsequent work up led to the diagnosis of cardiac sarcoidosis. His treatment plan included placement of a prophylactic implantable cardioverter defibrillator and immunosuppressive therapy.

**Discussion:** 65 % of cardiac sarcoidosis patients are at high risk for sudden cardiac death; therefore, it is recommended to diagnose and manage as early as possible. For now, we do not know any specific markers or predispositions placing these patients at risk for the development of cardiac sarcoidosis. In our patient, the diagnosis was made based on his history of sarcoidosis and cardiac imaging. His treatment plan included placement of a prophylactic ICD and initiation of immunosuppressive therapy.