

Myocarditis

Andrew Ying-Siu Lee, MD, PhD.

Etiology:-

- infections (viral, rickettsial, bacterial, protozoal, metazoal)
- allergic myocarditis (eg. sulfonamide, hydrochlorothiazine, penicillin, methyldopa)
- some systemic diseases (= giant cell myocarditis eg. sarcoidosis, SLE, vasculitis)
- physical agents eg. radiation, heat stroke, hypothermia
- toxic eg. cocaine, lead, snake bite

Symptoms:-

- from asymptomatic to fatal heart failure (diffuse myocarditis) and sudden death
- non-specific symptoms = fatigue, dyspnea, palpitation, tachycardia, chest discomfort
- chest pain may resemble myocardial infarction (with increased muscle enzymes and regional wall motion abnormality)
- electrocardiogram = STTC changes
- cardiac arrhythmias and heart block

Treatment:-

- often supportive, bed rest, corticosteroid, gamma globulin