

An interesting diastolic jet in left ventricle**Sol ventrikülde ilginç bir diyastolik jet**

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Right answer: 2. Eccentric aortic regurgitation

Transesophageal modified long axis view showed that aortic regurgitation jet going through the posterior mitral annulus and atypical exit from the lateral annulus being not merged with diastolic mitral flow (Fig. 2, Video 3. See corresponding video/movie images at www.anakarder.com).

Mitral leaflet perforation may occur secondary to infective endocarditis, trauma, open heart surgery. Clinical presentation mimics mitral valve regurgitation. On physical examination, systolic murmur may radiate to the apex. Systolic mitral regurgitation flow may have seen on TTE. Coronary cameral

fistula is diagnosed by harsh and continuous murmur on physical exam and systole-diastolic turbulent flow pattern on transthoracic echocardiography. Those fistulas may cause myocardial ischemia because of coronary steal phenomenon. Thus, CT-coronary angiography and myocardial perfusion scintigraphy may use for differential diagnosis. Atrioventricular tunnel is a connection between left ventricle and left atrium. On auscultation, the predominant finding is a loud systolic murmur on mesocardiac area and TTE reveals systolic and diastolic turbulent flow.

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Video 3. Transesophageal modified long-axis view of an eccentric aortic regurgitation jet toward lateral mitral annulus

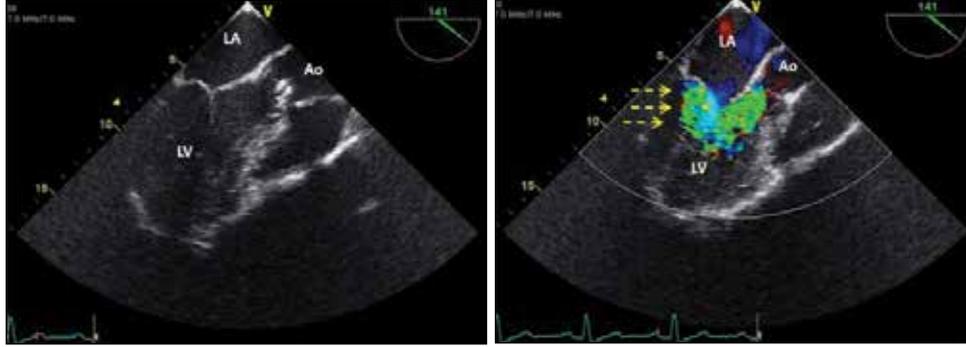


Figure 2. Transesophageal modified long-axis view of eccentric aortic regurgitation jet toward lateral mitral annulus

Ao - ascending aorta, LA - left atrium, LV - left ventricle, RA - right atrium, RV - right ventricle