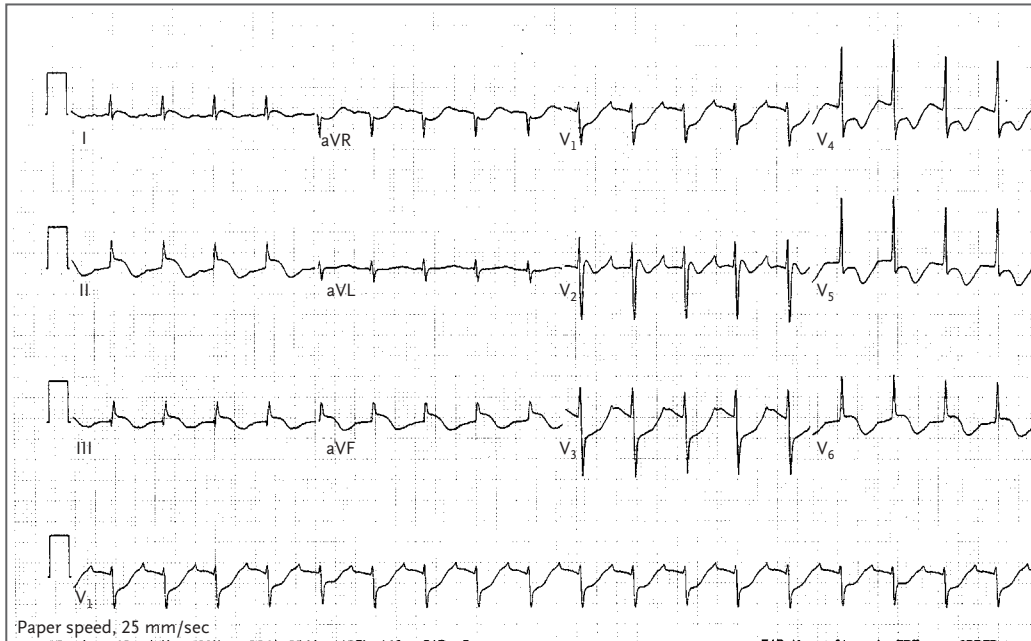


IMAGES IN CLINICAL MEDICINE

Electrocardiographic Changes in Intracranial Hemorrhage Mimicking Myocardial Infarction



A 19-YEAR-OLD MAN WAS ADMITTED TO THE TRAUMA UNIT AFTER BEING struck in the left temple by a brick. Surgery to evacuate an intracranial hemorrhage was performed, and an electrocardiogram (ECG) was recorded 48 hours later, after a transient episode of hypoxemia. The tracing showed marked ST-segment elevation in leads II, III, aVF, and V₆ accompanied by ST-segment depression and inverted T waves in leads V₃ to V₅, mimicking the changes seen in acute myocardial ischemia. The QT interval was markedly prolonged. Serial measurements of cardiac-enzyme levels and an echocardiogram were normal. The next morning, the patient's ECG showed less severe ST-segment deviation. This case illustrates the marked ECG changes that are occasionally seen with intracranial hemorrhage and that can lead to an erroneous diagnosis of acute myocardial ischemia.

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