Left atrial myxoma: The role of multislice computed tomography

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Supplemental material is available online.

A 30-year-old patient came to our cardiac clinic complaining of exertional dyspnea and a nonspecific chest pain. An echocardiogram showed a mass in the left atrium of about 2 cm, which was highly suggestive of left atrial myxoma. The pathologic condition was determined by means of multislice computed tomography, which reconfirmed the mass in the left atrium (Figures 1 and E1).

The patient underwent an operation, during which the pathologic condition was similar to that identified by means of echocardiography and multislice computed tomography (Figure 2, A). The tumor was excised, and the left atrium was closed (Figures 2, B, and E2). The patient was weaned off cardiopulmonary bypass uneventfully. He was discharged from the hospital 5 days after the operation.

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Figure 1. Multislice computed tomographic scan shows a left atrial mass suggestive of left atrial myxoma.

Figure 2. After opening the left atrium, a myxoma attached to the left atrial wall was removed.

Figure E1. A filling defect in the left atrium, illustrated by a horizontal section of a computed tomographic scan.

Figure E2. A left atrial mass and its base were successfully removed.