Lecture Topic: Medical and Surgical Emergencies & Urgencies in the Aging Patient: 
Geriatric Cardiovascular Emergencies

1. An 86 year old male presents to the ED with a chief complaint of dyspnea on exertion over a two day period. He denies chest pain. He has a past medical history of hypertension. His ECG shows non-specific ST segment changes. A troponin is positive. Which of the following statements is FALSE?
   a. Myocardial infarction without chest pain is more common in the elderly than in younger patients.
   b. In patients >85, the single most common presenting symptom of coronary insufficiency “angina” is actually dyspnea, not chest pain.
   c. Elderly patients are more likely to have non-ST-segment elevation MIs than ST segment elevation MIs.
   d. Older patients may not receive treatment for AMI that is as aggressive as younger patients. However, older patients may have less absolute benefit for such therapy and therefore less aggressive therapy is warranted.
   e. The diagnosis of AMI in the elderly is very dependent on measuring serum biomarkers.

Answer: D

2. An 83 year old female presents to the ED with a history of a syncopal episode. A careful history reveals an associated complaint of mild exertional dyspnea over the last 3 days. Ultimately, a diagnosis of pulmonary embolism is determined. Which of the following statements is FALSE?
   a. A syncope presentation for PE is more common in the elderly, although it can occur in patients of any age, especially with massive PE.
   b. Pleuritic chest pain in PE is less likely in patients over 70 years of age than in younger patients (less than 70 years of age).
   c. Unilateral leg swelling or other signs of DVT are more likely in elderly patients than in younger patients.
   d. Elderly patients with PE are less likely to manifest tachypnea (≥20).
   e. Elderly patients with PE are less likely to manifest tachycardia (≥100).

Answer: B

3. A 78 year old female presents with acute chest pain that radiates to her back. She has a history of previous cardiac surgery and hypertension. Thoracic aortic dissection (TAD) is suspected. Which of the following is FALSE?
a. The risk factors for TAD are similar in the elderly and in younger patients and include hypertension, atherosclerosis, prior cardiac surgery, and a known aortic aneurysm.
b. Elderly patients (>70) with Type A dissections are less likely to present with abrupt onset chest pain than patients < age 70.
c. In some elderly patients ultimately diagnosed with TAD, the only symptom may be syncope.
d. ECG changes consistent of an acute myocardial infarction essentially rule out TAD.
e. TAD diagnosis often made in course of advanced imaging procedures intended to identify other diagnoses.

Answer: D