

# Unusual presentation of left atrial myxoma

Kunal Gururani,<sup>1</sup> Parveen Kumar<sup>2</sup>

<sup>1</sup>Department of Cardiology, Christian Medical College and Hospital Vellore, Vellore, Tamil Nadu, India

<sup>2</sup>Department of Cardiology, Eternal Heart Care Centre, Jaipur, Rajasthan, India

## Correspondence to

Dr Kunal Gururani,  
drgururanik@gmail.com

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## DESCRIPTION

A 48-year-old man was admitted with symptoms of low grade fever and lower limb paraesthesia of 5 months duration. He also gave history of bilateral femoral and left brachial embolectomy performed elsewhere 4 months back.

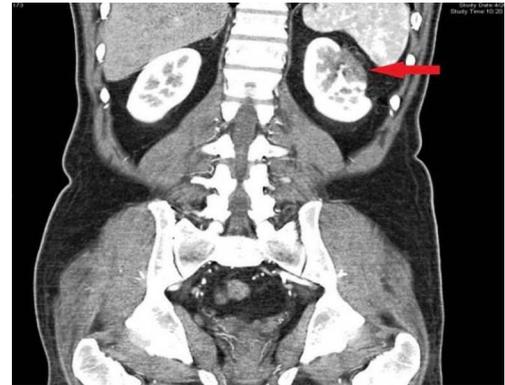
Clinical examination was normal. Routine blood investigations including complete haemogram, his liver and renal functions were normal. The coagulation profile was also normal; however, his erythrocyte sedimentation rate was elevated at 86 mm/hour (reference for laboratory; <20 mm/hour). Echocardiographic evaluation (figures 1 and 2), was found to have large mass arising from the left atrial side of interatrial septum protruding towards the left ventricular cavity. CT scan (figure 3) of the abdomen revealed a wedge-shaped infarct (due to embolisation) in the left kidney, further supporting the diagnosis of atrial myxoma. Successful surgical excision of the mass was performed and biopsy of



**Figure 1** Transthoracic echocardiography image showing left atrial mass attached to interatrial septum.



**Figure 2** Transoesophageal echocardiography revealed large left atrial mass attached with the interatrial septum (arrow showing the stalk of the mass).



**Figure 3** CT scan of the abdomen showing a wedge-shaped infarct in the left kidney due to embolisation.



**Figure 4** Postoperative transthoracic echocardiographic image after excision of left atrial mass.

the mass confirmed the diagnosis of left atrial myxoma (figure 4).

Systemic arterial embolisation has been reported in the literature but brachial artery embolisation is rare in atrial myxoma.<sup>1 2</sup> Transoesophageal echocardiography is the cornerstone for diagnosis of atrial myxoma as in some cases transthoracic echocardiography may not show the small size of atrial myxoma, and myxoma size does not correlate with the embolisation potential.<sup>1</sup>

## Learning points

- ▶ Left atrial myxoma is a rare cause of upper extremity embolism.
- ▶ Transoesophageal echocardiography is the cornerstone for diagnosis of atrial myxoma.
- ▶ The size of atrial myxoma does not correlate with embolisation potential.



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**Contributors** KG has performed the echo, written the case report and has taken consent from the patient. PK has provided valuable inputs regarding the case, for example planning the CT scan for the patient, helped in selecting bibliography and editing the case report.

**Competing interests** None declared.

**Patient consent** Obtained.

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