Heart attack and something else: Caseous degeneration of mitral anullus

Infarto agudo de miocardio y algo más: degeneración caseosa del anillo mitral

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A 79-year-old patient with a history of chest tumor was admitted due to ST-elevation acute coronary syndrome (STEACS) secondary to triple-vessel coronary disease requiring revascularization. Transthoracic echocardiography (TTE) revealed a hyperechogenic image in the zone of the mitral valve with an internal echolucency adhered to the posterior leaflet and measuring approximately 3 × 3 mm in size. The lesion did not alter mitral filling, but caused mild mitral valve insufficiency (Fig. 1). The clinical context and morphological (CAT) features discarded neoplasm, verrucous lesion, abscess or thrombus at mitral valve level. Caseous degeneration of the mitral valve (CDMV) was diagnosed (Fig. 2). Such degeneration is an infrequent condition and constitutes a casual finding of TTE. While CDMV tends to be asymptomatic, it can cause unexpected and serious complications. Conservative management is usually decided.

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Figure 1 Thoracic CAT: the CDMV image (dotted line) shows an oval-shaped calcium deposit in the valve ring and mitral valve leaflets. In rheumatic valve disease the commissures and leaflets would be affected, with involvement of the ring in the advanced stages of the disease.

Figure 2 Transthoracic echocardiography: the image at left (longitudinal plane of the long axis of the left ventricle) shows a hyperechogenic, large mass associated to the posterior leaflet of the mitral valve (arrows). The lesion presents well defined margins, with an internal echolucency corresponding to CDMV. The image at right (longitudinal plane of the short axis of the left ventricle) shows the described lesion to be limited to the posterior leaflet of the valve (arrow).