

A large thrombus on false tendon in a cardiomyopathic patient

Bir kardiyomiyopati hastasında yalancı tendon üstünde geniş bir trombüs

Ali Hosseinsabet

Department of Cardiology,
Tehran University of Medical
Sciences, Tehran, Iran

A 36-year-old woman admitted to our hospital with dyspnea on exertion, functional NYHA class III and extremity edema. She had a history of postpartum cardiomyopathy, diagnosed three months ago. Drug history revealed previous use of captopril, carvedilol, spironolacton and furosemide. Her electrocardiogram showed nonspecific ST-T changes. Transthoracic echocardiography showed severe left ventricular enlargement with severe systolic dysfunction (ejection fraction=18%) and moderate right ventricular enlargement with significant systolic dysfunction. Valvular evaluation showed moderate functional mitral regurgitation and severe functional tricuspid regurgitation. The estimated pulmonary pressure was 60 mmHg. In addition, there was a large thrombus (29x 23mm) attached to false tendon without any attachment to left ventricular walls (Figure, Video 1*). It appears that in the evaluation of cardiomyopathic patient, meticulous search for thrombus should be done.



Figure– Large thrombus attached to false tendon. *Supplementary video file associated with this presentation can be found in the online version of the journal.