A 39-year-old woman was evaluated for an intra-atrial mass after having suffered a CT-verified stroke. She experienced a total remission of her neurological symptoms within 6 weeks. A search for embolic foci was conducted. Transthoracic echocardiography revealed a mass in the left atrium. MRI confirmed the diagnosis. At surgery, instead of the suspected myxoma, an inverted left atrial appendage was detected and excised.

From the Departments of Cardiovascular Surgery (H.J.A., A.K., W.M., E.W.) and Cardiology (H.F.), Allgemeines Krankenhaus Wien, Austria.

Correspondence to Jan Ankersmit, MD, Department of Cardiovascular Surgery, AKH Wien, Währinger Gürtel 18-20, 1090 Vienna, Austria.

The editor of Images in Cardiovascular Medicine is Hugh A. McAllister, Jr, MD, Chief, Department of Pathology, St Luke's Episcopal Hospital and Texas Heart Institute, and Clinical Professor of Pathology, University of Texas Medical School and Baylor College of Medicine.

Circulation encourages readers to submit cardiovascular images to Dr Hugh A. McAllister, Jr, St Luke’s Episcopal Hospital and Texas Heart Institute, 6720 Bertner Ave, MCI-267, Houston, TX 77030.

(Circulation. 2000;101:e42-e43.)

© 2000 American Heart Association, Inc.

Circulation is available at http://www.circulationaha.org
Inverted Left Atrial Appendage Masquerading As Myxoma
H. J. Ankersmit, A. Kocher, H. Frank, W. Mohl and E. Wolner

Circulation. 2000;101:e42-e43
doi: 10.1161/01.CIR.101.3.e42
Circulation is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231
Copyright © 2000 American Heart Association, Inc. All rights reserved.
Print ISSN: 0009-7322. Online ISSN: 1524-4539

The online version of this article, along with updated information and services, is located on the World Wide Web at:
http://circ.ahajournals.org/content/101/3/e42