

## Papillary Fibroelastoma Developing from the Left Ventricular Septum

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**ABSTRACT.** Case: A 62-year-old male was admitted to our hospital for left side, intermittent claudication and shortness of breath on exertion. An echocardiogram revealed a tumor in the left ventricle and aortic valve stenosis. A coronary artery lesion (one vessel) and left external iliac artery occlusion were also detected by angiography. The left ventricular tumor was resected using the aortic approach. Replacement of the aortic valve was also performed. Based on our pathological observations, we concluded that a papillary fibroelastoma had developed from the ventricular septum. Due to the risk of embolism, it is advised that intracardiac tumors be surgically removed as rapidly as possible.

**Key words** ① papillary fibroelastoma ② left ventricular tumor  
③ cardiac tumor ④ surgery

Papillary fibroelastomas, which are the third most common tumor type, following myxomas and lipomas, account for 10% of benign cardiac tumors. Due to the low frequency of cardiac tumor occurrence, this type of tumor is rarely encountered. The majority of papillary fibroelastoma cases are discovered during cardiotomy or autopsy, but the recent increase in use of echocardiogram analysis has resulted in increased detection of this disease. We report a case involving a papillary fibroelastoma diagnosed by surgical excision of a tumor derived from the left ventricular wall.

### CASE REPORT

Approximately three years ago, a 62-year-old male began experiencing left side, intermittent claudication, as well as shortness of breath, when walking. He had begun to experience intermittent claudication after walking a distance of 200 m four months previously. Consequently, he was referred to our clinic. A systolic ejection murmur (Levin III/VI, dissipated in the cervical region) with peaks at the right



