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Clinical Image

A Rare Case of Giant Right Atrial Myxoma Presented as Right Heart Failure

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Abstract

Primary heart neoplasms are rare occurring with an estimated incidence of 0.0017-0.19%. Myxoma is the most prevalent primary heart tumor. The right atrium is an unusual localization, occurring only in 15-20% of myxoma cases. Here we report a case of giant atrial myxoma arising from right atrium and causing frequent episodes of postural syncope.

Keywords: Myxoma; Echocardiography; Heart Failure

Summary

Primary tumors of the heart are not common and have been found in only 0.0017% to 0.19% of unselected patients at post mortem [1]. The right atrium is an unusual localization, occurring only in 15-20% of myxoma cases [2]. Here we report a case of 28 year old male patient presented at cardiology clinic with complaints of gradually progressive edema of lower limbs for three months, he was also giving history of fever and significant weight loss over a period of six months. Cardiac auscultation revealed mid diastolic murmur at tricuspid area. Beside this other systemic examination were normal. His twelve lead electro cardiogram showed normal sinus rhythm. Transthoracic echocardiography revealed a echogenic right atrial mass, of huge dimensions (6.9 × 5.2 cm), connected to the lower portion of the interatrial septum by a small pedicle and protruding through the tricuspid valve into the right ventricle during diastole (Figure 1 and Video 1), his inferior vena cava was grossly dilated and not collapsing with respiration (Figure 2). The mass was surgically removed and found to be a myxoma. His symptoms improved significantly postoperatively.

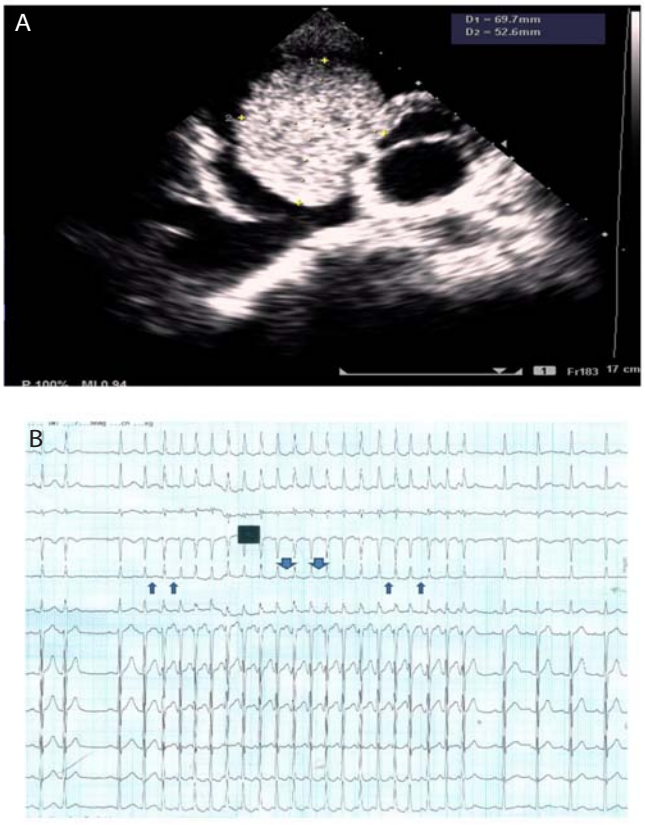
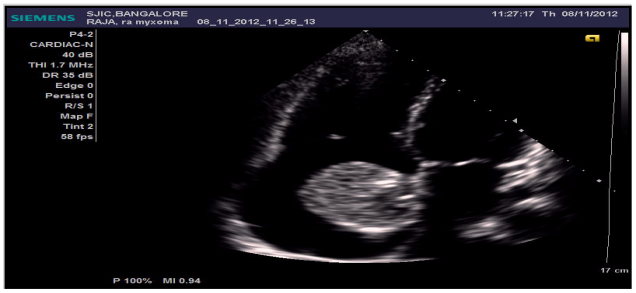


Figure 1: A) Showing large right atrial echogenic mass.
B) Small upward arrows showing long RR interval, big downward arrows indicates short RR interval.



Video 1: Showing right atriam mass attached to intraatrial septum pralapsing to right ventricle during diastole.

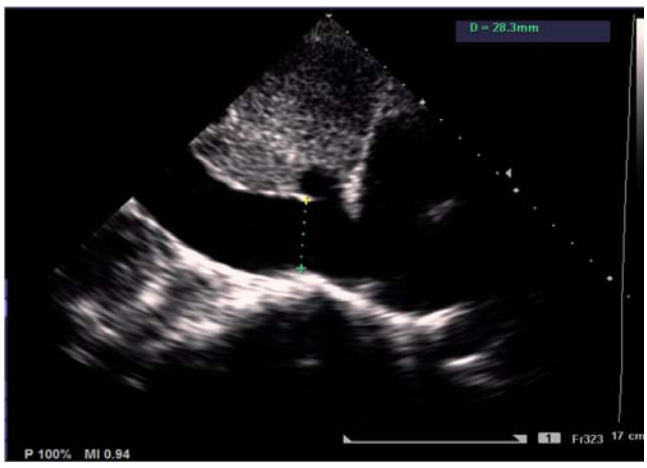


Figure 2: Showing dilated inferior vena cava.

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