A rare case of a large right ventricular aneurysm

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A 64-year-old woman suffering from NYHA III angina and premature ventricular ectopics underwent catheter studies and transthoracic echocardiography, which revealed triple vessel disease and a large post-infarct right ventricular aneurysm (Fig. 1). Intraoperatively, we performed reconstruction of ventricular cavity using a patch and three graft revascularization, with excellent outcome 6 months following surgery.

Fig. 1. (a) View of the right ventricular aneurysm (AN) through the median sternotomy. Such aneurysms may occur in association with arrhythmogenic right ventricular cardiomyopathy, ischemic, traumatic and inflammatory events, or as a congenital anomaly. (b) The aneurysm has been opened. Notice that the wall of the aneurysm at the right side is not as thick as usually observed at the left ventricle. Although the incidence of sudden death (rupture) is not altered in post-infarcted patients they should be resected as soon as the diagnosis has been set since they affect the overall mortality.

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