Images in cardio-thoracic surgery

Left ventricular aneurysm as a late complication after transventricular closed mitral commissurotomy

Borys Todurov, Miroslav Glagola, Andriy Khokhlov, Vitaly Demyanchuk

Department of Cardiothoracic Surgery, Kyiv Heart Center, Bratyslavska Street, 5 A, 02660 Kyiv, Ukraine
Department of Cardiology, Kyiv Heart Center, Ukraine

Received 24 September 2008; received in revised form 8 October 2008; accepted 9 October 2008; Available online 21 November 2008

Keywords: LV aneurysm; Closed mitral commissurotomy

A 56-year-old woman was referred to our institution for follow-up examination with a history of rheumatic mitral valve stenosis after closed mitral commissurotomy in 1974 and closed recommissurotomy in 1994 at another hospital. Echocardiography (Fig. 1) and ventriculography (Fig. 2) revealed LV aneurysm in the site where a dilatator was previously introduced.

Fig. 1. Two-dimensional echocardiogram demonstrating LV aneurysm (marked round-like area in an apex of LV).

Fig. 2. LV ventriculography showed apical LV aneurysm during the ventricular systole (on the left) and diastole (on the right). The patient was successfully operated and discharged on postoperative day 9.