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Pulmonary Embolism Indicative of Myxoma of the Right Atrium

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Abstract : Objective: Myxomas are rare heart tumors most commonly found in the left atrium. The purpose of this observation is to report a rare case of myxoma of the right atrium revealed by pulmonary embolism. Observation: A 34-year-old patient with no history presented to the emergency room with sudden onset dyspnea. Clinical examination showed arterial pressure at 110/70mmHg, tachycardia at 110bpm, and 90% oxygen saturation. The ECG enrolled in incomplete right bundle branch block. The radio-thorax was normal. Echocardiography revealed the presence of a large homogeneous intra-OD mass, contiguous to the inter-atrial septum, prolapsing through the tricuspid valve, and causing mild tricuspid insufficiency, with dilation of the right ventricle and retained systolic function with PAPs estimated at 45mmHg. A chest scan was performed, revealing the presence of right segmental pulmonary embolism. The patient was put under anticoagulant and underwent surgical resection of the mass; its pathological examination concluded to a myxoma. The post-operative consequences were simple, without recurrence of the mass after one year follow-up. Discussion: Myxomas represent 50% of heart tumors. Most often, they originate in the left atrium, and more rarely in the right atrium or the ventricles. Myxoma of the right atrium can be responsible for life-threatening pulmonary embolism. The most predictive factor for embolization remains the morphology of the myxomas; papillary or villous myxomas are the most friable. Surgery is the standard treatment, with regular postoperative follow-up to detect recurrence. Conclusion: Myxomas of the right atrium are a rare location for these tumors. Pulmonary embolism is the main complication and should routinely involve careful study of the right chambers on echocardiography.

Keywords : pulmonary embolism, myxoma, right atrium, heart tumors
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