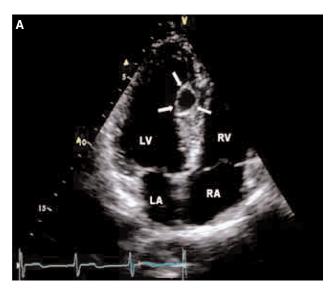
A cystic mass in the interventricular septum: echocardiography and magnetic resonance imaging findings



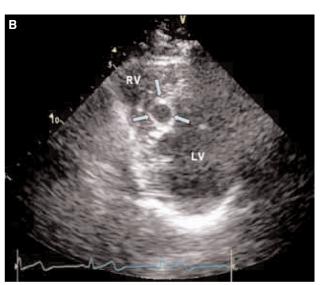
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A 52-year-old male patient presented at our outpatient clinic with the complaints of dyspnea on exertion and chest pain lasting 5-10 minutes for four months. Physical examination revealed a blood pressure of 115/80 mmHg, rhythmic heart sounds, and heart rate of 76 beats/min. Respiratory examination showed no

abnormality, while NYHA functional capacity was considered class II. Electrocardiography showed sinus rhythm and negative T wave pattern was observed in the lead V5, V6, DI, and aVL. Effort test was positive. While transthoracic echocardiography showed normal left ventricular ejection fraction and normal valve functions, a cystic mass of 1.2x1.5 cm in the middle interventricular septum was detected (Figures A, B). In addition, cardiac magnetic resonance imaging revealed a cystic lesion (~1 cm) in the interventricular septum, which was not associated with vascular regions (Figure C). Other cardiac and main vascular regions were found to be normal. Coronary angiography also showed normal coronary arteries. Ventriculography was not performed due to the possibility of cystic rupture. The patient was also evaluated by an internal İnterventriküler septumda kistik yapı: Ekokardiyografi ve manyetik rezonans görüntüleme bulguları





medicine specialist. His abdominal ultrasonography did not show any pathological finding, while serological hidiatidosis-IHA/IFAT test results were negative. Considering these findings, the patient who was scheduled for follow-up with routine echocardiography was discharged.

Figures. Transthoracic echocardiography, apical four chamber view **(A)**, parasternal short axis imaging **(B)**, and cardiac magnetic resonance imaging **(C)** showing cystic mass of 1.2x1.5 cm in the middle interventricular septum.