

P838**Accessory Mitral Valve Tissue in a 35-year-old female with Significant Left Ventricular Outflow Tract Obstruction and Aortic regurgitation**

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Accessory mitral valve tissue (AMVT) causing left ventricular outflow tract (LVOT) obstruction and aortic regurgitation is a rare congenital cardiac malformation. The true prevalence is not well known but latest literature review identified 104 cases of AMVT from 1963 to 2013.

We present a case of asymptomatic 35-year-old female who came in due to heart murmur. Chest X-ray showed a right-sided aorta and a dilated ascending aorta. An echocardiographic finding of a mobile serpiginous AMVT that parachutes into LVOT with significant gradient of 74 mmHg. There was mild restriction of the aortic right coronary cusp with moderate aortic regurgitation and other finding noted of persistent left superior vena cava. The patient underwent open heart surgery and had an excision of the AMVT and subcommissuroplasty of the right coronary cusp. Histological analysis of the excised specimen showed fragments of valvular tissue with fibrosis. There was no obstruction on repeat echo with mild aortic regurgitation. No postoperative complication noted and was discharged stable.

AMVT usually seen among young patients and it is uncommon among female adult population. LVOT obstruction and aortic regurgitation may be caused by the AMVT. Echocardiography is an important modality in diagnosing and recognizing such anomaly and the optimal treatment is surgery in the presence of significant LVOT obstruction.

Abstract P838 Figure. Intraoperative findings

