

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ



Surgical Treatment Of Cardiac Myxoma: 11-years Experience At Sohag University Hospital BY

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CARDIAC MYXOMA : INTRODUCTION

- Cardiac myxoma is the most common benign tumor of the heart
- The majority located in the left atrium.
- Most patients are aged 30–60 years
- More prevalence in females

CARDIAC MYXOMA : INTRODUCTION

- Patients often present with one or more symptoms of a triad of obstructive, embolic and constitutional manifestations
- Some cases are asymptomatic and they are incidentally discovered

CARDIAC MYXOMA : INTRODUCTION

- Diagnosis depends on a high index of suspicion and it is established with echocardiography.
- Once diagnosis is made , prompt surgical resection is recommended.

CARDIAC MYXOMA : INTRODUCTION

❑ Crafoord in 1954, reported The first successful surgical resection of a left atrial myxoma

CARDIAC MYXOMA : INTRODUCTION

- The basic principles of surgical treatment for cardiac myxomas include :
 - ✓ complete wide resection of the tumor with safety margin
 - ✓ avoidance of residual tumor
 - ✓ prevent intra-operative embolization.

AIM OF THE STUDY

We Retrospectively review our experience with 21 patients who were subjected to surgical treatment for cardiac myxoma at our department over an 11-year period. (Jan.2006- Dec.2016)

PATIENTS AND METHODS

This retrospective study was conducted at our tertiary university hospital. All cardiac myxoma patients who have been operated upon at our cardiothoracic surgery department in the period from January 2006 to December 2016 were enrolled in the study.

PATIENTS AND METHODS

- Our aim from this study is to report and evaluate our hospital experience in the surgical treatment of cardiac myxoma.
- Complete data of those patients have been extracted from the department database
- The pre-operative, operative and post-operative details were collected and analyzed.

PATIENTS AND METHODS

- Preoperative data: included age, sex, main complaint, other symptoms
- Pre-operative diagnosis was established in all patients by echocardiography.
- Pre-operative coronary angiography was carried out in all patients older than 40 years and in younger patients with suspected coronary artery disease.

LEFT ATRIAL MYXOMA

As seen by Trans-thoracic Echo -cardiography



PATIENTS AND METHODS

Once the diagnosis of cardiac myxoma was made, the patients were subjected to operation without delay.

PATIENTS AND METHODS

- Heart was not manipulated until the aorta had been cross clamped to avoid tumor fragmentation and systemic embolization.
- In case of right atrial myxoma and in left atrial myxoma with shunt, pulmonary artery was included in the aortic cross clamp to avoid pulmonary embolization.

