Giant Unruptured Sinus of Valsalva Aneurysm Arising from Left Coronary Cusp

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Sinus of Valsalva aneurysm is a rare cardiac anomaly, and arises mainly from a congenital defect of the aortic media or may follow bacterial endocarditis. It occurs in between 0.09 and 0.15% of cases, and comprises up to 3.5% of all congenital cardiac anomalies.¹ Coexisting cardiac lesions, especially a ventricular septal defect or aortic valve regurgitation, may both be present in about 30 to 40% of patients.²,³

A congenital sinus of Valsalva aneurysm is usually clinically silent but may vary from a mild, asymptomatic dilatation detected in routine 2-dimensional echocardiography to symptomatic presentations related to the compression of adjacent structures or intracardiac shunting caused by rupture of the sinus of Valsalva aneurysm into the right side of the heart. Approximately 65-85% of sinus of Valsalva aneurysms originate from the right sinus of Valsalva, 10-30% from noncoronary and left sinuses (<5%) are rare. We describe a young 26 years old male who presented to us with recurrent syncope. 12-lead electrocardiogram was suggestive of monomorphic ventricular tachycardia epicardial in origin (Figure 1). On further investigation cardiac Doppler showed a giant unruptured sinus of Valsalva aneurysm arising from left coronary cusp with mild aortic regurgitation (Figure 2) which was confirmed and better outlined with a complete cardiac catheterisation (Figure 3).

Patient was started on antiarrhythmics and was advised surgery for the aneurysm. Patient was lost to follow up.

References

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