

Papillary fibroelastoma of the aortic valve: An unusual cause of angina

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Introduction: Papillary fibroelastoma (PFE) is the third most common benign primary tumor of the heart that usually involves the cardiac valves (aortic valve-44%) and is prone to thromboembolism. We report a case of papillary fibroelastoma located in the aortic valve presenting with recurrent angina.

Case Report: 54 year old female without classical risk factors for coronary artery disease, presented with intermittent episodes exertional chest pain for 6 months. Lungs and cardiac examinations were normal. EKG and cardiac enzymes were normal. Nuclear stress test showed moderate grade perfusion abnormality of the lateral apex with partial reversibility. Transthoracic echocardiogram (TTE) showed 1cm circumscribed mobile mass on aortic valve. The mass was confirmed by Transesophageal echocardiogram (TEE) and coronary CT angiography (CTA).CTA further showed clean coronaries. Surgical removal and histopathological examination of the mass was consistent with benign papillary fibroelastoma. Patient remained free of angina after surgery.

Discussion: Clinical presentation of PFE varies widely, from asymptomatic to severe ischemic or embolic sequelae. It should be differentiated from thrombus, vegetation and myxoma. Symptomatic cardiac papillary fibroelastomas should be surgically removed whereas asymptomatic lesions that are left-sided, mobile or larger than 1 cm should be considered for surgical excision. In our case, coronary CT angiogram was done as there was risk of embolization during cardiac catheterization.

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