

CASE IMAGE

Huge multicavitated left atrial mass mimicking mitral stenosis*Mitral stenozu taklit eden dev sol atriyal multikavite kitle*

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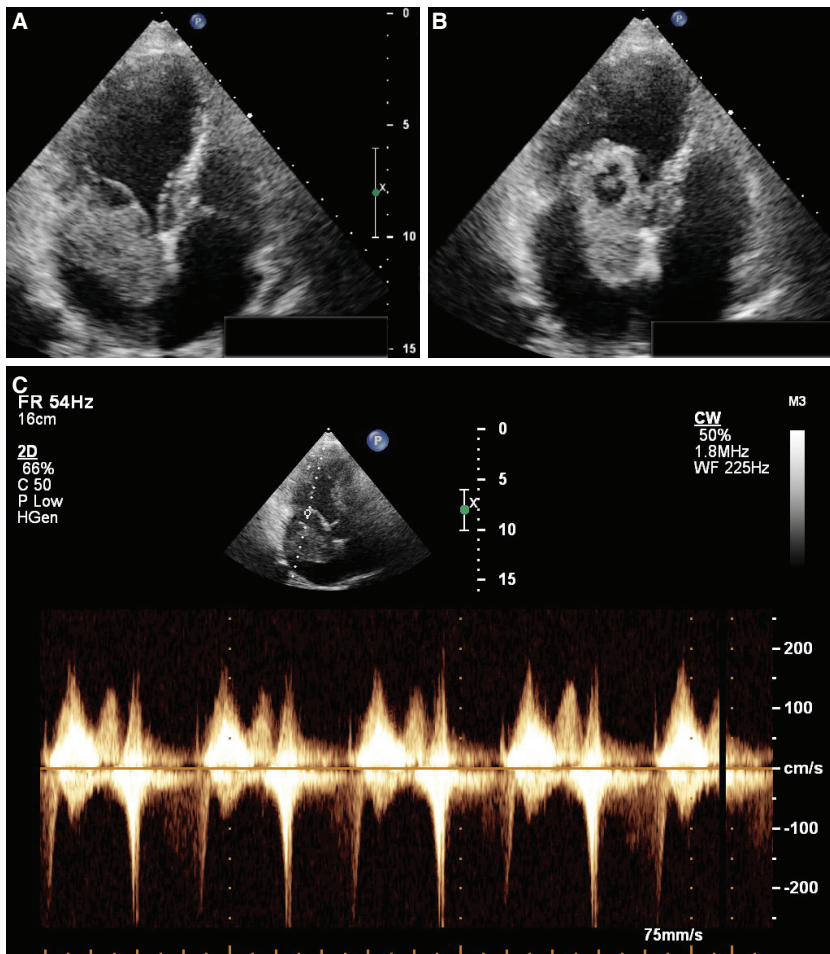
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A 64-year-old male was admitted to our hospital with exertional dyspnea. Physical examination revealed blood pressure of 110/80 mmHg, filiform pulse at 94 bpm with few ectopic beats, and intermittent diastolic murmur at mitral area, intensity of which changed with position, causing us to suspect mitral stenosis. Electrocardiography indicated sinus rhythm and supraventricular ectopic beats. Two-dimensional transthoracic echocardiogram revealed a huge, mobile, multicavitated mass attached to the interatrial septum that was 64 mm by 25 mm in diameter and contained several hypoechoic cavities (Video 1*, Figure A, B). The mass was prolapsing across the mitral valve orifice in diastole, causing functional stenosis. Color Doppler imaging revealed minimal mitral regurgitation. Continuous wave Doppler demonstrated no gradient at mitral valve (Figure C). The patient was referred to the cardiovascular surgery clinic for resection of mass, but declined to undergo surgery.



Figures– (A) Apical four-chamber echo image showing multicavitated mass in the left atrium. **(B)** Apical four-chamber echo image showing multicavitated mass in the left ventricle. **(C)** Continuous wave Doppler image demonstrating no gradient at mitral valve. *Supplementary video files associated with this presentation can be found in the online version of the journal.