A tumor obliterating the right ventricular outflow tract

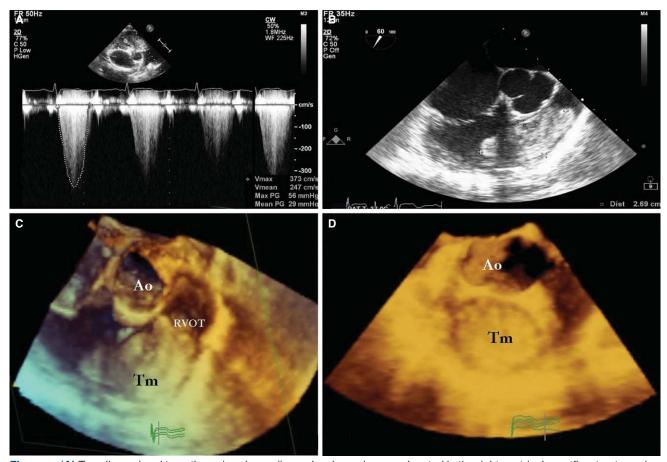
Sağ ventrikül çıkış yolunu oblitere eden tümör

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Department of Cardiology, Gulhane Military Medical Academy, Ankara, Turkey A 19-year-old man was admitted to our clinic with shortness of breath and palpitations. On physical examination, a grade 3/6 systolic ejection murmur was heard at the left sternal border. Two dimensional transthorasic echocardiography revealed a mass located in

the right ventricular outflow tract (RVOT) resulting

in obstruction (a peak gradient of 56 mmHg and a mean gradient of 29 mmHg) (Fig. A). Additionally, the ventricle was slightly dilated. Transesophageal echocardiography short-axis view showed a mass attached to the right ventricular free wall, extending across the pulmonary valve and into the pulmonary artery during each systole. The size of the tumor was 60x27 mm (Fig. B). For detailed examination of the tumor, we applied three-dimensional transesophageal echocardiography (3-D TEE). This imaging showed the tumor localization and size at the right ventricle (Figs. C, D, Videos 1, 2*).



Figures— (A) Two dimensional transthorasic echocardiography showed a mass located in the right ventricular outflow tract causing obstruction. (B) Transesophageal echocardiography short-axis view revealed a mass attached to the right ventricular free wall. (C, D) Three-dimensional transesophageal echocardiography demonstrated the tumor localization and size at the right ventricle. *Supplementary video files associated with this case can be found in the online version of the journal. RVOT: Right ventricular outflow tract; Ao: Aorta. Tm: Tumor.