Cardiac Small Vessel Vasculitis in a Case of Microscopic Polyangiitis

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(Myocardial infarction is a rare complication of microscopic polyangiitis (MPA) (1-3). We herein report an autopsy case of a 74-year-old woman with MPA who developed cardiac small vessel vasculitis. The patient was admitted to our hospital due to hearing loss and progressive renal dysfunction. Chest computed tomography showed localized infiltrative shadows. On day 4 after admission, she developed diffuse alveolar hemorrhaging; further investigations revealed a myeloperoxidase antineutrophil cytoplasmic antibody level of 472 EU, and she was diagnosed with MPA. Despite the administration of methylprednisolone pulse therapy for three consecutive days (Day 1, 1,000 mg; Days 2 and 3, 500 mg), plasma exchange, and continuous hemodi...
dialfiltration, she died of respiratory failure six days after admission. The autopsy revealed pulmonary capillaritis and crescentic glomerulonephritis with scattered myocardial infarct in the left ventricular wall and interventricular septum (Picture 1). No coronary obstruction or stenosis was identified. A microscopic examination demonstrated contraction band necrosis in the myocardium (arrowheads in Picture 2), cardiac small vessel vasculitis with fibrinoid necrosis (arrowheads in Picture 3) and inflammatory cell infiltration (arrowheads in Picture 4).

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References