A 57 years old woman with a history of coronary artery bypass surgery in 1996 and 1999 was admitted to our clinic with complaint of palpitation. Her physical examination was normal except parasternal scar due to operation. Infrequent ventricular extrasystoles and no sign of ischemia or infarct were seen on standard surface electrocardiogram. Runs of ventricular extrasystoles were recognized on her Holter monitorization. On her transthoracic echocardiography, a mass with a sharp contour attached to the left ventricular apex with a pedicle was seen (Fig. 1, see corresponding video movies at www.anakarder.com). The dimensions of the mass were 12.6 and 13.4 mm. Cardiac magnetic resonance imaging revealed the left ventricular mass with the similar echogenicity of myocardium (Fig. 2). The patient refused to undergo surgery for third time. In our opinion, the mass was a myxoma of left ventricle. We decided to prescribe metoprolol for relief of ventricular extrasystoles and warfarin in order to prevent embolic complications. After medical treatment there were no runs of ventricular extrasystoles on Holter monitorization.

References