Sinus of Valsalva Aneurysm Accompanying Bicuspid Aortic Valve

Hajime Abe¹, Norihiko Takeda¹, Hajime Aoki² and Ryozo Nagai¹

Key words: sinus of Valsalva aneurysm, bicuspid aortic valve, atrioventricular block

(Intern Med 51: 1275, 2012)
(DOI: 10.2169/internalmedicine.51.7477)

A 64-year-old man was admitted with unstable angina pectoris. He had been followed-up at outpatient clinics for mild to moderate aortic regurgitation and bicuspid aortic valve. He developed complete atrioventricular block (AVB) and underwent permanent pacemaker implantation 9 years previously. Cardiac catheterization showed severe stenosis at the left main trunk, as well as unexpected unruptured sinus of Valsalva aneurysms (SVA) (Picture 1). Contrast-enhanced computed tomography (CECT) also detected multiple aneurysms at the coronary cusp (Picture 2). Aortic valve replacement and coronary artery bypass surgery were subsequently performed.

Unruptured SVA is a rare heart disorder occurring in 0.15-1.5% of patients. The common congenital anomalies accompanying SVA are ventricular septal defects, and bicuspid aortic valve (1). AVB and intracardiac conduction disorders also occur in almost half of the SVA patients (2). In conclusion, patients with AVB with bicuspid aortic valves may benefit from investigation of the coronary sinus with CECT or transesophageal echocardiography.

The authors state that they have no Conflict of Interest (COI).

References

¹Department of Cardiovascular Medicine, Graduate School of Medicine, The University of Tokyo, Japan and ²Department of Cardiovascular Medicine, Yokohama Rosai Hospital, Japan

Received for publication February 4, 2012; Accepted for publication February 7, 2012

Correspondence to Dr. Norihiko Takeda, ntakeda-tyk@umin.ac.jp

© 2012 The Japanese Society of Internal Medicine Journal Website: http://www.naika.or.jp/imindex.html