The finding of normal coronary arteries in patients admitted with chest pain and positive troponin is well recognized. Owing to its ability to provide tissue characterization, cardiovascular magnetic resonance imaging allows a diagnosis of myocarditis in 50% of patients with this presentation (1). The displayed images are from such a patient, who had no prior history of cardiac disease, and provide in vivo histological insight into the process of myocarditis. In the acute phase, evidence of extensive myocardial inflammation is seen in the lateral left ventricular (LV) wall using a short inversion time inversion recovery sequence (A) with corresponding late gadolinium enhancement (B). Follow-up images at 3 months show resolution of the inflammation (C), correlating with clinical recovery, and the development of localized myocardial fibrosis (D). RV = right ventricle.

REFERENCE