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AC002

Adult Cardiology & Clinical Cardiovascular Medicine • Poster Presentation

GIANT LEFT ATRIAL MYXOMA PRESENTING AS REFRACTORY HEART FAILURE IN A PATIENT WITH HYPERTENSION: A DIAGNOSTIC PITFALL AND SURGICAL CURE.

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BACKGROUND: Atrial myxoma is the most common primary cardiac tumor, predominantly affecting females between the third and sixth decades. It typically presents with a triad of obstructive, embolic, and constitutional symptoms.

METHOD: We report a case of a 53-year-old female known to have hypertension, presenting with a 3-month history of worsening exertional dyspnea, orthopnea, and palpitations. Initial assessment suggested congestive cardiac failure secondary to hypertensive heart disease. Diagnostic evaluation included electrocardiography (ECG), chest X-ray, and 2D echocardiography.

RESULTS: Physical examination revealed bi-basal crepitations and an S3 gallop. ECG showed first-degree AV block and left ventricular hypertrophy. 2D echocardiography identified a large, pedunculated polypoid mass (6.8cm x 4.5 cm) in the left atrium attached to the inter-atrial septum, consistent with a myxoma. The patient underwent successful surgical excision via median sternotomy with the heart at standstill. Postoperative recovery was rapid, with complete resolution of symptoms.

CONCLUSION: Atrial myxoma can closely mimic common cardiovascular conditions like hypertensive heart disease. High clinical suspicion and early echocardiography are essential for diagnosis. Prompt surgical resection remains the definitive treatment, offering an excellent prognosis with low mortality and recurrence rates in sporadic cases.

Keywords: Atrial myxoma, Heart failure, Echocardiography, Left atrial mass, Hypertensive heart disease.