CASE IMAGE

Multimodality imaging of a large pseudoaneurysm of the mitral aortic intervalvular fibrosa

Mitral-aortik intervalvüler fibroza yalancı anevrizmasının çoklu yöntemlerle gösterilmesi

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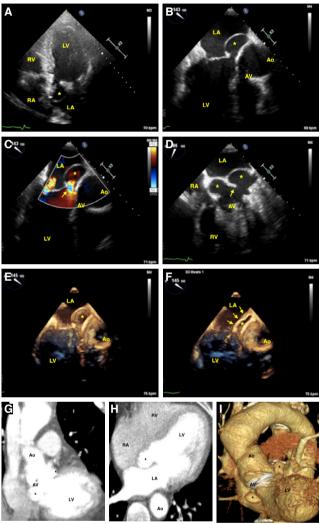
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A 68-year-old man was admitted to the emergency department with dyspnea for one week. He had a history of mechanical aortic valve replacement (CarboMedics, 23 mm; CarboMedics, Inc., Austin, TX, USA) for severe aortic regurgitation 15 years earlier. A physical examination revealed a blood pressure of 140/90 mmHg with tachypnea (22/minute). A combined systolic and diastolic murmur was detected over the

third intercostal space at the left sternal border. The patient had no signs of infective endocarditis. After initial medical stabilization, a transthoracic echocardiography was performed, and a pseudoaneurysm of the mitral-aortic intervalvular fibrosa (MAIVF) was detected in the apical 3-chamber view (Fig.-A, Video 1*). Transesophageal echocardiography (TEE) was performed for further evaluation, and to measure the size of the pseudoaneurysm (Fig. B, C, Video 2, 3*). The pseudoaneurysm of the MAIVF surrounded more than 50% of the aortic mechanical valve (Fig. D, Video 4*), and demonstrated systolic expansion and diastolic collapse, which is characteristic for a pseudoaneurysm (Fig. E, F, Video 5, 6*). The presence of the pseudoaneurysm was also confirmed using a multidetector computed tomography (Fig. G-I). The patient was transferred for cardiovascular surgery. The MAIVF connects the anterior mitral leaflet to the posterior portion of the aortic annulus. It is a fibrous and avascular region vulnerable to injury and infection, making the MAIVF prone to the development of a pseudoaneurysm. Pseudoaneurysm of the MAIVF is a rare, but potentially life-threatening sequela of endocarditis or valve surgery. It is best diagnosed with TEE, but car-



diac computed tomography and magnetic resonance imaging may also be useful to determine the size and local complications of the pseudoaneurysm.



Figures- (A) Transthoracic echocardiography apical 5-chamber view of the pseudoaneurysm of the MAIVF (asterisk). (B) TEE midesophageal long axis view of the pseudoaneurysm of the MAIVF (asterisk). (C) TEE mid-esophageal long axis view with color Doppler showing flow (arrow) to the pseudoaneurysm of the MAIVF (asterisk). (D) TEE mid-esophageal short axis view revealing septa (arrow) within the pseudoaneurysm of the MAIVF (asterisks). (E) 3D-TEE mid-esophageal long axis view illustrating a pseudoaneurysm of the MAIVF (asterisk) with systolic expansion (arrows). (F) 3D-TEE mid-esophageal long axis view revealing a pseudoaneurysm of the MAIVF (asterisk) with diastolic collapse (arrows). (G) Coronal CT image illustrating a pseudoaneurysm of the MAIVF (asterisks). (H) Transverse CT showing a pseudoaneurysm of the MAIVF (asterisks). (I) 3D-CT showing a pseudoaneurysm of the MAIVF (asterisks), CT: Computed tomography: MAIVF: Mitral-aortic intervalvular fibrosa: TEE: Transesophageal echocardiography. *Supplementary video files associated with this presentation can be found in the online version of the journal.