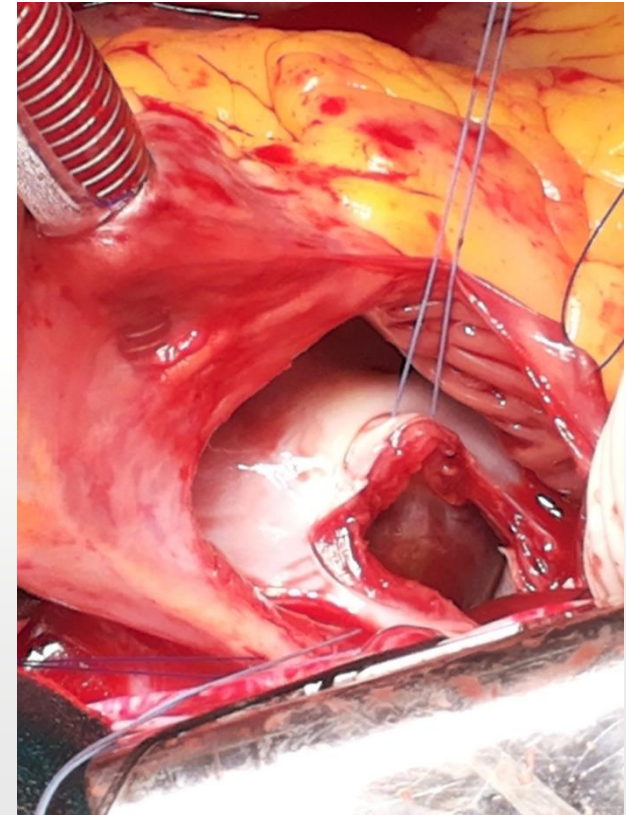
PATIENTS AND METHODS

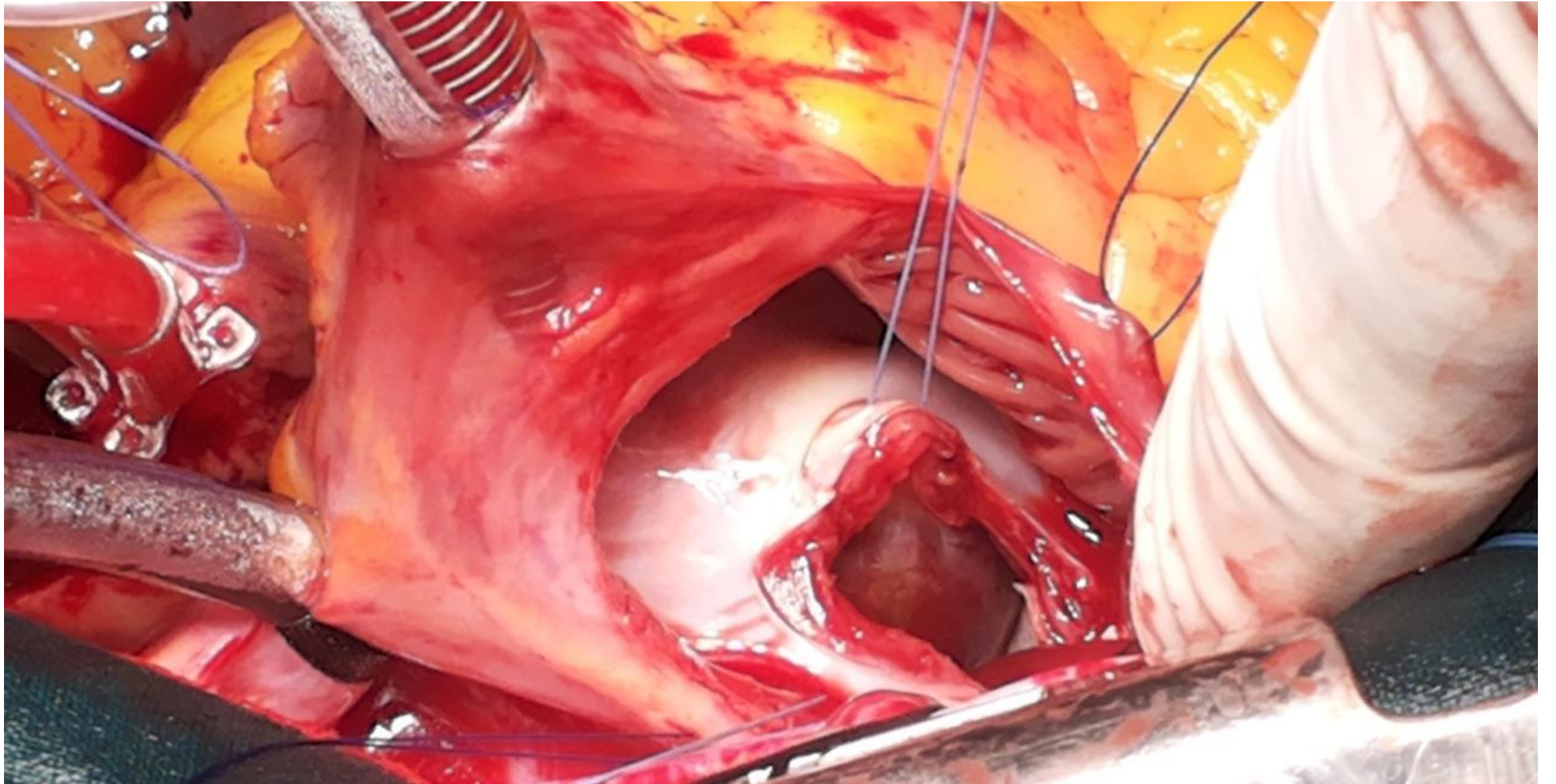
- The main surgical approach for most cases of left atrial (LA) myxoma was right atrial trans-septal approach ,
- Right atriotomy for right atrial myxoma.

