Sir,

We read with great interest the communication by Hunter et al. (British Heart Journal (1977), 39, 954). The authors described thickening and diminished movement of the baffle in 4 patients with caval obstruction.

We recently saw a patient with baffle obstruction who, in addition, had a baffle leak and pronounced systolic anterior movement of the tricuspid valve on M-mode echocardiogram (Fig.). Cardiac catheterisation showed an opening in the baffle suture line, a 1:3:1 Qp/Qs ratio, an 11 mmHg mean pressure gradient between the superior vena cava and the systemic venous atrium, and diffuse right ventricular hypokinesis. There was no right ventricular outflow tract obstruction.

The echocardiographic finding of tricuspid valve systolic anterior motion after Mustard operation has not been reported previously. Nanda et al. (1976) however described systolic anterior motion of the baffle itself in 3 patients who had a 2:1 or greater baffle shunt. Because both the baffle obstruction and shunt were localised to an area low in the systemic venous chamber in our patient, the stream may have impinged on the tricuspid valve, causing it to move anteriorly during systole. Alternatively, the abnormal tricuspid valve motion may relate to the right ventricular dysfunction.


Reference

Fig. M-mode echocardiogram showing prominent systolic anterior motion of the tricuspid valve. RV, right ventricle; TV, tricuspid valve.
Echocardiographic visualisation of the interatrial baffle after Mustard's operation.
E Kinney, W Reeves, W Berman and R Zelis

*Br Heart J* 1979 41: 359
doi: 10.1136/hrt.41.3.359

Updated information and services can be found at:
http://heart.bmj.com/content/41/3/359.citation

These include:

**Email alerting service**
Receive free email alerts when new articles cite this article. Sign up in the box at the top right corner of the online article.

Notes

To request permissions go to:
http://group.bmj.com/group/rights-licensing/permissions

To order reprints go to:
http://journals.bmj.com/cgi/reprintform

To subscribe to BMJ go to:
http://group.bmj.com/subscribe/