

Multimodality Imaging of an Unknown Right Atrial Mass

Case Report

Proper interpretation of intra-atrial findings using a single imaging modality often proves to be difficult. We report a 60 year old male with stable coronary artery disease had a transthoracic echocardiography where a right atrial mass was discovered. He was referred to our centre for further cardiac imaging of the right atrium (RA). Cardiac magnetic resonance (panel A, Video 1) and computed tomography (panel B) showed no well-defined mass (arrow heads) but rather a possible membrane crossing the RA. Two dimensional (panel C, Video 2) and three dimensional (panel D, Video 3) transesophageal echocardiography showed a fenestrated membrane (yellow arrow heads), spanning from the crista terminalis to the inferoposterior margin of the coronary sinus ostium, dividing the RA into two parts. The tricuspid valve leaflets (white arrow head) were elongated with apically displaced coaptation point with moderate regurgitation and no elevation in pulmonary artery pressure (Video 4). These findings were consistent with Cor triatriatum dexter. Cor triatriatum dexter is an extremely rare congenital heart anomaly and represents the right counterpart of the relatively more commonly found Cor triatriatum sinister. It is caused by persistence of the right valve of the right horn of the sinus venosus. Clinical manifestations

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may range from severe cyanosis during neonatal period to completely asymptomatic condition with accidental discovery of the membrane, as in our case.





