

Case Blog

Title: Left Atrial Myxoma - An Unusual Cause of Dyspnoea

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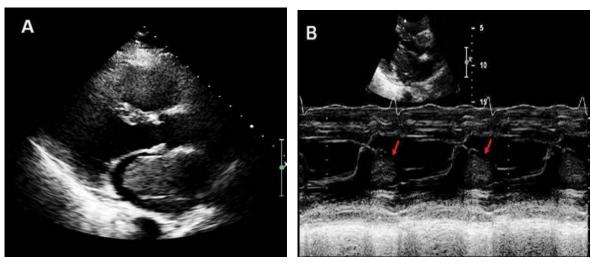


Figure 1A: Trans-thoracic echocardiographic parasternal long axis view of the massive left atrial myxoma.

Figure 1B: M-mode obtained from a parasternal long axis view demonstrating the echogenic mass (arrows) prolapsing towards the mitral valve leaflets in diastole.

A 58 year old hypertensive lady presented to her General Practitioner with a 3 month history of exertional dyspnoea, paroxysmal nocturnal dyspnoea, orthopnoea, decreased appetite and weight loss of 10 kilograms. Physical examination revealed a non-radiating apical soft systolic murmur and mild bipedal oedema, but was otherwise unremarkable. Electrocardiogram demonstrated normal sinus rhythm only and a chest radiograph was normal. She was initiated on heart failure therapy with little improvement.

Her symptoms progressed to dyspnoea on minimal exertion. Trans-thoracic echocardiography demonstrated a large echogenic mobile mass measuring 4.8 centimeters (cm) by 3.6 cm in the left atrium (LA) attached to the inter-atrial septum (Figure 1A). The mass occupied approximately 70% of the LA and protruded towards the mitral valve leaflets causing transient obstruction of the left ventricular (LV) inflow (Figure 1B). No vasculature was seen within the mass. Overall LV function was preserved. Urgent coronary angiography excluded concurrent coronary artery disease prior to transfer to a tertiary cardiothoracic unit. The patient underwent surgery within 24 hours and excision confirmed a large atrial myxoma. She recovered well with a rapid return to her pre-morbid level of activity.

This case highlights the importance of urgent echocardiography in a dyspnoeic patient presenting with alarming symptoms. It supports previous studies which have illustrated two-dimensional echocardiography as a fast, accurate and a non-invasive diagnostic procedure for left atrial myxomas [1].

References

1. Perry LS, King JF, Zeft HJ, Manley JC, Gross CM, et al. (1981) Two-dimensional echocardiography in the diagnosis of left atrial myxoma. Br Heart J 45: 667-671.