

## A Case of Twiddler's Syndrome

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A 65-year-old male patient with a background of extensive anteroapical myocardial infarction, severely impaired left ventricular function and renal failure had a biventricular cardiac defibrillator implanted on 28/06/07. The following day's checks were all normal including the chest X-ray (Figure 1).

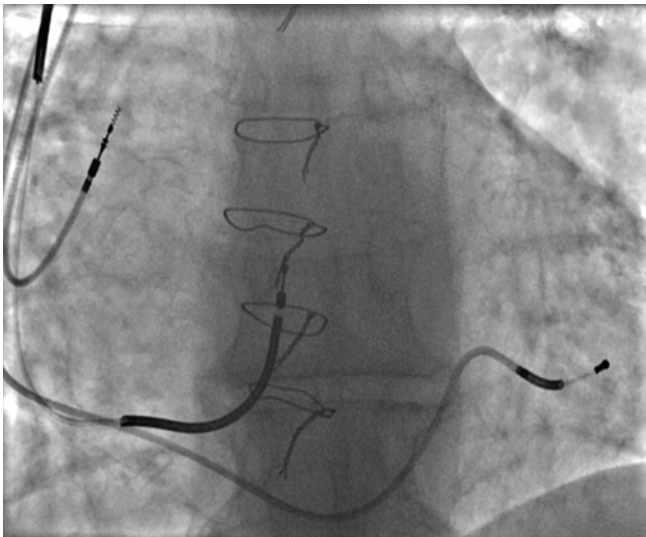


Figure 1. Post implant x-ray showing the appropriate lead location

He was brought back on 16/08/07 for intracardiac defibrillator dermatitis (ICD) induction. There was neither sensing nor capturing on the right and left ventricular leads. The lead position was screened on the table (Figure 2), followed by the defibrillator implant site (Figure 3).

This is a classical case of the Twiddler's syndrome, in which the patient had played with the generator in the pocket in such a way that the leads were wound around it. The patient exhibited the early signs of dementia and memory loss and denied interfering with his device; however, his wife had spotted bleeding over the site of implant on a couple of occasions after the wound had healed.

We would like to emphasise the importance of suturing the device routinely in order to secure it in the pocket.

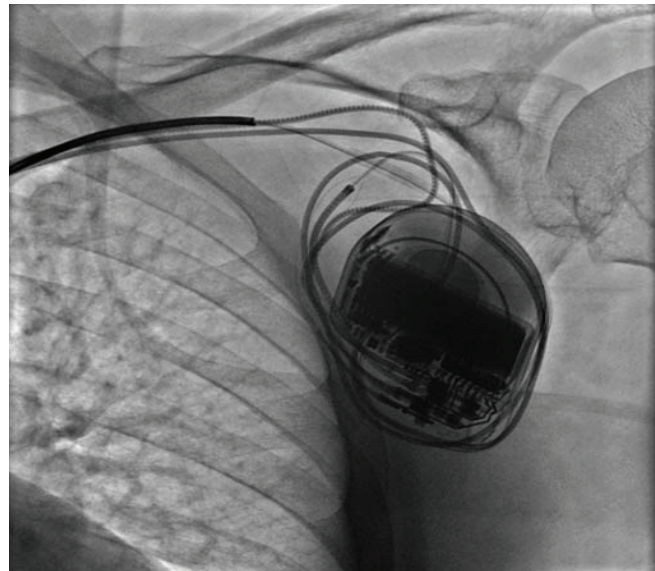


Figure 2. X-ray of the Implant site showing the leads wound around the device

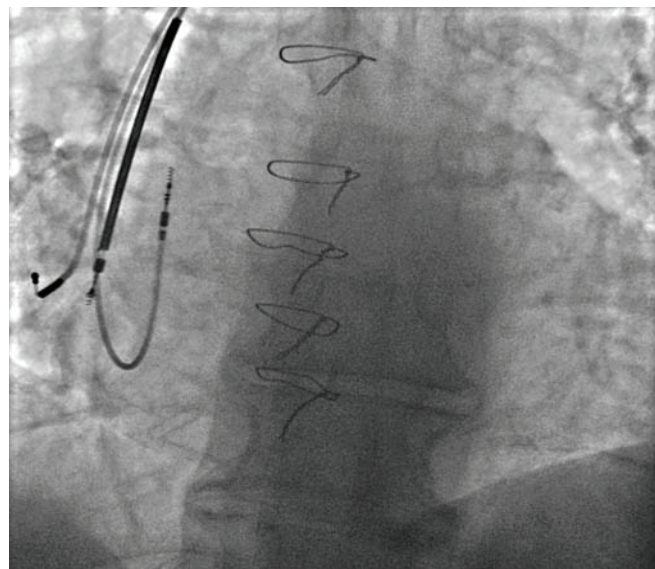


Figure 3. Displaced leads confirmed by x-ray

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