A previously healthy 51-year-old woman presented with atypical chest pain and palpitation. On physical examination, no abnormal findings were observed. The electrocardiogram was normal. Transthoracic echocardiography showed an apical diverticulum complicated with thrombus (Fig. A). On coronary angiography, coronary arteries were normal (Fig. B).

Left ventriculography was not performed due to the presence of thrombus detected by echocardiography. Since the patient’s electrocardiogram and coronary angiography were completely normal, the apical diverticulum was considered to be congenital. Due to the small size of the diverticulum and low risk for rupture, treatment was designed on a medical basis with warfarin and a beta-blocker. Diverticula have been reported to be associated with various cardiac and extracardiac anomalies, but anomalous course of a left ventricular diverticulum with thrombus has not been reported previously.

**Figures.** (A) Transthoracic echocardiogram in the apical-four chamber view showing a left ventricular contractile diverticulum in the apex complicated with thrombus. (B) Coronary angiogram showing normal coronary arteries. LA: Left atrium; LV: Left ventricle; LAD: Left anterior descending artery; Thr: Thrombus; D: Diverticulum; M: Mass.