Transgastric and Transoesophageal Echocardiographic Views of Right Atrial Appendage

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Evaluation of left atrial appendage by transoesophageal echocardiography before elective cardioversion of atrial fibrillation is a standard procedure in patients who are in fibrillation for more than 48 hours and are either not receiving or receiving suboptimal anticoagulation therapy. Thrombi formed in right atrial appendage may dislodge and result in pulmonary or systemic embolism, later in patients with atrial septal defects or large patent foramen ovale [1, 2]. Therefore, recently, attention is being conferred to evaluate right atrial appendage [1, 2]. Here are presented transgastric and transoesophageal views of right atrial appendage from a patient who underwent transoesophageal echocardiography before elective cardioversion of atrial fibrillation. Area of right atrial appendage was 4.06 cm². Pulsed Doppler evaluation of right atrial appendage revealed peak filling velocity ranging from 0.27 to 0.32 meter/second, and peak emptying velocity ranging from 0.20 to 0.31 meter/second. Patient was suffering from sick sinus syndrome – tachy-brady syndrome – and had a dual chamber pacemaker in place.

References

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