

[PICTURES IN CLINICAL MEDICINE]

Laryngeal Edema That Developed after Acute Myocardial Infarction

Futoshi Nakagami¹, Koichi Yamamoto¹, Hideharu Hagiya¹ and Hiromi Rakugi²

Key words: angioedema, angiotensin converting enzyme inhibitor

(Intern Med 59: 759-760, 2020)

(DOI: 10.2169/internalmedicine.3507-19)



Picture 1.



Picture 2.



Picture 3.

An 80-year-old man visited our hospital with a swollen lip and dysphagia. He had undergone percutaneous catheter

intervention due to acute myocardial infarction and been administered aspirin (100 mg/day), prasugrel hydrochloride (3.75 mg/day), and enalapril (2.5 mg/day) 4 weeks earlier. He did not report any dyspnea, odynophagia, rash, or abdominal pain, and his vital signs were stable. Soft tissue neck radiography and computed tomography revealed epiglottitis and laryngeal edema (Picture 1, 2). Angioedema without urticaria due to angiotensin-converting enzyme inhibitor (ACEI) was suspected. We administered chlorpheniramine maleate (5 mg) and famotidine (20 mg) and changed enalapril to olmesartan. His edema of the lip, epiglottis, and larynx gradually disappeared, and his dysphagia improved after two days (Picture 3). The incidence of angioedema with ACEI is 0.30% (1). Most such cases occur within a few weeks of starting or increasing the medication, although some cases occur even after years of use (2). Acute angioedema is sometimes a life-threatening disease. General physicians need to act promptly based on a precise diagnosis.

¹Department of General Internal Medicine, Osaka University Hospital, Japan and ²Department of Geriatric Medicine, Osaka University School of Medicine, Japan

Received: June 19, 2019; Accepted: September 24, 2019; Advance Publication by J-STAGE: November 8, 2019

Correspondence to Dr. Futoshi Nakagami, fnakagami@hp-gm.med.osaka-u.ac.jp

The authors state that they have no Conflict of Interest (COI).

2. Kostis WJ, Shetty M, Chowdhury YS, et al. ACE Inhibitor-induced angioedema: a review. *Curr Hypertens Rep* **20**: 55, 2018.

References

1. Makani H, Messerli FH, Romero J, et al. Meta-analysis of randomized trials of angioedema as an adverse event of renin-angiotensin system inhibitors. *Am J Cardiol* **110**: 383-391, 2012.

The Internal Medicine is an Open Access journal distributed under the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License. To view the details of this license, please visit (<https://creativecommons.org/licenses/by-nc-nd/4.0/>).

© 2020 The Japanese Society of Internal Medicine
Intern Med 59: 759-760, 2020