55 year old gentleman presented with complaints of exertional dyspnoea and ECG showing ‘deep T wave’ inversion in the precordial leads. Echocardiographic features (Figure 1) were characteristic of hypertrophic cardiomyopathy (HCM). A thickened endocardium of the proximal interventricular septum in the vicinity of left ventricular outflow tract roused interest (Figure 2).
In autopsy series, a third of hypertrophic cardiomyopathy cases present with asymmetric septal thickening with endocardial thickening representing mitral impact lesion.\textsuperscript{1,2} The characteristic endocardial thickening is observed at echocardiography as an echo-bright endocardium with an adjacent hyporeflective subendocardium. This has been referred to as the “binary” sign and thought to discriminate Anderson–Fabry disease from HCM by some authors\textsuperscript{3} while others have contradictory views.\textsuperscript{4}

We aim to highlight a lesser known echocardiographic feature of HCM.

References