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Opinion

Amyloidosis of the Heart.

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Amyloidosis is a condition caused by an abnormal protein produced in the bone marrow.

It can be deposited in any tissue or organ.

Insoluble abnormal amyloid fibrils build up in the heart and impair its function.

Congo red is usually the dye or stain that picks up abnormal amyloid fibrils.

This is usually an accumulation of abnormal immunoglobulin subunits.

These may be gamma globulin light chains or heavy chains that become enmeshed with the cardiac myofibrils or Purkinje cells, cardiac myocytes and grossly impair cardiac conductivity.

A Swan-Ganz catheter may be added to obtain optimal cardiac and fluid control andmaintenance.

Arrythmias develop due to cardiac circuit misfiring and abnormal re-entry circuits, A pacemaker or a cardiac implant device mat be needed as may an external cardiac extra- sterna loop device.

Amyloidosis of the heart is also known as stiff heart syndrome. This occurs when amyloid deposits take the place of normal heart muscle.

It is the most typical type of restrictive cardiomyopathy and may affect the way electrical signals move through the heart i.e. it affects the electrical conductive system.

Cardiac amyloidosis occurs when amyloid deposits take the place of normal heart muscle.

This restrictive cardiomyopathy affects the electrical and conductive system leading to arrhythmias and heart blocks.

The condition may be inherited or it may be acquired.

It may be due to bone or blood cancer or as a result of generalised inflammation.

It is more common in men than women and is rarely seen in people under the age of 40.

The extra effort causes the heart to weaken and ultimately congestive cardiac failure ensues.

The heart fails due to damage.

Symptoms include

Orthopnoea

Paroxysmal nocturnal dyspnoea and anasarca.

Treatment consists of Lasix (furosemide), digoxin, slow k and positive inotropic devices for example an intra-aortic balloon pump to increase ventricular extra-systolic contaction force.