REC: CardioClinics

www.reccardioclinics.org

Image in cardiology

Right atrial dissection: a rare and silent complication

Disección auricular derecha: una complicación rara y silenciosa

Rita V. Gomes[a,*], *João Pais*[b], *Inês Cruz*[c], *Isabel João*[c]

[a] *Serviço de Cardiologia, Hospital de Vila Franca de Xira, Lisbon, Portugal*
[b] *Serviço de Cardiologia, Hospital do Espírito Santo, Évora, Portugal*
[c] *Serviço de Cardiologia, Hospital Garcia de Orta, Almada, Setúbal, Portugal*

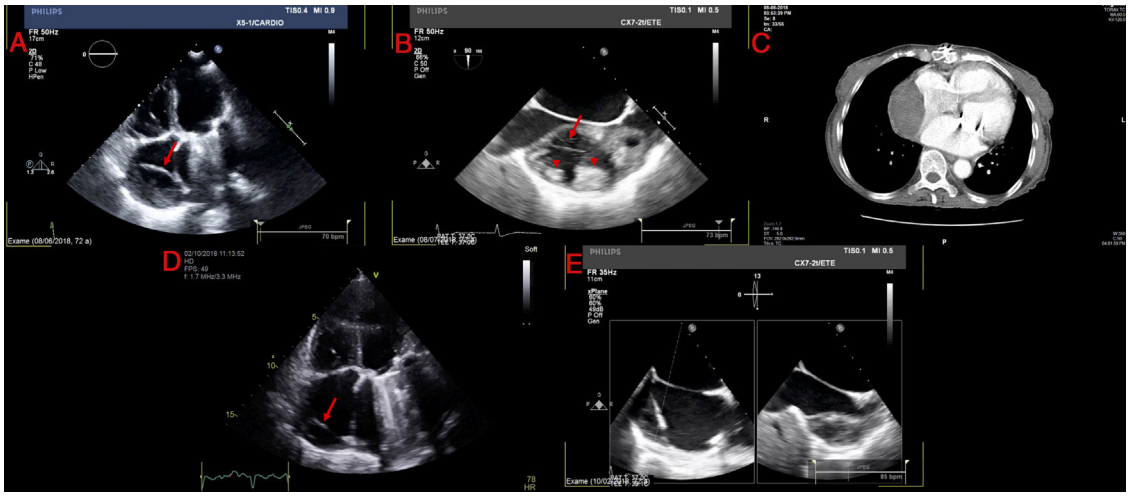

Fig. 1

A 72-year-old woman had a history of rheumatic heart disease with severe mitral stenosis and severe tricuspid insufficiency.

She was submitted to mitral valve replacement with a St. Jude 27 prosthesis and a tricuspid annuloplasty with a Carpentier-Edwards tricuspid annuloplasty ring 32. Immediately after the surgery, the patient evolved in cardiogenic shock and received inotropic support. She was weaned off the support after 7 days, with no relevant echocardiographic findings in the daily exams.

The transthoracic echocardiogram repeated 19 days after the procedure showed a mitral prosthesis with no dysfunction, a tricuspid ring well positioned and a right atrial mass (Fig. 1A, arrow). The transesophageal echocardiogram showed a right atrial mass, limited by an intimal flap of the atrial wall, with both an echolucent and echogenic area, resembling a blood-filled cavity and suggesting the presence of thrombi, respectively (Fig. 1B, arrow and arrowheads). The mass measured 81.2 mm × 42.5 mm and there was no obstruction to right atrial or ventricular fillings nor signs of rupture. The computed tomography scan confirmed the diagnosis, with no pericardium involvement (Fig. 1C). The patient remained asymptomatic and was discharge 4 days later. The atrial dissection diminished after 1 month, with no signs of any pericardial collection and no surgical reintervention (Fig. 1D and E).

This case illustrates an asymptomatic right atrial dissection, a very rare complication of tricuspid annuloplasty, confirms the importance of echocardiography after cardiac surgery, even in asymptomatic patients, and is an example of a favourable evolution without surgical reintervention.

* *Corresponding author*.
E-mail address: ritamargaridagomes@gmail.com (R.V. Gomes).
https://doi.org/10.1016/j.rccl.2019.04.003