LEFT ATRIAL MYXOMA

Right atrial –trans-septal approach

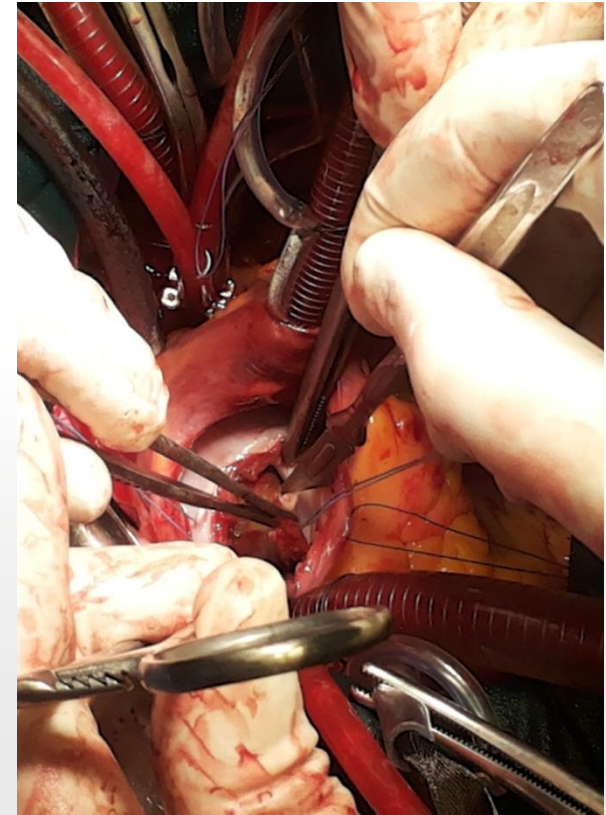
Operative – view

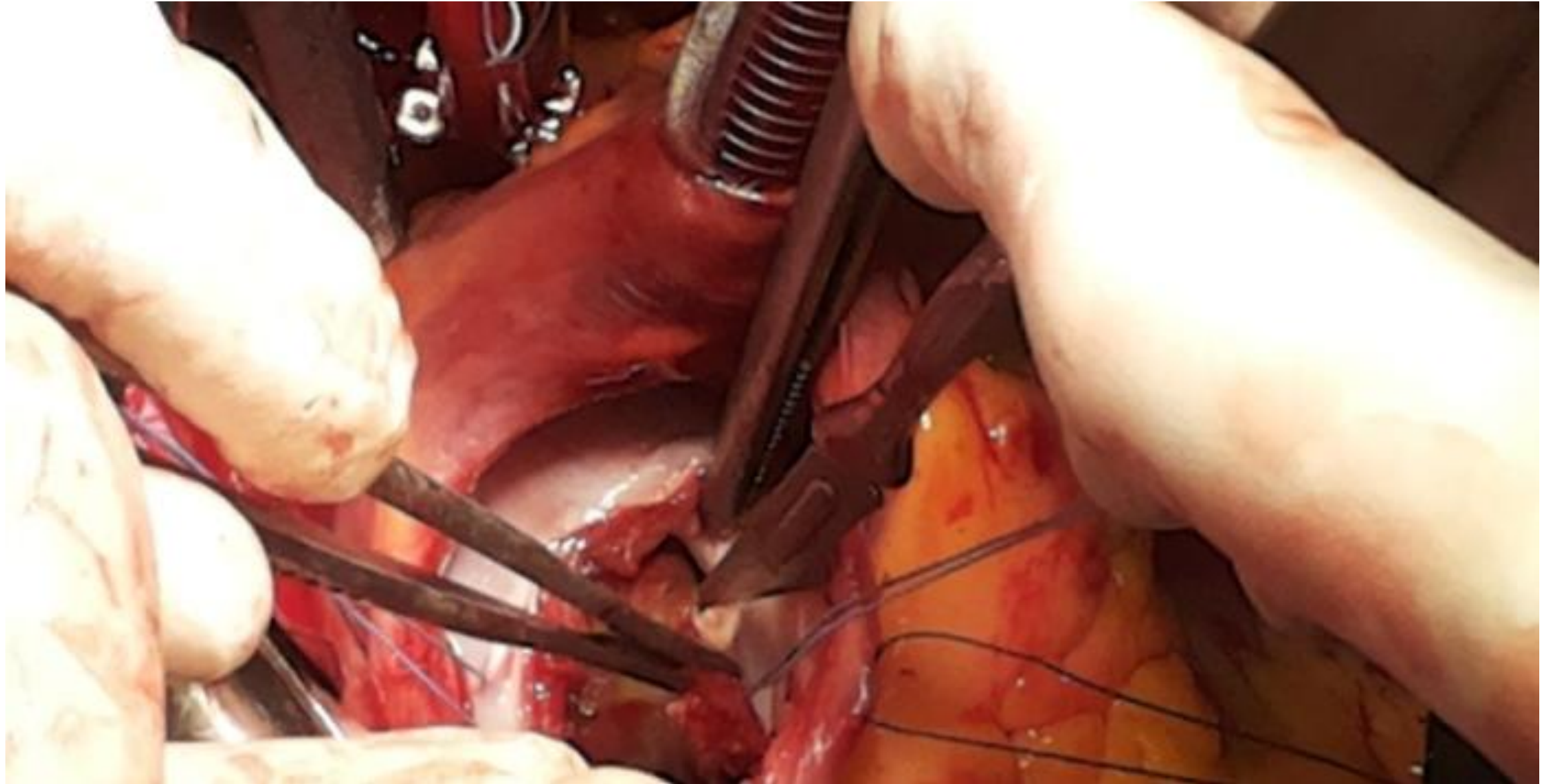


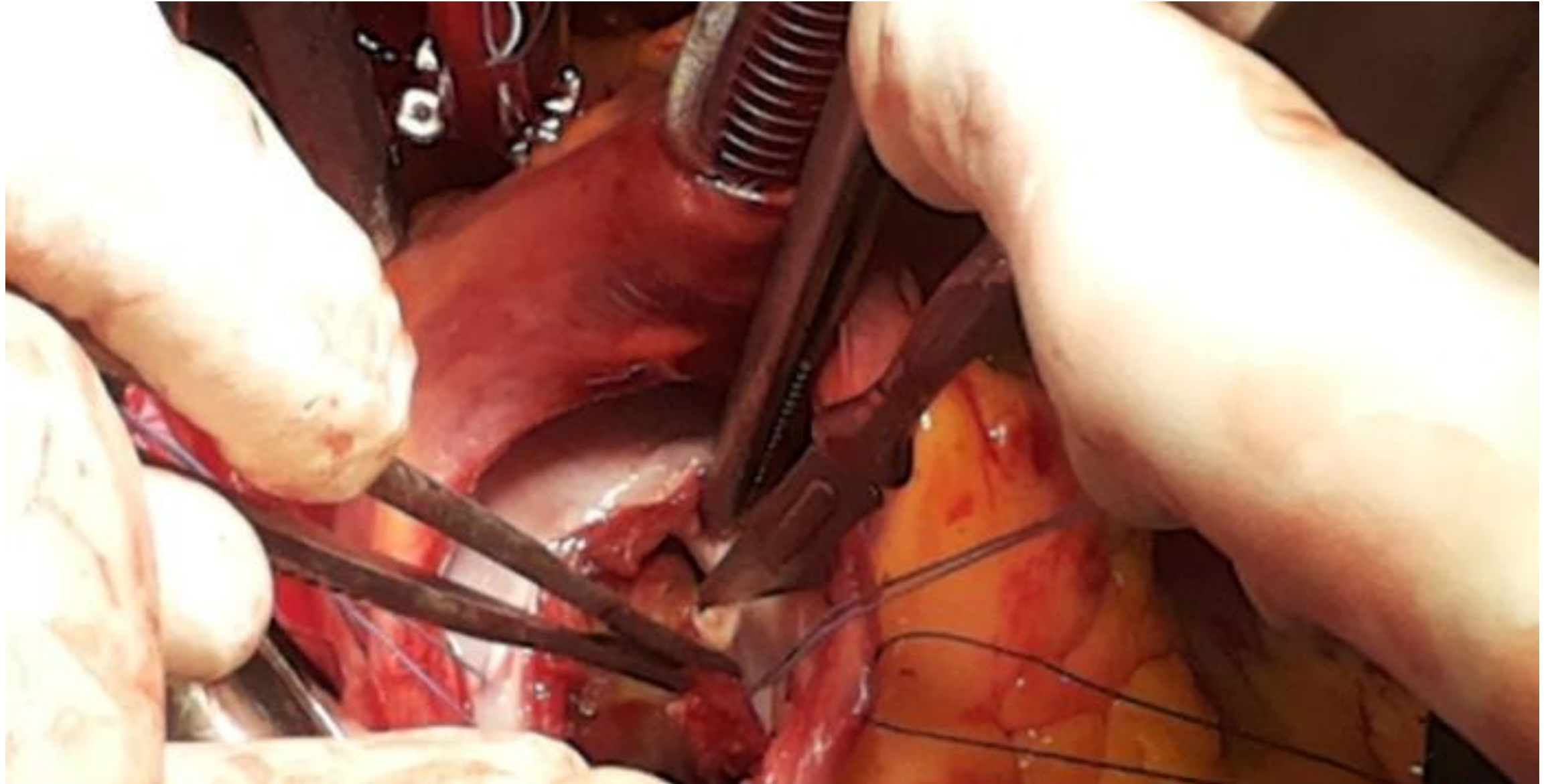


LEFT ATRIAL MYXOMA

Left atrial myxoma



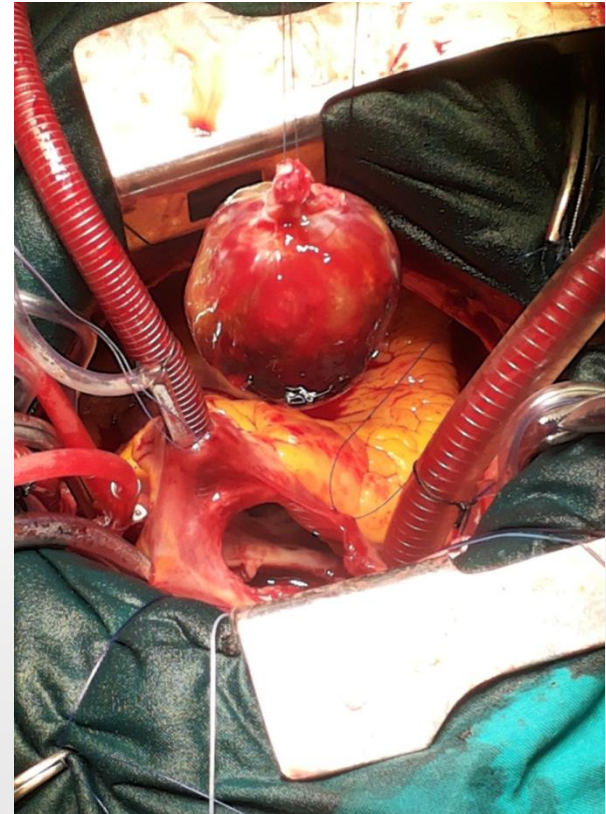


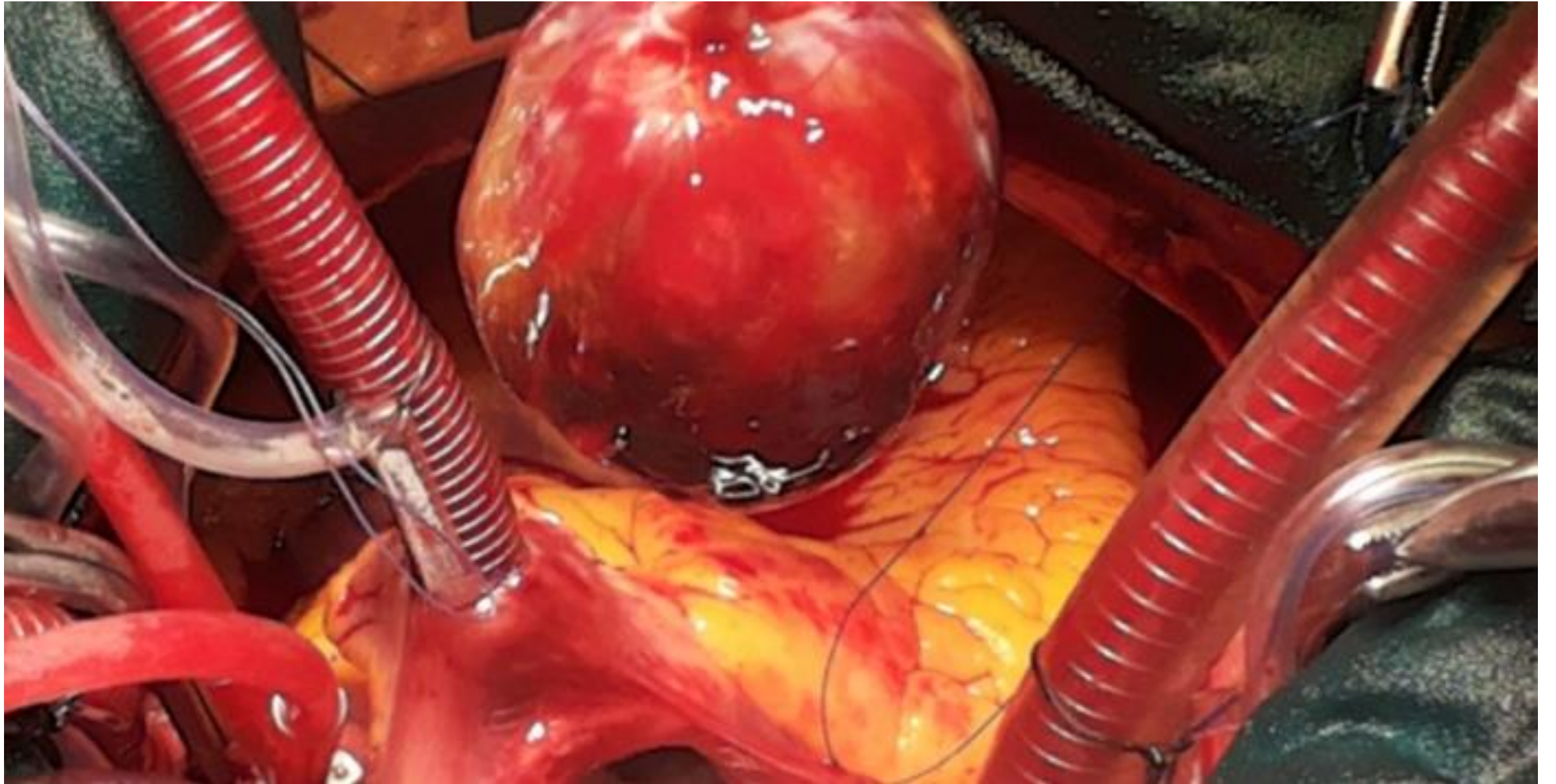


LEFT ATRIAL MYXOMA

