SIMPLIFIED ABSTRACT SAMPLE WORK

Reversible Cardiomyopathy Induced by Adrenal Insufficiency: A Case Report

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ARTICLE

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Reversible Cardiomyopathy Induced by Adrenal Insufficiency: A Case Report

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Background

Adrenal insufficiency is a rare but clinically significant endocrine disorder that can lead to severe cardiovascular complications, including reversible cardiomyopathy. It may present with nonspecific symptoms, making early diagnosis challenging.

specific background

Cardiac manifestations such as biventricular dysfunction, bradycardia, hypotension, and valvular abnormalities may be the initial presentation of underlying central adrenal insufficiency associated with panhypopituitarism.

knowledge gap

There is limited awareness regarding adrenal insufficiency as a reversible cause of cardiomyopathy, leading to potential delays in endocrine evaluation and management in patients presenting with unexplained cardiac dysfunction.

Here We Show

We report a case of a 56-year-old woman presenting with bradycardia, hypotension, and hypoglycaemia, followed by hemodynamic instability and supraventricular tachycardia, later diagnosed with panhypopituitarism, empty Sella, and central adrenal insufficiency.

Methodological

Endocrine evaluation revealed low morning cortisol with low adrenocorticotropic hormone levels, confirming central adrenal insufficiency. Echocardiography demonstrated biventricular dysfunction with reduced ejection fraction and severe tricuspid regurgitation. The patient was treated with intravenous hydrocortisone and supportive care, followed by serial cardiac assessment.

Results & Interpretation

Following treatment, the patient showed significant clinical and hemodynamic improvement. Repeat echocardiography at one month demonstrated recovery of systolic function and marked reduction in valvular regurgitation, confirming reversible cardiomyopathy secondary to adrenal insufficiency.

Implications

This case highlights the importance of considering adrenal insufficiency in patients with unexplained cardiomyopathy. Early endocrine evaluation and prompt steroid replacement therapy can lead to complete recovery of cardiac function and prevent irreversible damage.

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