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An unusual case of a Pheochromocytoma mimicking both Acute Coronary Syndrome and Central Nervous System Infection.

Case report and literature review

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Abstract (up to 250 words)

Pheochromocytoma has been called 'the great mimic', capable of presenting itself as many other medical conditions. We present a 58-year-old woman admitted with recurrent episodes of nausea and vomiting and high blood pressure. Elevated cardiac biomarkers and diffuse ST-T abnormalities on electrocardiography suggested myocardial injury. However the biochemical and electrocardiography abnormalities normalized in a few hours. The next day the combination of fever, mental disorientation and confusion associated with elevated levels of C-reactive protein and leukocytosis suggested infection of central neural system. The lumbar puncture excluded this diagnosis. Subsequent abdominal computed tomography revealed a left adrenal tumor of 8 × 9 cm in size. The increased levels of blood pressure in combination with the CT results raised the suspicion of pheochromocytoma, which was further supported by elevated urine catecholamine levels. Four weeks after diagnosis was made the patient underwent left adrenalectomy.

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