A 31-year-old female with a medical history of unexplained syncope presented with atypical chest pain. The patient has a healthy lifestyle and no risk factors. The EKG showed a sinus rhythm with a flattened T wave in the anterior region, she then underwent a cardiovascular computed tomography and was found to have an abnormal origin of the left coronary artery from the right coronary sinus, with an inter-arterial course (figure 1). Coronary artery's anomalous origin and course are rare but can result in myocardial infarction, heart failure, arrhythmias, and sudden death [1]. The high risk of sudden cardiac arrest is due to the compression of the LCA between the great vessels, a slit ostium creating torsion or unfavorable geometry. Such anomalies constitute an important often incidental finding and have a variable prognosis, and surgical treatment for all patients is recommended [2].

References