Takotsubo Cardiomyopathy

To the Editor:

In the recent review paper by Scantlebury et al regarding the diagnostic workup of Takotsubo cardiomyopathy (TTC), the terms “apical ballooning syndrome”, “stress induced cardiomyopathy” and TTC were used synonymously.¹ This entity was first described in Japan and the apical ballooning configuration of TTC resembles a type of bottle used in Japan to trap octopus, hence contributing to its nomenclature.² However, the condition is being increasingly recognized in other parts of the world and in different forms, such as ventricular hypokinesis limited to the mid-ventricle with relative sparing of the apex,³ basal hypokinesis with sparing of the mid-ventricle and apex (also known as reverse Takotsubo),⁴ global hypokinesis⁵ and right ventricular takotsubo.⁶ Another example of wide terminology use is the ICD 9 code for TTC, in which 429.83 encompasses “broken heart syndrome”, “reversible left ventricular dysfunction following sudden emotional stress”, “stress induced cardiomyopathy”, “transient left ventricular apical ballooning syndrome”, and “apical ballooning syndrome”.^{7–9} Hence there is a need to bring uniformity to the nomenclature of this entity. A better terminology is stress (induced) cardiomyopathy, which will embrace all the variants and is more reflective of its pathophysiology, thus promoting uniformity in scientific reporting as well as in reimbursement claims.

Disclosures

None.

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