Ventricular septal defect with bidirectional shunting in a patient with congenitally corrected transposition

A 22-year-old asymptomatic male in the army was seen in our department during his periodical examination. He had a grade 3/6 mesocardiac systolic murmur on cardiac auscultation. Electrocardiogram (ECG) showed normal sinus rhythm with right bundle branch block. Transthoracic echocardiographic examination with agitated saline was performed to identify the direction of shunt flow in VSD. Contrast echocardiography demonstrated positive contrast effect in the left ventricular in diastole confirming a right-to-left shunt at the ventricular septum (Video 2). According to our knowledge, our case is the first reported CCTGA with VSD with bidirectional shunting in an asymptomatic patient.

Huge main pulmonary arterial thrombus in a child with increased lipoprotein (a) level

Lipoprotein (a) [Lp (a)] is an atherogenic