Multimodality imaging of a hiatal hernia compressing the left atrium

Multimodalne obrazowanie przepukliny rozworu przełykowego uciskającej lewy przedsionek

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A 73-year-old woman was referred to our outpatient clinic with complaints of nausea and vomiting. Transthoracic echocardiography apical four-chamber view showed a mass (M) compressing the left atrium (LA) (Fig. 1A). Full-volume three-dimensional transthoracic echocardiography after cropping the left and right ventricle walls revealed a mass compressing the LA (Fig. 1B). Subcostal view of the stomach (STO) and oesophagus (ESO) showed the reflux of stomach contents in real-time viewing (Fig. 1C). Oblique sagittal (Fig. 1D) and coronal (Fig. 1E) computed tomography (CT) angiography images revealed a hiatal hernia (HH) compressing the LA. Oblique sagittal view of coloured three-dimensional volume rendered CT angiography images also demonstrated a relationship between the HH and the LA (Figs. 1F, G). A close relationship between the LA and HH may result in extrinsic LA compression. For this reason, the full spectrum of non-invasive cardiac imaging modalities should be performed in the diagnosis of HH.
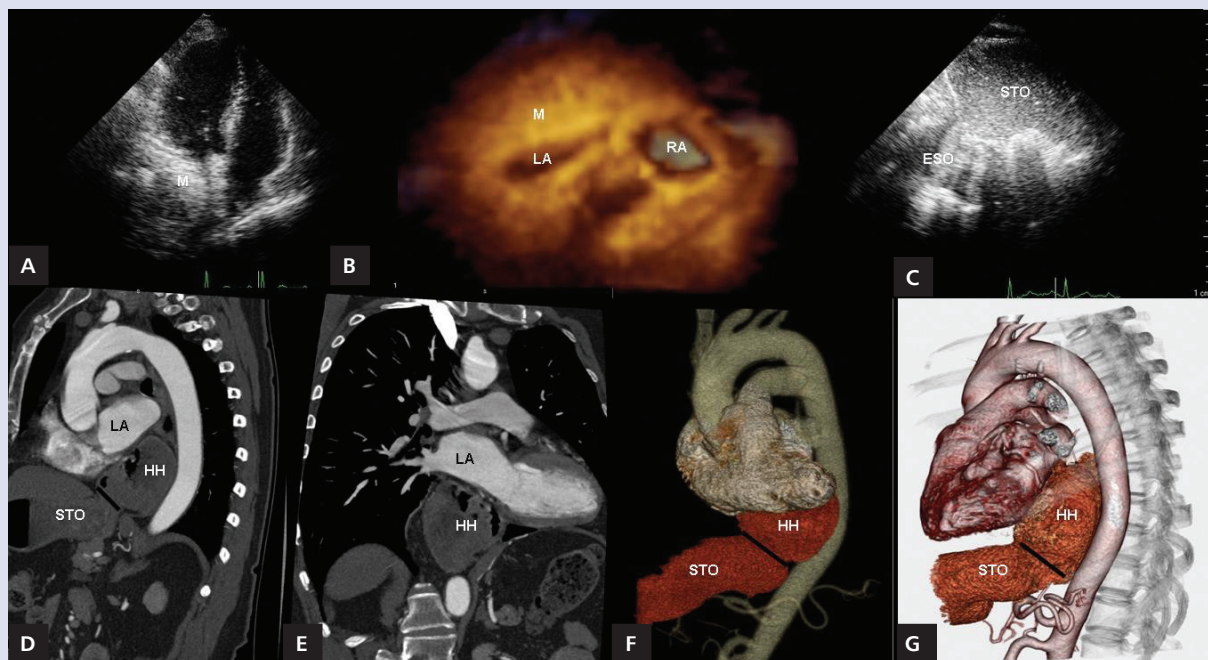

Figure 1. A–C. Transthoracic echocardiography; **D–G.** Computed tomography; RA — right atrium; rest abbreviation — see the text

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