

Atypical Myocardial Infarction in a Young Patient: Exploring the Intersection of Acute Anxiety Disorders and Antipsychotic Medication Use

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Abstract : Background: The rise of myocardial infarction (MI) among young adults, especially those with psychiatric conditions on antipsychotic medications, highlights the need to explore non-traditional cardiovascular risk factors. Case Presentation: We discuss a 24-year-old male with acute MI, diagnosed with an acute anxiety disorder, treated with risperidone and quetiapine, and with a history of occasional smoking. Despite no significant medical history, his presentation underscores the complex interactions between psychiatric conditions, antipsychotic medication, and lifestyle choices in the etiology of MI. Discussion: This case sheds light on the intricate relationship between minimal smoking habits, the use of atypical antipsychotics, and psychiatric illness as contributory factors to cardiovascular risk in young patients. It suggests a synergistic effect, amplifying the risk of MI, which is not adequately captured by traditional risk models. Conclusion: The case emphasizes the importance of an integrated care approach for young MI patients with psychiatric conditions and highlights the urgent need for further research to understand the compounded cardiovascular risk posed by psychiatric medications and lifestyle factors. It advocates for comprehensive risk assessments that consider these non-traditional factors to improve outcomes for this vulnerable patient population.

Keywords : myocardial infarction, young adults, psychiatric illness, antipsychotic medications, smoking

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