Double-chambered Left Ventricle with Ventricular Fibrillation

Masaya Kato, Shota Sasaki and Keigo Dote

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A 68-year-old man was admitted to our hospital with disturbance of consciousness due to ventricular fibrillation (VF). VF was terminated via automated external defibrillator use in the ambulance. Transthoracic echocardiography demonstrated an abnormally configured left ventricle (LV) with two contracting chambers (LV1 and LV2) separated by an incomplete thick-walled muscular septum (Picture A-D). An abnormal accessory intra-LV septal (arrows) defect was found in the inferior direction at the basal region (Picture C) and in the anterior direction at the apical region in the short-axis view (Picture D). After therapeutic hypothermia, his consciousness was fully recovered and an implantable cardioverter-defibrillator was implanted. A double-chambered LV is a rare congenital entity which generally is diagnosed in patients of the neonatal or pediatric age (1, 2). To the best of our knowledge, this is the first report about an adult case of double-chambered LV with idiopathic VF.

Department of Cardiology, Hiroshima City Asa Hospital, Japan
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Correspondence to Dr. Masaya Kato, ms-katou@asa-hosp.city.hiroshima.jp
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