Porcelain atrium: Rheumatic heart disease

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The patient was a 69-year-old woman with known rheumatic heart disease who, in the past, underwent mechanical mitral valve replacement and permanent pacemaker insertion. She presented with dyspnea and was found to have critical aortic stenosis. A chest x-ray (Figure 1) demonstrated cardiomegaly, mechanical mitral valve, pacemaker and a calcified left atrium. She underwent cardiac catheterizations to evaluate hemodynamic and coronary disease. Fluoroscopic imaging of

Figure 1) Chest x-ray demonstrating cardiomegaly, mechanical mitral valve, pacemaker and calcified left atrium

the left atrium during cardiac catheterization provided appreciation of the extent of calcification (Figure 2).

Calcified left atrium is most commonly seen in association with rheumatic heart disease. Rarely, the calcification involves the entire left atrium and has been described as a porcelain atrium. Porcelain atrium is notable not only for its rarity but more because of its surgical implications (1). Endoatriectomy at the time of valve replacement may be necessary.

Figure 2) Fluoroscopic image showing the extent of the calcification

REFERENCE

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