Unusual triad; interrupted aortic arch, left atrial myxoma and calcific aortic stenosis

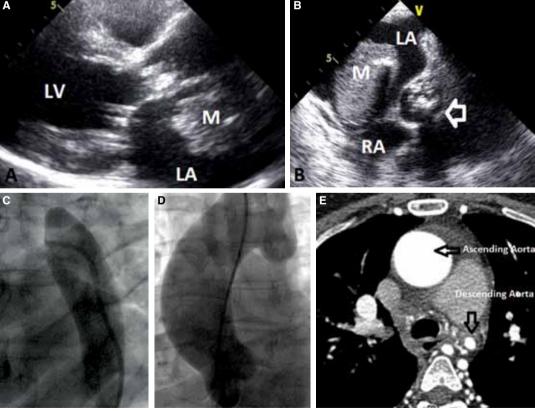
Nadir bir birliktelik; kesintili aort arkusu, sol atriyumda miksoma ve kalsifik aort darlığı

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A 44-year-old female house builder presented to outpatient service because of a history of effort intolerance, general malaise and cough that began two years earlier. Physical examination revealed a blood pressure of 170/95 mmHg in the upper limbs and 110/60 mmHg in the lower limbs. Transthoracic (TTE) and trans-

esophageal echocardiography (TEE) showed aortic stenosis and left atrial myxoma (Fig. A, B). The aortic valve was found to be calcific with a severe gradient (max 94 mmHg). Cardiac catheterization was performed by the percutaneous femoral artery approach. Since we could not advance a catheter and guide wires in a retrograde fashion from the descending to the ascending aorta, a brachial artery puncture was performed. Subsequently, aortography from the ascending aorta through the right brachial artery showed complete interrupted aortic arch approximately distal to the origin of the left subclavian artery (Fig. C, D). A computed tomography showed an obstruction of the aortic arch distal to the origin of the left subclavian artery and markedly at the ascending aortic arch (Fig. E). The patient was recommended for surgical intervention. We report a rare case of an adult with interrupted aortic arch, calcific aortic stenosis and left atrial myxoma. To the best of our knowledge, this unusual triad has not been previously described.



Figures— (A) Transthoracic echocardiography showing left atrial myxoma (M) and calcific aortic valve. (B) Transesophageal echocardiography (short -axis view) shows a large mobile myxoma (M) extending from the interatrial septum in the left atrium and calcific aortic valve (arrow). (C) The descending thoracic aortogram shows complete IAA in the upper thorax. (D) Ascending aortogram shows the aortic arch with complete interruption from the descending thoracic aorta. (E) CT angiography showing interrupted aortic arch, ascending aorta and descending aorta.