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Title: Complete Heart Block due to Octreotide Infusion in Patient with Cryptogenic Cirrhosis

Running Head: Complete Heart Block due to Octreotide

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Abstract: A 62-year-old man was admitted to the emergency department (ED) with the complaint of intense hematemesis. He was admitted to intensive care unit because of acute esophageal variceal hemorrhage. He underwent sclerotherapy followed by a slow infusion of intravenous octreotide. Complete heart block occurred in the patient during octreotide infusion and infusion was stopped. Temporary pacemaker was placed in the patient’s heart. Normal sinus rhythm was observed in the follow up one day later and the pacemaker was removed from patient. He was discharged upon recommendation.

Introduction: Octreotide, a synthetic cyclic octapeptide, is a somatostatin analogue. It is used in...
court, type I endometrial adenocarcinoma due to the pathological changes of the endometrium. These findings are important in terms of the potential development of ovarian cancer.

**Materials and Methods:**

The study was conducted in the Department of Obstetrics and Gynecology at the University Hospital. Patients diagnosed with ovarian cancer were included in the study. The study was approved by the local ethics committee, and informed consent was obtained from all participants.

**Results:**

The prevalence of ovarian cancer in women with endometrial cancer was found to be higher than in the general population. The risk factors for ovarian cancer in these patients included older age, obesity, and family history of ovarian cancer. The study also found a higher incidence of specific subtypes of ovarian cancer in these patients, such as clear cell carcinoma.

**Conclusion:**

Endometrial cancer patients are at increased risk of ovarian cancer. Further studies are needed to investigate the mechanisms behind this association and to develop strategies to prevent and treat ovarian cancer in these patients.

**Acknowledgments:**

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**References:**


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block was observed at 24 hours. The observation of T wave negativity in chest leads on surface ECG after sinus rhythm suggested a possible coronary ischemia in the patient. The lesser dose of octreotides' cardiovascular effect may have become more prominent due to possible coronary ischemia. It may also act directly on acetyl choline receptors as well as on negative chronotropic effects on the heart. In addition, it may increase systemic vascular resistance and create reflex bradycardia on the baroreceptors [8]. Finally, octreotide suppresses the secretion of vasoactive intestinal peptide (VIP) that can increase the heart rate. Octreotide may reduce heart rate due to VIP depression [9]. In our patient, we did not consider the possibility of reflex bradycardia because he had hypotension due to acute hemorrhage. We thought it could be caused by mechanisms that could lower the heart rate more directly. There are similar cases in the literature about bradycardia and complete heart block developing after octreotide infusion [10,11]. Bradycardia and cardiac conduction defects may develop during octreotide infusion and the hemodynamics of the patient may be further impaired. These patients should be followed up with closer monitoring.

*The patient was informed and received his approval for this case report.

References:


5. Eriksson LS, Brundin T, Soderlund C, Wahren J. Haemodynamic effects of a long-acting This article has been accepted for publication and undergone full peer review but has not been through the copyediting, typesetting, pagination and proofreading process, which may lead to differences between this version and the Version of Record. Please cite this article as: Icen YK, Urgun OD, Sumbul HE, Koc M. Complete Heart Block due to Octreotide Infusion in Patient with Cryptogenic Cirrhosis. Eurasian J Med 2018; 50: 10.5152/eurasianjmed.2018.18064. ©Copyright 2018 by Atatürk University School of Medicine - Available online at www.eajm.org


