

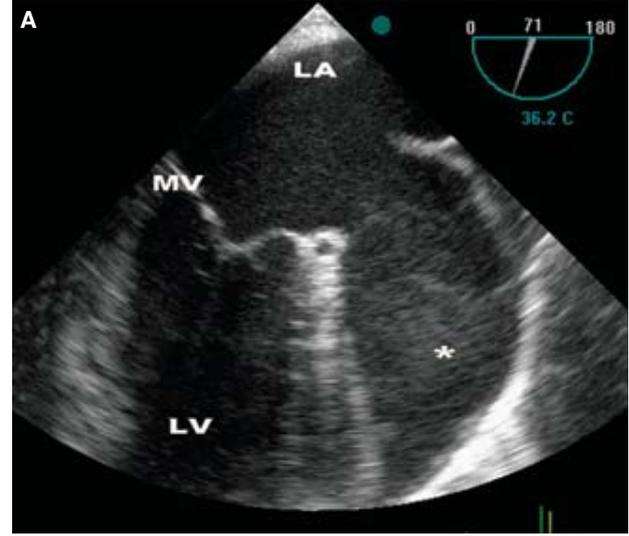
Huge intrapericardial aneurysm of the left atrial appendage

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A 42-year-old woman without a cardiac history presented with exertional dyspnea and palpitation. On physical examination, her pulse was regular at 76 bpm and blood pressure was 140/80 mmHg. Cardiac auscultation was unremarkable. Electrocardiography showed sinus rhythm with normal findings. The chest radiograph revealed mild cardiomegaly. Transthoracic echocardiography demonstrated a cystic structure or loculated effusion near the left chambers. Transesophageal

echocardiography showed a huge aneurysm of the left atrial appendage, 7x5 cm in diameter. The aneurysm did not contain thrombus, but there was severe spontaneous echo contrast with decreased flow velocity (0.25 m/sec) at the bottom of the aneurysm (Fig. A). The patient underwent cardiac



operation for removal of the left atrial appendage aneurysm because of the potential risks for systemic embolization and arrhythmia. The aneurysm was inverted, resected, and sutured at its base resulting in complete ligation of the left atrial appendage. The postoperative course was uneventful.

Figure A. Preoperative transesophageal echocardiography demonstrating a huge left atrial appendage aneurysm (asterisk) and severe spontaneous echo contrast within the aneurysm. LA: Left atrium; LV: Left ventricle; MV: Mitral valve.

Sol atriyal apendikte dev intraperikardiyal anevrizma