Right atrial –trans-septal approach

Operative – view

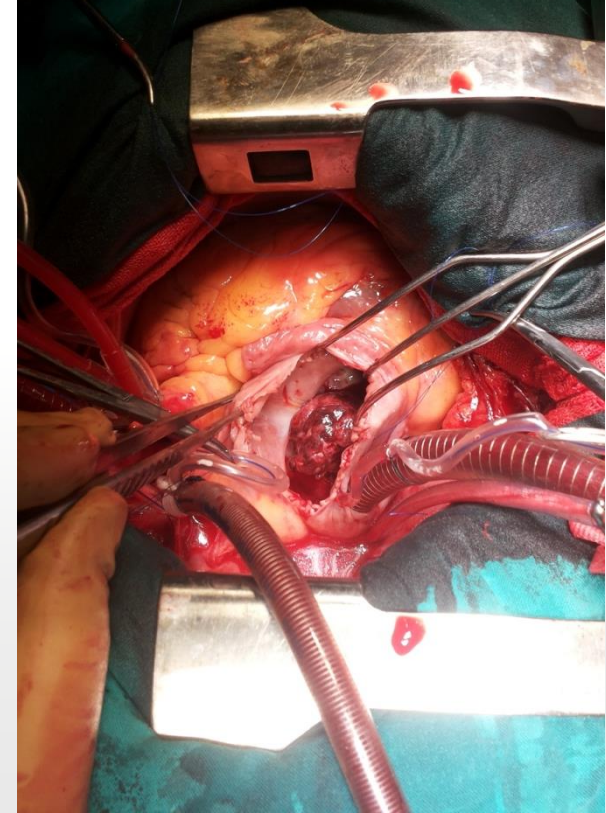




RIGHT ATRIAL MYXOMA

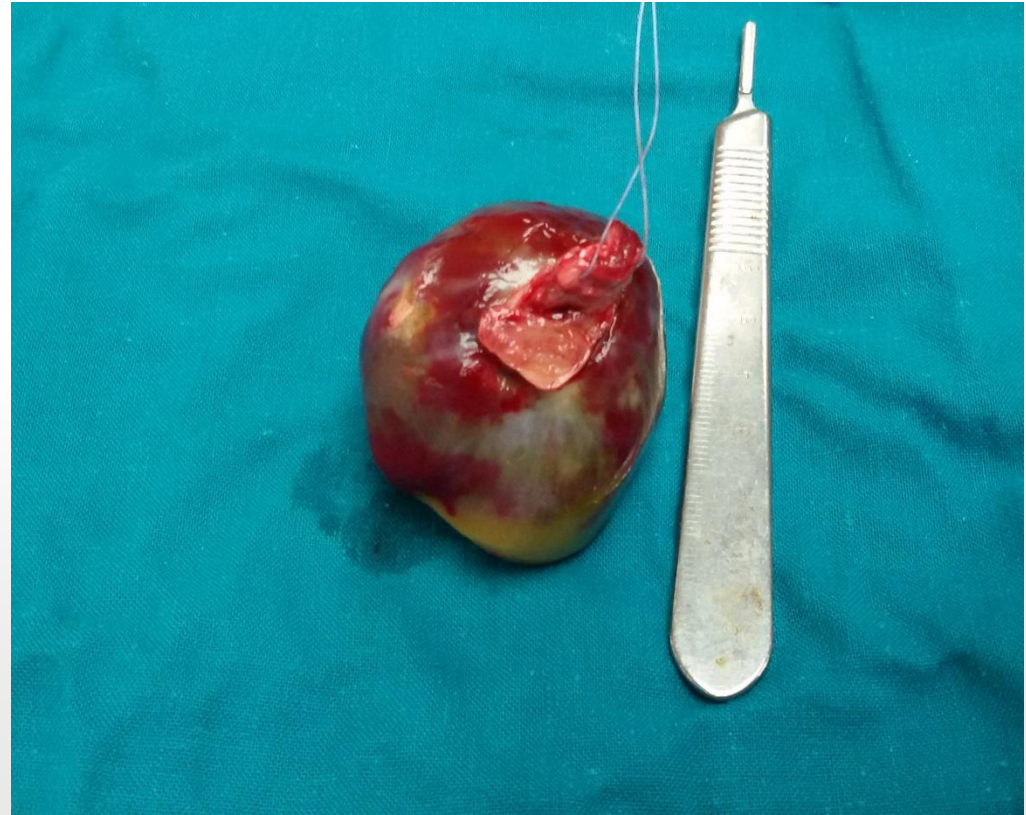
Right atriotomy

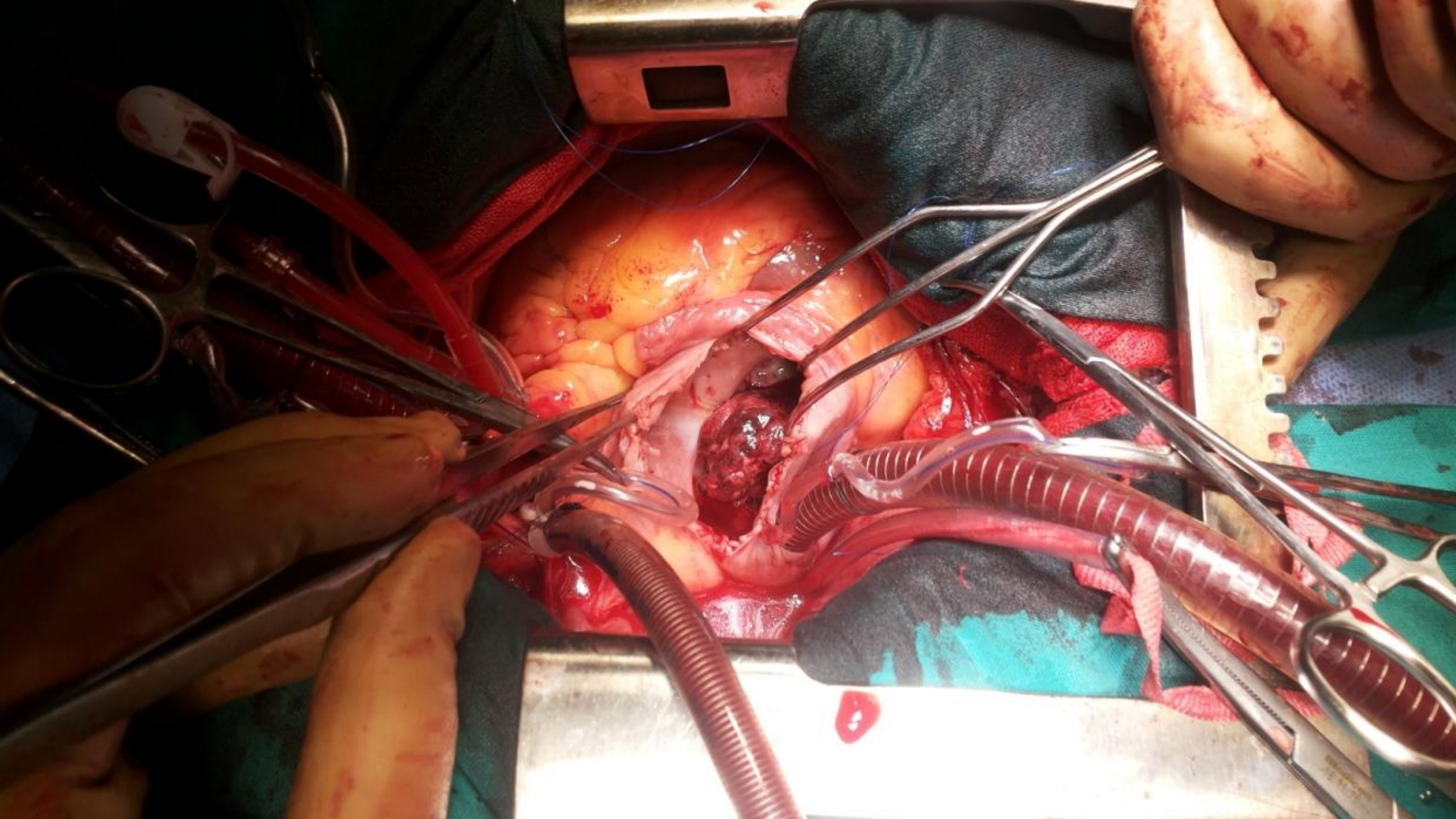
Operative view



CARDIAC MYXOMA

SPECIMEN





CARDIAC MYXOMA : RESULTS

total number	21		
sex			
	females	13	61.90%
	males	8	38.10%
age			
	range	28 - 71	
