CASE IMAGE

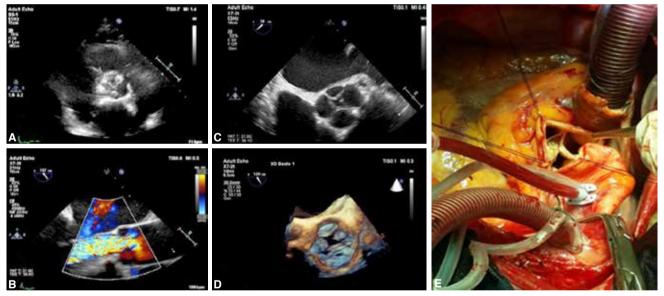
Severe aortic regurgitation due to quadricuspid aortic valve in a septuagenarian

Yetmişli yaşlarda kuadriküspit aortik kapağa bağlı ileri aort yetersizliği

Semi Öztürk Mazlum Şahin Gündüz Durmuş Mustafa Sarı

Mehmet Can

Department of Cardiology, Haseki Training and Research Hospital, İstanbul, Turkey A 70-year-old male presented to the outpatient clinic with complaint of exertional dyspnea. Physical examination revealed 3/4 diastolic murmur on the right sternal border. Blood pressure and heart rate were 160/70 mm Hg and 95 bpm, respectively. Electrocardiogram was normal. Severe aortic regurgitation and moderately decreased left ventricular systolic function were shown on transthoracic echocardiography. Meticulous evaluation of aortic cusps raised suspicion of quadricuspid valve (Figure A). Two-dimensional transesophageal echocardiography confirmed degenerated quadricuspid aortic valve causing severe regurgitation (Figures B, C). Three-dimensional transesophageal echocardiography depicted quadricuspid cusps in detail (Figure D, Video 1*). Valve replacement surgery was performed, and intraoperative evaluation confirmed diagnosis of quadricuspid valve (Figure E). The patient was uneventfully discharged 1 week after surgery.



Figures— (A) Transthoracic parasternal short-axis view of aortic valve. (B) Severe regurgitation shown on color Doppler. (C, D)Three-dimensional transesophageal views of quadricuspid aortic valve. Three equal and 1 small cusp are shown. (E) Intraoperative surgical view of quadricuspid aortic valve. *Supplementary video files associated with this presentation can be found in the online version of the journal.