A 58-year-old woman presented with intermittent dyspnea and dizziness of four months duration and aggravated dyspnea and palpitation during the previous three days. She also experienced transient ischemic attack. Chest x-ray revealed pulmonary congestion. Her electrocardiogram showed sinus tachycardia, atrial premature beats, and left atrial overload. Two-dimensional echocardiography revealed a mass occupying the left atrium, originating from the interatrial septum (Fig. 1) and protruding into the left ventricle through the mitral valve during diastole (Fig. 2). Significant mitral valve obstruction with a mean diastolic pressure gradient of 12 mmHg was detected on Doppler echocardiography. Mild mitral regurgitation was found. She was operated upon using extracorporeal circulation. The resected irregular shaped mass was 8 × 6 × 3 cm in size (Fig. 3). Histologic examination confirmed that the mass was a benign atrial myxoma. The postoperative course was uneventful and fourteen months after the surgery the patient has no sign of recurrence. Myxoma is the most common benign tumor of the heart and rarely results in mitral valve obstruction producing congestive heart failure and transient ischemic attack.

Reference