	mean age	55.2	
	20-30	1	4.76%
	31-40	1	4.76%
	41-50	4	19%
	51-60	10	48%
	61-70	4	19.00%
	71-80	1	4.76%

CARDIAC MYXOMA : RESULTS

Symptoms	dyspnea	15	71.40%
	syncope	3	14.20%
	palpitation	5	23.80%
	lower limb edema	1	4.76%
	chest pain	1	4.76%
	stoke	3	14.20%
	prepheral embolism	1	4.76%
	costitutional symptoms	6	28%
	cardiogenic shock	1	4.76%

CARDIAC MYXOMA : RESULTS

location	left atrium	17	81%
	right atrium	4	19%
surgical approach	right atrium	right atriotomy	4 (100%)
	left atrium	left atrial	1 (5.9%)
		biatrial	3(17.6%)
		right atrial trans-septal	13(76.5%)

CARDIAC MYXOMA : RESULTS

associated procedures

		5	23.80%
	CABG	2	
	Tricusped valve repair	1	
	mitral valve repalcement	1	
	Bullectomy	1	

CARDIAC MYXOMA : RESULTS

NYHA functional class	before	after
I	3 (14.3%)	14 (66.7%)
II	6 (28.6%)	5 (23.8%)
III	10 (47.6%)	1 (4.76%)
IV	2 (9.5%)	1 (4.76%)

CARDIAC MYXOMA : RESULTS

ICU stay	2.1±0.6 days
Hospital stay	8.4±1.6 days
X-clamp time (min)	20-130 (35)
CPB time (min)	30- 170 (55 min)
recurrence	0

CARDIAC MYXOMA : RESULTS

post operative complications		6	28.60%
	AF	2	
	atelectasis	1	
	temporary conduction defect	2	
	bleeding (revision)	1	
peri-operative mortality	1		4.76%

CONCLUSION

- ❑ Although cardiac myxomas are benign tumors, they should be treated surgically as soon as possible after diagnosis because of embolic complications and obstructive signs which may lead to death
- ❑ Appropriate surgical technique gives excellent results.

Thank You