



FIT Clinical Decision Making

VENTRICULAR PAPILLARY FIBROELASTOMA PRESENTING AS PERIPHERAL ARTERY DISEASE

Poster Contributions
Poster Hall, Hall C
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Session Title: FIT Clinical Decision-Making: Interventional Cardiology, Acute and Stable Ischemic Heart Disease, and Vascular Medicine
Abstract Category: Vascular Medicine
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Background: Cardiac tumors are an exceedingly rare phenomena. Papillary fibroelastomas are the second most common benign cardiac tumors. Despite their propensity to cause embolic strokes and acute coronary syndrome, a major consideration is also that of symptomatic peripheral artery disease as a presentation.

Case: A 77 year-old female with history of a prior transient ischemic attack and hypertension presented to the hospital with severe pain within her right great toe after undergoing partial amputation a couple of weeks prior. On physical exam, she was found to have absent pulses within the popliteal and right femoral arteries. In anticipation for further surgical intervention, pre-operative cardiac evaluation was performed with a transthoracic echocardiogram that showed an ejection fraction of 75%, no regional wall motion abnormalities, and a well defined, mobile mass within the left ventricle measuring 18x14mm.

Decision-Making: Further cardiovascular evaluation was obtained, with transesophageal echocardiogram confirming the finding of a 18x12mm pedunculated mass attached to the septal wall of the left ventricle. Right lower extremity angiography revealed total occlusion of the proximal segments of the right anterior tibial and peroneal arteries, as well as a total occlusion within the distal segment of the posterior tibial artery. Due to the finding of a cardiac mass causing peripheral embolization, the decision for surgical resection was reached. Pathological examination confirmed the diagnosis of papillary fibroelastoma of the left ventricle. The patient tolerated the procedure well and made a successful recovery.

Conclusions: This case highlights the importance of a complete cardiac evaluation for patients presenting with peripheral vascular disease without known risk factors. Furthermore, it reinforces the importance of the echocardiogram to identify or exclude cardiac tumors as a potential cause of peripheral embolic phenomena