



## 7. CHALLENGING CLINICAL CASE

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**Introduction.** Atrial septal defect is a congenital disease characterized by the presence of communication between the right and left atria, leading to abnormal blood movement at the heart level. This defect occurs in 1 out of 1,500 newborns. There are several complications that can occur in the postoperative period, one of which we will talk about in this case.

**Case statement.** In this work we present the case of an 18-year-old girl with a congenital atrial septal defect. An operation was performed in 2019 in order to eliminate the defect and perform a plastic repair of the tricuspid valve. In the postoperative period a complication such as a complete AV block was detected. To fix this complication during a preventive procedure a VVI Endurity type pacemaker (St. Jude/Abbott) was implanted. During the routine examination the patient underwent echocardiography which established that the ejection fraction was 30%. It was decided to implant a CRTD Solara (Medtronic) pacemaker on 11/20/2023.

**Discussions.** During installation of the CRT-D pacemaker we encountered difficulties such as cannulation of the coronary sinus. We tried to fix this problem by using Guide wire floppy, but as its strength was not enough, we resorted to using Guide grand slam, because it is denser in its properties. As a result, coronary sinus cannulation was successfully performed, as well as the installation of atrial and ventricular leads.

**Conclusion.** CRT-D remains the gold standard treatment for dilative CMP and this medical case is proof of that.