

Coronary Angiography in Myxoma

Coronariografía en el mixoma

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Myxoma is the most frequent benign primary cardiac tumor. Echocardiography is its main diagnostic tool; however, cardiac catheterization plays an important role in the diagnostic and preoperative approach.

These images correspond to a 64 year-old female hypertensive patient with no cardiac history, who was hospitalized due to syncope without prodrome. At the physical examination she was normotensive, presenting 2 heart sounds in 4 foci, split S2, without murmurs, and with no signs of acute pump failure. Transesophageal and transthoracic echocardiography showed a 3x3 cm well-defined, heterogeneous hyperechoic mobile mass in the left atrium (Figure 1). Coronary angiography revealed a mass in the left atrium highly vascularized by a branch of the right coronary artery, consistent with cardiac tumor (Figure 2). Surgical resection of the tumor and placement of an atrial septal patch were performed. The presence of cardiac myxoma was confirmed by pathology.

Although the importance of coronary angiography is to rule out associated coronary artery disease in patients with cardiac myxoma, a hypervascular image located at the level of the left atrium can lead to tumor diagnosis.

Conflicts of interest

None declared (See authors' conflict of interest forms in the web/ Supplementary Material).

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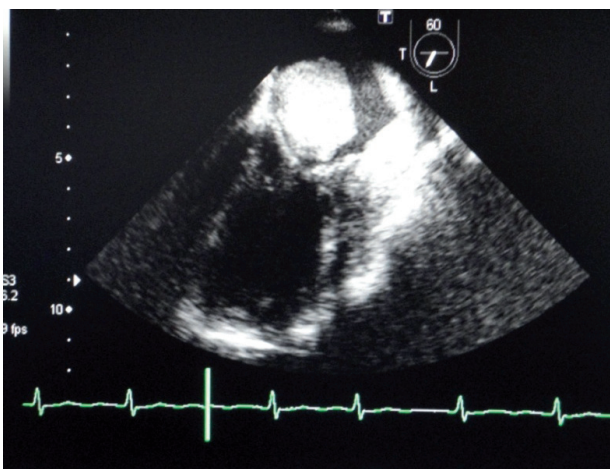


Fig. 1. A 60° two-chamber view transesophageal echocardiography, revealing a 3x3 cm well-defined heterogeneous hyperechoic mass in the left atrium.

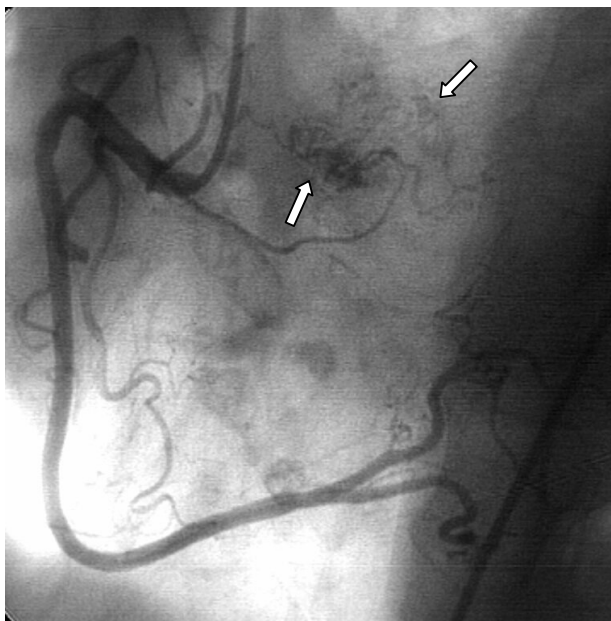


Fig. 2. Coronary angiography in LAO projection, showing blush at the level of the left atrium arising from an atrial branch of the right coronary artery.