Correspondence

Unusual echocardiographic appearance of intracardiac thrombi in a patient with endomyocardial fibrosis

Sir,

We were interested to read the report by Wiseman *et al* (1986;56:179–81) describing a patient with intracardiac thrombi which had echolucent centres.

We recently encountered a similar echocardiographic appearance in a 72 year old woman admitted with cardiac failure. Cross sectional echocardiography showed biventricular dilatation with uniformly reduced ventricular function that was

Figure Echocardiogram in the parasternal short axis view at the level of the papillary muscles showing the mass with an echolucent centre.

compatible with a congestive cardiomyopathy. A spherical mass with a thin echogenic perimeter and a large echolucent centre was seen to be attached to the antero-septal wall of the left ventricle just below the level of the papillary muscles. Although cardiac tumours can have small echolucent areas, we felt that the position and the clinical setting of this lesion made ventricular thrombus with liquefaction at its centre the most likely diagnosis. Despite anti-coagulation the patient sustained a left sided hemiplegia ten days after admission and repeat echocardiography showed the lesion to be smaller and uniformly echodense. We believe that the echocardiographic findings were the result of a thrombus with a liquefied centre which subsequently became partly embolised. The histology in the case reported by Wiseman *et al* lends support to our presumptive diagnosis.

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