

Image in cardiology

Post-transplant nail-plate changes in cyanotic congenital heart defect

Cambios ungueales postrasplante cardiaco por cardiopatía congénita cianótica



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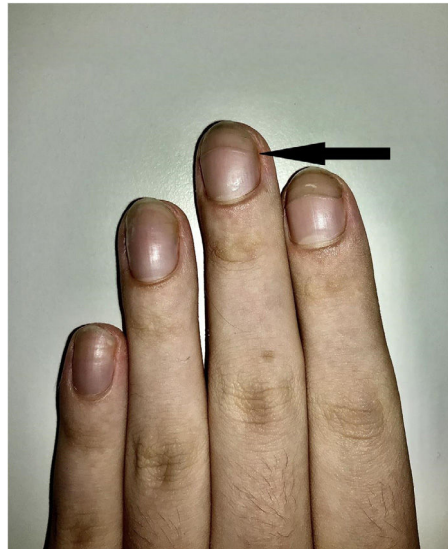


Figure 1.

A 16-year-old boy with a history of complex congenital heart disease (levo-transposition of the great arteries, a ventricular septal defect, and pulmonary stenosis) was referred to our hospital with cardiogenic shock, treated with venoarterial extracorporeal membrane oxygenation. Physical examination revealed a precordial pansystolic murmur, central and peripheral cyanosis, and digital clubbing. Blood tests showed elevated cardiac biomarkers and high hemoglobin levels. The patient received a heart transplant. Postoperative recovery was uneventful and surveillance biopsies showed no signs of rejection. Ultrasound also showed normal functioning of the transplanted heart.

Cyanosis subsided shortly after transplantation and hemoglobin levels returned to normal. Notably, we observed a conspicuous nail-bed change—onychomadesis—at the 4-month follow-up visit (figure 1). This change marked the time at which the transplant was performed and the hypoxia resolved. It demonstrates the reversibility of changes secondary to chronic hypoxia in patients with complex congenital heart disease after a heart transplant.

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AUTHORS' CONTRIBUTIONS

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CONFLICTS OF INTEREST

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