Systemic lupus erythematosus is an autoimmune disorder resulting in multiorgan inflammatory damage. Libman-Sacks endocarditis (LSE) is characterized by sterile fibrous vegetations that can be developed anywhere on the endocardial surface. The mitral valve was involved more than half of patients with vegetations. A 38-year-old man with a six-year history of systemic lupus erythematosus was admitted to our department for a routine evaluation. Two-dimensional transthoracic echocardiography revealed fibrous nodules at the edge of mitral valve and severe mitral regurgitation. He underwent two-dimensional transesophageal echocardiography (2D-TEE) which revealed a mitral valve verrucous vegetations on the atrial surfaces of valve leaflets (Fig. A, Video 1*) and severe mitral regurgitation (Fig. B, Video 2*). To clarify this pathology, three-dimensional transesophageal echocardiography (3D-TEE) was carried out. The 3D full volume color TEE demonstrated severe mitral regurgitations (Fig. C, Video 3*) and 3D full volume TEE showed the posterior mitral valve as three separated parts due to LSE (Fig. D, Video 4*). The patient was followed medically because left ventricle function and diameters were normal and his functional capacity was class 1.

Figures—(A) Two-dimensional transesophageal echocardiography revealing mitral valve verrucous vegetations on the atrial surfaces of valve leaflets and (B) severe mitral regurgitation. (C) Three-dimensional full volume color Doppler TEE confirming severe mitral regurgitation and (D) 3D full volume TEE showing the posterior mitral valve as three seperated parts. Ao: Aorta; AML: Anterior mitral valve.

*Supplementary video files associated with this presentation can be found in the online version of the journal.