- 37 **Yasue H**, Yoshimura M, Sumida H, et al. Localization and mechanism of secretion of B-type natriuretic peptide in comparison with those of A-type natriuretic peptide in normal subjects and patients with heart failure. *Circulation* 1994;**90**:195–203.
- 38 **Kohno M**, Horio T, Yokokawa K, et al. Brain natriuretic peptide as a cardiac hormone in essential hypertension. *Am J Med* 1992;**92**:29–34.
- 39 **Sakata K**, Shirohata M, Yoshida H, et al. Comparison of effects of enalapril and nitrendipine on cardiac sympathetic nervous system in essential hypertension. *J Am Coll Cardiol* 1998;**32**:438–43.
- 40 **The CONSENSUS Trial Study Group**. Effects of enalapril on mortality in severe congestive heart failure. Results of the Cooperative North Scandinavian Enalapril Survival Study (CONSENSUS). *N Engl J Med* 1987;**316**:1429–35.

IMAGES IN CARDIOLOGY

doi: 10.1136/hrt.2006.088377

Iron chelating in thalassaemia with left ventricular dysfunction

β thalassaemia major is the most common form of hereditary anaemia in the Mediterranean region; the affected individual develops severe anaemia requiring multiple blood transfusions. The clinical course is modified significantly by transfusion therapy; however, the main complication of transfusions is iron accumulation in different organs, resulting in cirrhosis, endocrinopathies, and even heart failure.

In 2001, a 21-year-old woman with β thalassaemia was referred for echocardiography because of progressive dyspnoea. She had maintained a regular transfusion schedule, and had taken approximately 160 units of blood up to that date; however, she had not been on regular deferoxamine therapy. Transthoracic echocardiography revealed a dilated left ventricle with an ejection fraction (LVEF) of 33% (panel A). Ferritin concentration was 7800 $\mu\text{g/l}$. Treatment for heart failure was initiated and regular deferoxamine administration was recommended. The patient's clinical course improved and in 2002 the LVEF was 51% (panel B) and the treatment for heart failure discontinued. In 2005, the LVEF was 65% (panel C) and regular deferoxamine usage decreased the ferritin concentration to 1300 $\mu\text{g/l}$.

Regular use of iron chelating agents is important to improve left ventricular dysfunction caused by haemosiderosis in hereditary anaemia requiring multiple blood transfusions.

G Cagirci
O Tufekcioglu
M Yetim

goksel1977@yahoo.com