

## Unrecognized Pulmonary Embolism May Have Simulated Arrhythmogenic Pneumonia

To the Editor:

Given the fact that pulmonary embolism is notoriously underdiagnosed in hospital practice,<sup>1</sup> it is possible that the nonrepresentation of pulmonary embolism in the model of factors associated with cardiac arrhythmia diagnosis in patients hospitalized with pneumonia<sup>2</sup> might be attributable to unrecognized pulmonary embolism simulating arrhythmogenic pneumonia. The 2 disorders, pulmonary embolism and pneumonia, have comparable arrhythmogenic potential, as shown by the fact that, in patients who have no previous cardiac or pulmonary disease, the prevalence of atrial fibrillation is of the order of 4% in patients who present with pulmonary embolism,<sup>3</sup> and 4.8% in patients who present with pneumonia.<sup>4</sup>

Over and above the acknowledged electrocardiographic similarities between pulmonary embolism and pneumonia,<sup>4</sup> there also is considerable overlap between the 2 disorders in terms of clinical, radiographic, and biomarker stigmata.<sup>5</sup>

Finally, on occasion, rather than being a manifestation of the arrhythmogenicity of pulmonary embolism, atrial

fibrillation may itself be a trigger for pulmonary embolism, as was the case in a 61-year-old man with atrial fibrillation, in whom lobar consolidation (simulating pneumonia) was attributable to a pulmonary embolus originating from the right atrial appendage.<sup>6</sup>

In view of the above observations, pulmonary embolism should be included in the differential diagnosis of arrhythmogenic pneumonia.

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