中文題目:茉莉氏症候群

英文題目: Aortoiliac occlusive disease in systemic sclerosis patient

作 者:陳祈池¹,賴寧生^{1,2}

服務單位:1佛教慈濟財團法人大林慈濟醫院內科部,2佛教慈濟財團法人大林慈濟醫院風濕免疫科

Clinical Presentation

This 40 year old man is a smoker and has history of systemic sclerosis complicated with digital ulcer, diabetes mellitus, hypertension and high risk antiphospholipid profile. He was presented with chest pain. The ECG showed ST-elevation over lead II, III and avF. Due to STEMI, primary PCI were done. Bilateral femoral artery occlusion were noted during PCI. CT angiogram showed occlusion over infra-renal aorta and bilateral iliac artery. Endovascular Intervention were done later on.

Discussion

In this case, aortoiliac occlusive disease was found incidentally. Aortoiliac occlusive disease should be consider in patient presented with claudication of the buttocks and thighs, absent or decreased femoral pulse and erectile dysfunction. If all three present, it is classically called Leriche Syndrome. This case has high antiphospholipid profile previously. However, the profile was normal in recent 6 months and there is no acute symptoms related to aortoiliac occlusive disease. Therefore, antiphospholipid syndrome is less likely in this case.



