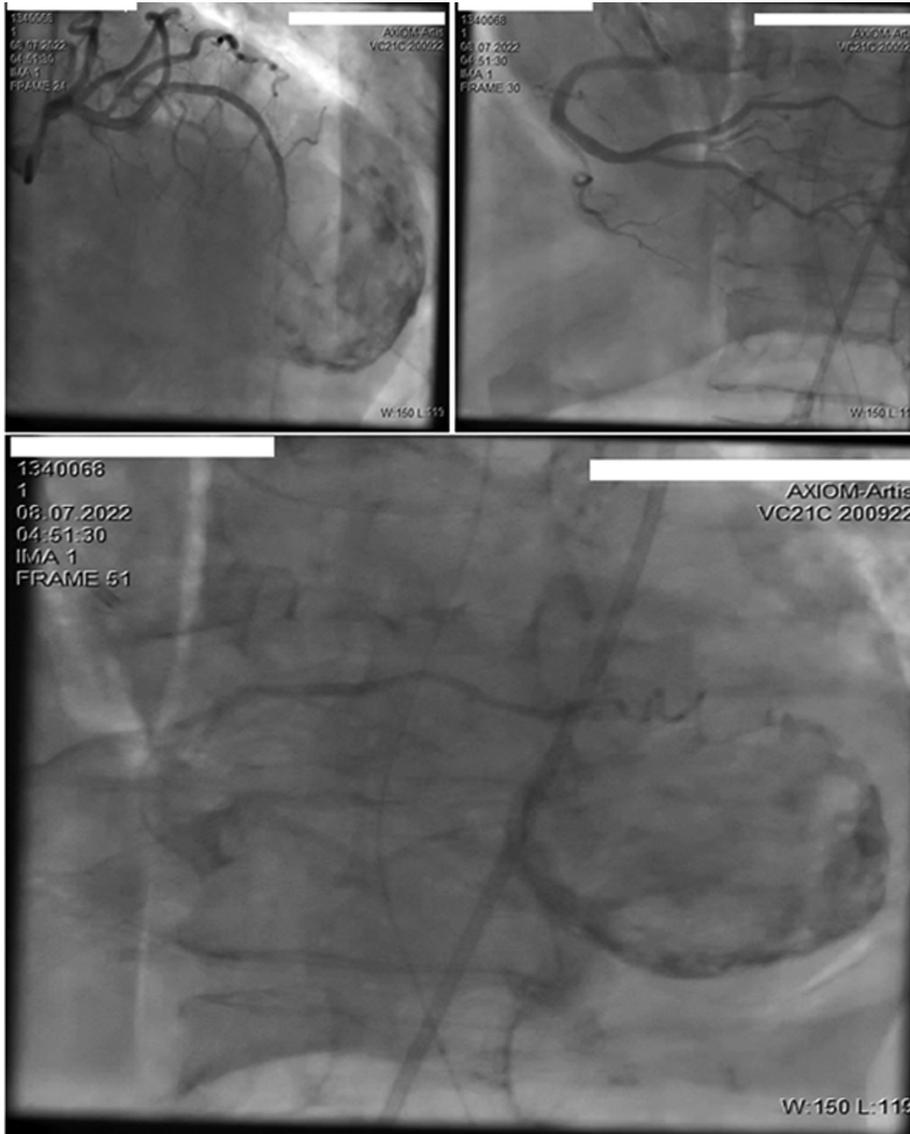


## Left Ventricular Ring Calcification in a Patient with Sudden Cardiac Arrest and Q-wave ST Elevation

All cases of left ventricle (LV) aneurysm and wall calcification published in the literature are associated with LV aneurysms formed based on myocardial infarction.

### E-PAGE ORIGINAL IMAGE



**Figure 1. Coronary angiography: No critical coronary stenosis was detected in the left main, left anterior, circumflex, and right coronary artery. A well-circumscribed, round, large, and calcified mass in the apical region of the left ventricle.**

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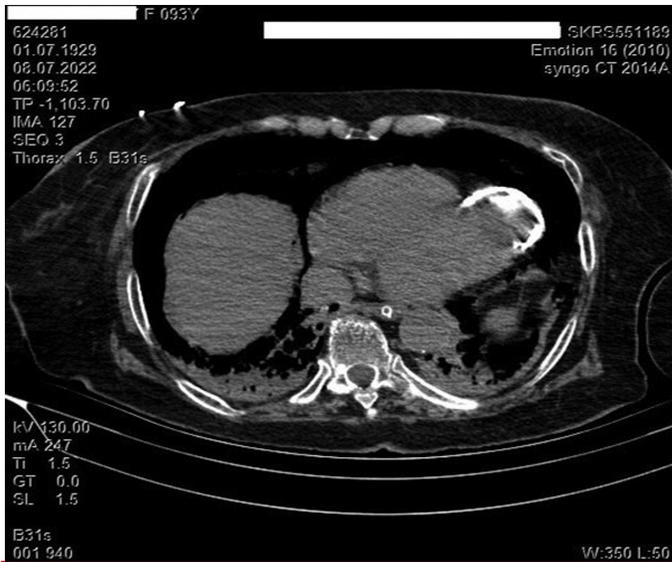
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**Figure 2. Thorax computed tomography: A round, calcified, and cystic structure in the apical wall of the left ventricle and a thrombus in this structure.**

In our case, an elderly female patient was brought to the emergency unit after cardiac arrest at home. Sinus rhythm was restored after cardiopulmonary resuscitation. No critical coronary stenosis was detected in coronary angiography, but a large calcified mass image was observed in the apical wall of the LV (Figure 1). The lesion was reported as LV ring calcification in the thorax computed tomography examination (Figure 2). On the second day of hospitalization, the patient's cardiac arrest recurred, and the patient died. Informed consent was obtained from the patient's first-degree relatives.

Left ventricular aneurysms rarely develop due to a cause other than coronary artery disease. Concomitant left ventricular ring calcification may rarely be observed in trauma, infection, endomyocardial fibrosis, and Takotsubo syndrome. The case of ring calcification due to a left ventricular aneurysm and the resulting sudden cardiac arrest has shown that regardless of the cause, ring calcifications can be mortal in the future.

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**Informed Consent:** Informed consent was obtained from the patient's first-degree relatives.