

POSTER PRESENTATION

Open Access

Case report of undiagnosed retrosternal goitre – an unpleasant finding during complex cardiac surgery procedure

Igor Medved¹, Marin Oštrić^{1*}, Salem Osman¹, Aleksandra Ljubačev¹, Alfred Božić²

From 23rd World Congress of the World Society of Cardio-Thoracic Surgeons Split, Croatia. 12-15 September 2013

An 84-years old patient was scheduled for elective, combined procedure of aortic valve replacement and coronary artery bypass grafting. After median sternotomy was done, there was a finding of unusual retrosternal mass. Concurrently, otherwise routine procedure, changed its course. During surgical manipulation, patient started to show signs of thyreotoxic crisis.

Patient was initially stabilised with intravenous metoprolol and amiodarone, blood was taken for analysis and we decided to continue with planned procedure.

Bioprosthesis and vein graft on PD were implanted. During operation, blood analysis came through and revealed high levels of FT4 – free thyroxin : 44,10 pmol/L (with normal values of 11,5 – 22,7 pmol/L).

After CPB termination and adequate hemostasis, with help of general surgeon, partial thyroidectomy was done.

In early postoperative course, patient received some inotropic support and was extubated on 4th postoperative day. Except for some minor restlessness, recovery went uneventful and 84 years old patient was released in good health, on 18th postoperative day.

Upon release, patient was referred to endocrinologist for further treatment.

Authors' details

¹Department of Cardiac Surgery, Clinical Hospital Center Rijeka, Rijeka, Croatia. ²Department of Anesthesiology and Intensive Care, Clinical Hospital Center Rijeka, Rijeka, Croatia.

Published: 11 September 2013

doi:10.1186/1749-8090-8-S1-P31

Cite this article as: Medved et al.: Case report of undiagnosed retrosternal goitre – an unpleasant finding during complex cardiac surgery procedure. *Journal of Cardiothoracic Surgery* 2013 **8**(Suppl 1):P31.

Submit your next manuscript to BioMed Central and take full advantage of:

- Convenient online submission
- Thorough peer review
- No space constraints or color figure charges
- Immediate publication on acceptance
- Inclusion in PubMed, CAS, Scopus and Google Scholar
- Research which is freely available for redistribution

Submit your manuscript at
www.biomedcentral.com/submit



* Correspondence: mostric@inethr

¹Department of Cardiac Surgery, Clinical Hospital Center Rijeka, Rijeka, Croatia

Full list of author information is available at the end of the article