Congenitally corrected transposition of the great arteries: three-dimensional echocardiography diagnosis

A healthy male newborn was submitted to his first-day three-dimensional (3D) echocardiogram (see movie clip on the journal's website at <http://www.cardiologie.nl>.) Physical examination was normal.

The subcostal short-axis view at valvular plane shows the typical opening as 'fish mouth like' mitral leaflets in a morphological left ventricle (delicate trabeculated wall and cone absence) with right localisation in this case (arrows). On left localisation, the tricuspid valve is shown connected with a gross trabeculated wall defining the morphological right ventricle. In systole (closed valves), between the valves and connecting with the morphological left ventricle, the pulmonary artery trunk (asterisk) and its bifurcation into the main two branches are clearly shown.

All these findings (double discordance) shown in a unique 3D-echocardiographic view allow the definitive diagnosis of congenitally corrected transposition of great arteries (figure 1).

Real-time 3D echocardiography provides a simple approach to complex congenital heart disease and, as in the reported case, one image helped to make a complex diagnosis. ■

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Figure 1. Subcostal short-axis three-dimensional echocardiographic view showing the diagnostic double discordance.

Cardiogenic shock

A 73-year-old man was acutely referred to our hospital in cardiogenic shock. Despite maximal inotropic therapy his condition rapidly deteriorated. Echocardiography revealed a low cardiac output state and multiple large, mural and spherical thrombi were visualised in the left ventricle. Due to patient's lifestyle, the diagnosis of alcoholic cardiomyopathy was suggested. ■

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The continuation of this article and moving images illustrating this condition are shown on the journal's website at www.cardiologie.nl.