Cardiac calcifications usually occur in the valves, the sinus and atrioventricular node, the coronary arteries, and rarely in the ventricular myocardium as a sequelae of myocardial infarction. The latter are associated with complications, including heart failure, systemic embolism and arrhythmias.

This is a rare case of severe myocardial calcification, associated with heart failure refractory to medical therapy. This is a 58 year old patient with a history of previous myocardial infarction that progresses to ischemic dilated cardiomyopathy (10% left ventricular ejection fraction) with several hospitalizations due to heart failure. He is admitted at our center with another global heart failure refractory to medical therapy (inotropes and IABP). Both in the anteroposterior chest X-ray, the CT chest scan and the coronary angiography (right oblique view), calcification of the ventricular wall thickness at the lateral and anterior levels, and at the apex of the heart (solid arrows) can be observed.

The patient was referred to another center to be evaluated for heart transplantation.