Transient Constrictive Pericarditis: A Recent 2 Countries Study

Constrictive pericarditis (CP) is a disease of the pericardium that leads to impaired diastolic filling of the heart. The treatment of such a disease entity is known to be purely surgical by pericardiectomy.

This is a prospective, analytical non-randomized study conducted during the period from January 2014 to November 2020. 34 cases of constrictive pericarditis were referred to us for management; 12 of them (35.29%) had a classic picture of definite constrictive pericarditis with areas of calcifications and typical symptoms of constrictive pericarditis (group A). 22 cases (64.71%) had typical symptoms but they responded to medical treatment with complete resolution of the pathology and symptoms (group B).

In group A, the mean age was  $37 \pm 12.3$  years. They were treated with pericardiectomy via median sternotomy. 2 cases had persistent symptoms; there was no mortality operative or post-operative. 4 of them were TB positive. In group B, the mean age was  $42 \pm 14.1$ years. All were treated medically and resolved totally. All were preceded with influenza like symptoms or chest infection with bilateral pleural effusion and all were TB negative. Biopsies were taken from the pericardium revealing nonspecific reaction.

There was an entity of constrictive pericarditis, which is known as transient constrictive pericarditis. It is a different pathology which is mostly autoimmune. It responds to medical treatment. There was no calcification, it might be recurrent and is associated with variable amounts of pericardial effusion and bilateral pleural effusions.