

## Acquired Gerbode type ventricular septal defect after aortic valve replacement

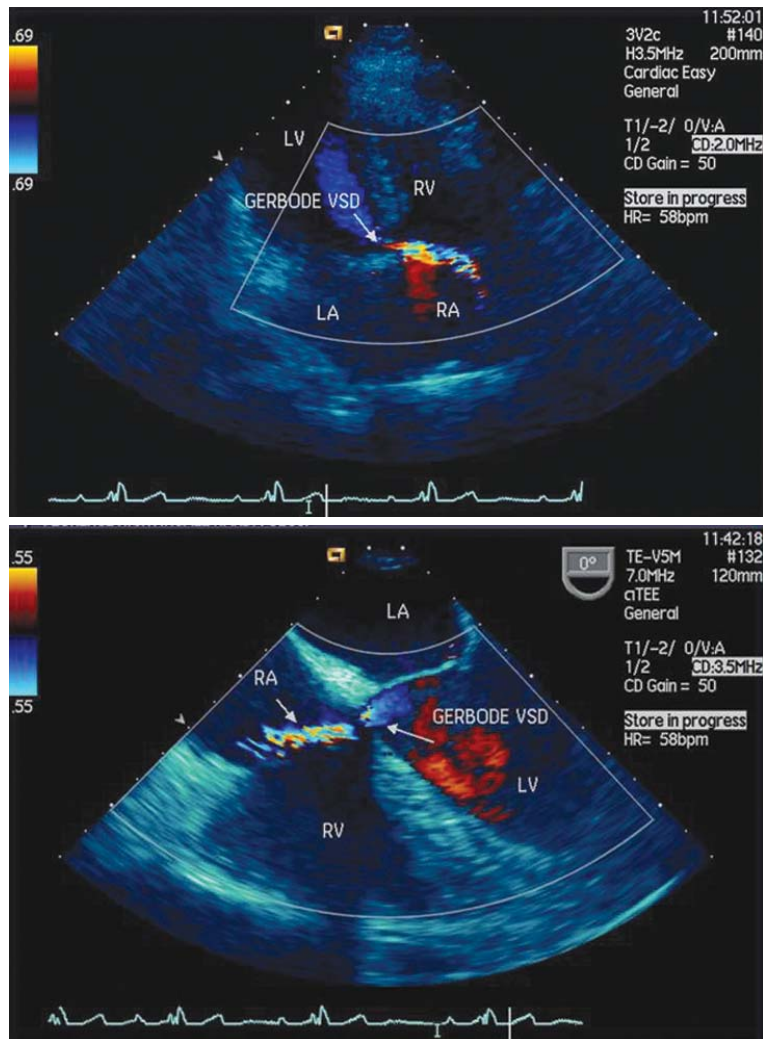
### Aort kapak replasmanı sonrası edinsel Gerbode tipi ventriküler septal defekt

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A 68-year-old man with a prosthetic aortic valve replacement (AVR) (ATS, no: 21) presented with exertional dyspnea and leg edema. Two-dimensional transthoracic echocardiography revealed a high-velocity systolic jet across a defect between the left ventricle (LV) and the right atrium (RA).

Manifest LV to RA shunt was demonstrated in the transesophageal echocardiographic examination, consistent with the Gerbode type ventricular septal defect (VSD). The diagnosis was confirmed during surgery and repaired. In this case, we report a rare form of the defect of LV to RA communication, attributed to an AVR. LV to RA communication, known as Gerbode defect, may exist in congenital or acquired forms. The acquired forms develop mainly due to infective endocarditis, myocardial infarction and valvular surgery. Our case is a presentation of a rare Gerbode type VSD which occurred as a result of an AVR.



**Figures**– Gerbode type ventricular septal defect. \*Supplementary video files associated with this case can be found in the online version of the journal.