

A Rare Case of Atrial Myxoma with Neovascularization from a Coronary Cameral Fistula





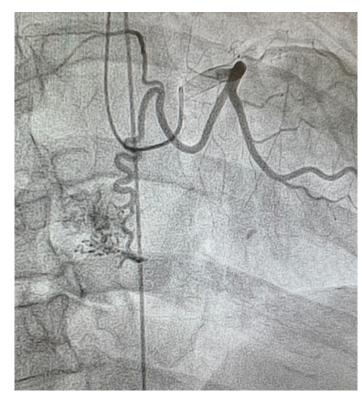
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Introduction

- A myxoma is a primary heart tumor most commonly found in the atria.
- Myxomas are typically anchored to the wall of the chamber through a stalk.
- Myxomas require surgical excision.

Case Presentation

- 79-year-old male presented with chest discomfort and chronic cough.
- Additional complains included dyspnea on exertion and decreased exercise tolerance.
- Echocardiogram showed left atrial myxoma, mild aortic valve regurgitation, mild tricuspid valve regurgitation, and mild pulmonic valve regurgitation.
- CT with contrast showed cardiomegaly with a 2.5 x 2.4 x 2 cm mass in the left atrium.
- Right hilar lymph node calcification was also present.



 Angiogram indicated a well-vascularized left atrium myxoma fed by a coronary fistula of the left circumflex artery via an anomalous branch

Decision Making

- Excisional biopsy and subsequent pathologic report confirmed a wellvascularized myxoma with no stalk present.
- After removal of the myxoma, the patient was fitted with a dual-chamber pacemaker for sick sinus syndrome with sinus arrest and asystole.

Discussion

- Cardiac myxomas are rare, but 75% that are observed are found in the left atrium.
- Most myxomas are attached to the atrium via a stalk, but our patient's myxoma did not have a stalk.
- What makes this case even more unique is the myxoma being vascularized through a left circumflex artery fistula to the left atrium.
- Vascularization from a coronary cameral fistula is very rare.

References: Lenihan DJ, Yusuf SW, Shah A. Tumors affecting the cardiovascular system. In: Zipes DP, Libby P, Bonow RO, Mann DL, Tomaselli GF, Braunwald E, eds. *Braunwald's Heart Disease: A Textbook of Cardiovascular Medicine*. 11th ed. Philadelphia, PA: Elsevier; 2019:chap 95