

Vrućica nepoznatog porijekla – igla u plastu sijena Fever of unknown origin – a needle in a haystack

Ana Jordan*,
Mario Sičaja,
Boris Starčević

Klinička bolnica Dubrava,
Zagreb, Hrvatska
University Hospital Dubrava,
Zagreb, Croatia

KLJUČNE RIJEČI: igla, strano tijelo, vrućica nepoznatog porijekla.

KEYWORDS: needle, foreign body, fever of unknown origin.

CITATION: *Cardiol Croat.* 2016;11(10-11):526. | **DOI:** <http://dx.doi.org/10.15836/ccar2016.526>

***ADDRESS FOR CORRESPONDENCE:** Ana Jordan, Klinička bolnica Dubrava, Avenija Gojka Šuška 6, HR-10000 Zagreb, Croatia. / Phone: +385-98-613-086 / E-mail: anazovko4@gmail.com

ORCID: Ana Jordan, <http://orcid.org/0000-0001-5610-6259> · Mario Sičaja, <http://orcid.org/0000-0003-0773-4720>
Boris Starčević, <http://orcid.org/0000-0002-3090-2772>

Uvod: Vrućica nepoznatog porijekla (VNP) izazovan je klinički sindrom koji obuhvaća široku skupinu kliničkih ishoda i zahtjeva razuman klinički pristup.¹⁻³

Prikaz slučaja: Prikazujemo 53-godišnjeg muškarca koji je hospitaliziran zbog sumnje na prisutnost stranog tijela u srcu i dvogodišnjeg razdoblja intermitentne vrućice. Učinjene su brojne dijagnostičke pretrage koje su isključile infektivni, imunološki, hematološki i onkološki uzrok dugotrajne vrućice. Kompjuterizirana tomografija prsništa, transtorakalna ehokardiografija i koronarografija pokazale su prisutnost linearnog metalnog stranog tijela izgleda šivaće igle u desnom izlaznom traktu. Desni ventrikul je bio blago dilatiran (3 cm) sa blago reduciranom sistoličkom funkcijom (40%). Nakon svih pretraga bolesnik je prikazan kardiokirurškom timu radi kirurškog odstranjenja igle iz srca. Čak i nakon konzultacije psihijatra je ostalo nepoznato da li je strano tijelo u srcu posljedica samoozljeđivanja zbog depresije ili slučajne ozljede.

Zaključak: Prisutnost igle u srcu relativno je rijedak slučaj. Opisano je u slučajevima samoozljeđivanja kod psihijatrijskih bolesnika, intravenskih injekcija i akupunkturalnih igala. Kirurško odstranjenje igle metoda je izbora uz neizostavno psihijatrijsko liječenje.

Introduction: Fever of unknown origin (FUO) is a challenging clinical syndrome which encompasses wide clinical scenarios and requires bright decision making.¹⁻³

Case presentation: We present a case of a 53-year-old man who was hospitalized because of intermittent fever that lasted for two years. He underwent a huge specter of diagnostic procedures that excluded infectious, immunological, hematological and tumorous causes of a long lasting fever. Due to advanced cardiac imaging a suspected foreign body in the heart was visualized. Computed imaging, transthoracic echocardiography and cardiac catheterization revealed one linear metallic density that corresponds to a sewing needle localized in the right ventricular outflow tract (RVOT). Right ventricle was mildly dilated (3cm) and systolic function was slightly reduced (40%). After all examinations patient was presented to a cardiothoracic surgeon for a surgical removal of the needle. Even after psychiatric consultation it remained unknown whether the strange body in the heart was consequence of self-mutilation or an accidental event.

Conclusion: A needle in the heart is a comparatively rare event. It has been described in cases of self-mutilation in psychiatric patients, intravenous injection and puncturing with acupuncture needles. Surgical removal of a sewing needle is the treatment of choice, but psychiatric consultation is recommended.

RECEIVED:
September 25, 2016

ACCEPTED:
October 10, 2016



LITERATURE

1. Kim KH, Ahn H. Intracardiac foreign body: a sewing needle in the right ventricle. *Eur J Cardiothorac Surg.* 2001;19:513. **DOI:** [http://dx.doi.org/10.1016/S1010-7940\(01\)00629-7](http://dx.doi.org/10.1016/S1010-7940(01)00629-7)
2. Mandegar MH, Ali Yousefina M, Rayatzadeh H, Roshanali F. Intramyocardial sewing needle extracted one year after insertion. *Interact Cardiovasc Thorac Surg.* 2006;5(6):742-743. **DOI:** <http://dx.doi.org/10.1510/icvts.2006.138784>
3. Sarmiento-Leite R, Silva GV, Goulart LC, Gottschall CA, Perin EC. A sewing needle in the right ventricle. *Tex Heart Inst J.* 2000;27(3):314-5. **PubMed:** <https://www.ncbi.nlm.nih.gov/pubmed/11093424>